FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	pe Response	s)												
1. Name and Address of Reporting Person * Ashby Faye L.				2. Issuer Name and Ticker or Trading Symbol Norwegian Cruise Line Holdings Ltd. [NCLH]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 7665 CORPORATE CENTER DRIVE			3. Date of Earliest Transaction (Month/Day/Year) 12/11/2019					X Offic	SVP & C	hief Account	Other (specify bing Officer	elow)		
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
MIAMI,	FL 33126										ed by Wore man	One Reporting	CISON	
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		if Code (Instr	(Instr. 8)		4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)		Beneficia Reported	Reported Transaction(s) Form		Ownership Form:	Beneficial	
				(Month/Day/Yea	r) Co	le	V Amou	(A) or (D)	Price	(Instr. 3 a	ind 4)			Ownership (Instr. 4)
		12/11/2019		S		1,780	5 D	\$ 55.5	37,812			D		
Reminder:	Report on a s	separate line for	r each class of secur	rities beneficially	owned d	P	Persons v	ho resp			ction of inf			1474 (9-02)
Reminder:	Report on a s	separate line for	Table II -	Derivative Secur	ities Acc	P c tl	Persons ventained the form of	ho resp in this f isplays	orm and a curre	re not requently valid	uired to res OMB cont	formation spond unle trol numbe	ss	1474 (9-02)
1. Title of Derivative Security	•	3. Transaction	Table II - 3A. Deemed Execution Da		ities Accevarrants	uired c, opti cr cr titive ed ed	Persons ventained the form of	ho resp in this f isplays of, or B rtible sec rcisable ion Date y/Year)	eneficial enrities 7. An Un See (In 4)	re not requently valid	OMB conf	spond unle	of 10. Ownersl Form of Derivati Security Direct (1 or Indire	11. Natur of Indire Beneficia Ownersh (Instr. 4)

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Ashby Faye L. 7665 CORPORATE CENTER DRIVE MIAMI, FL 33126			SVP & Chief Accounting Officer				

Signatures

/s/ Daniel S. Farkas, as attorney-in-fact for Faye L. Ashby	12/13/2019
**Signature of Reporting Person	Date

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).

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.