Edgar Filing: HERBALIFE LTD. - Form 4/A

HERBALIFE	LTD.											
Form 4/A												
June 04, 2015												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMIS							COMPAREION	OMB APPROVAL				
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check this box if no longer STATEMENT OF CHAN				GES IN BENEFICIAL OWNERS						January 31,		
								NERSHIP OF	Expires:	2005		
subject to Strate view of Chart				SECURITIES					Estimated average burden hours per			
Form 4 or									response 0.5			
Form 5	Filed p	pursuant to	Section 16	6(a) of the	e Securiti	es Ez	xchang	ge Act of 1934,				
obligations may contin				•	•			of 1935 or Sectio	n			
<i>See</i> Instruct 1(b).		30(h)	of the Inv	vestment	Compan	y Act	: of 19	40				
(Print or Type Re	esponses)											
1 Name and Ad	ldress of Reporti	ng Darson *	. .		m . 1	n 1.		5 Palationship of	Paparting Dar	son(s) to		
Bermingham			2. Issuer Symbol	Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
• • • • • • • • • • • • • • • • • • • •				LIFE LTD. [HLF]								
				B. Date of Earliest Transaction				(Check all applicable)				
(Lust)	(1133)	(made)	(Month/Da					X Director 10% Owner				
			05/07/20	•				Officer (give titleOther (specify below)				
Filed(Mo			4. If Amer	f Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
				d(Month/Day/Year)				Applicable Line)				
05/11/20 LOS ANGELES, CA 90015				1					_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Ac	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	any		emed on Date, if	TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5)				Securities	5. Ownership Form: Direct D) or	7. Nature of Indirect Beneficial		
			Day/Year)				Owned I	ndirect (I) Instr. 4)	Ownership (Instr. 4)			
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				
Common Stock (1)	05/07/2015			А	2,510 (1)	А	\$0	27,263	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	3	ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Bermingham Richard P 800 W. OLYMPIC BLVD. LOS ANGELES, CA 90015	Х						
Signatures							

Richard P. Bermingham by Mark J. Friedman, Attorney-in-Fact

**Signature of Reporting Person

Date

06/03/2015

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Consists of restricted stock units granted under the Herbalife Ltd. 2014 Stock Incentive Plan. This line item is being re-reported solely to

(1) gain access to the electronic filing system to correct the vesting schedule of the restricted stock units granted to the reporting person. This award will vest 100% on April 15, 2016.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.