## Edgar Filing: KRUSE STEIN - Form 4

**KRUSE STEIN** 

Form 4											
January 17, 2	Л								OMB AF	PROVAL	
	UNITED	STATES					NGE	COMMISSION	OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 o Form 5 obligatio may cont <i>See</i> Instru 1(b).	6. Filed pur <sup>ns</sup> Section 17(	Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							Expires: Estimated a burden hour response	Apires: January 31, 2005 stimated average urden hours per	
(Print or Type I	Responses)										
KRUSE STEIN Symbo			Symbol	suer Name <b>and</b> Ticker or Trading ol NIVAL CORP [CCL]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) CARNIVAI NW 87TH A	L CORPORATIC	Middle) DN, 3655	3. Date of (Month/E 01/15/2	•	ransaction			Director X Officer (give below)	10%	Owner er (specify	
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
MIAMI, FL	, 33178							Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-E	Derivative S	Securi	ties Ac	quired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deem Execution any (Month/D	n Date, if	3. Transactio Code (Instr. 8) Code V	4. Securiti or(A) or Dis (D) (Instr. 3, 4 Amount	sposed	of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	01/15/2013			A <u>(1)</u>	26,560 (2)	А	\$0	116,495.6084 (3)	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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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				
KRUSE STEIN CARNIVAL CORPORATION 3655 NW 87TH AVE MIAMI, FL 33178			President & CEO, HAL					
Signatures								
/s/ Stein Kruse 01	/17/2013							

<u>\*\*</u>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).
- (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.

The grant was approved by the Compensation Committee as a total value to be received in the form of restricted shares. The

- (2) 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 purchase under, or the dividend reinvestment feature of, the Carnival Corporation Employee Stock Purchase Plan.

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.