SEC Form 4	
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Instruction 1(b).

## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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

STATEMENT	OF	<b>CHANGES IN BENEFICIAL</b>	OWNERSHIP
	<b>U</b> .		

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 and Address of Reporting Person <sup>*</sup> Lahey Katie		Person <sup>*</sup>	2. Issuer Name and Ticker or Trading Symbol <u>CARNIVAL CORP</u> [ CCL ]	(Check	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u></u>			3. Date of Earliest Transaction (Month/Day/Year)		Director Officer (give title	10% Owner Other (specify				
(Last)	(First)	(Middle)	04/21/2023		below)	below)				
C/O CARNIVAL CORPORATION 3655 N.W. 87TH AVENUE		ATION	4. If Amendment, Date of Original Filed (Month/Day/Year)	ing (Check Applicable						
				X	Form filed by One Re	porting Person				
(Street)	FL	33178			Form filed by More th Person	an One Reporting				
·		55176	Rule 10b5-1(c) Transaction Indication							
(City)	(State)	(Zip)	Check this box to indicate that a transaction was made pursua satisfy the affirmative defense conditions of Rule 10b5-1(c). Set			an that is intended to				
		Table I - Non-De	rivative Securities Acquired Disposed of or Ben	oficially	, Owned					

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150. 4)	
Common Stock	04/21/2023		<b>A</b> <sup>(1)</sup>		18,656(2)	Α	\$ <mark>0</mark>	54,498	D		

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

		-	(5-,	,	, .		,					/				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Number 6. Date of Expiral Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4		Expiration Da	Amount of Securities		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					

## Explanation of Responses:

1. Grant of restricted shares made pursuant to the Carnival Corporation 2020 Stock Plan. The restriction on the shares lapses on the third anniversary of the grant date.

2. The Board of Directors approved a value of \$175,000 to be awarded to the reporting person in the form of restricted shares. The number of restricted shares was determined by dividing this value by the closing price of a share of Carnival Corporation common stock on the date of grant, then rounding down to the nearest whole share.



\*\* Signature of Reporting Person Date

04/25/2023

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

 $^{\ast}$  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.