FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| wasnington, | D.C. | 20549 |
|-------------|------|-------|
| | | |

| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
|---|--|
| Instruction 1(b). | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |

| OMB APPR | OVAL |
|----------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average bu | rden |
| hours per response: | 0.5 |

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

| 1. Name an Bernste (Last) | 3. D | Susuer Name and Ticker or Trading Symbol CARNIVAL CORP [CCL] Date of Earliest Transaction (Month/Day/Year) | | | | | | | | | | all app Direct Office below | er (give title w) | 10 ⁰ Ottl bel | % Owner ner (specify ow) | | | | | | |
|---|---|---|---------------|---------|--|---|---|--|---------------------------------------|-------|---|---|----------------------|--------------------------------|--------------------------------|---|---|---|-------------|--|--|
| CARNIVAL CORPORATION 3655 NW 87TH AVE | | | | | 01/ | 01/11/2016 | | | | | | | | | Chief Financial Officer | | | | | | |
| (Street) MIAMI (City) | FL (St | | 33178 Zip) | | 4. If | If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | | |
| | | Tabl | e I - No | n-Deriv | ative | Sec | uritie | s Acc | quired, | , Dis | posed o | f, or | Bene | eficia | lly (| Owne | ed | | | | |
| Date | | | | Date | Date Exc Month/Day/Year) if a | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Transaction Dispos Code (Instr. 5) | | Disposed | ities Acquired (A) d Of (D) (Instr. 3, 4 | | | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | of Indirect | | |
| | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | - 1 | Transaction(s) (Instr. 3 and 4) | | | | | |
| Common Stock 01/11 | | | | | /2016 | | A ⁽¹⁾ | | 14,831 ⁽²⁾ A | | \$(| 67,418.291(3) | | D | | | | | | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | / Ov | vned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | erivative Conversion Date Execution Date curity or Exercise (Month/Day/Year) if any | | Date, | | Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | ative rities ired osed . 3, 4 | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares | | ount nber | nt er | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownersh Form: Direct (D or Indire (I) (Instr. | Beneficial Ownership ct (Instr. 4) | | | |

Explanation of Responses:

- 1. Grant of restricted stock made pursuant to the Carnival Corporation 2011 Stock Plan. The restriction on the shares lapse on the third anniversary of the grant date.
- 2. The grant was approved by the Compensation Committee as a total value to be received in the form of restricted shares. The Compensation Committee also approved that the number of shares was to be determined by dividing the value by the closing price on date of grant.
- 3. Includes shares acquired pursuant to the dividend reinvestment feature of the reporting person's brokerage account.

01/13/2016 /s/ David Bernstein

** Signature of Reporting Person Date

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

- * 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.

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 Number.