Edgar Filing: CARNIVAL CORP - Form 4

CADNINAL CODD

Form 4											
April 16, 2015 FORM 4 UNITED STATES SECURITI										PPROVAL	
	UNITEDS	TATES SI		ITIES Al			COMMISSION	OMB Number:	3235-0287		
Check this if no long subject to Section 16 Form 4 or	ENT OF C	F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Expires: January 31, 2005 Estimated average burden hours per response 0.5			
Form 5 obligation may conti <i>See</i> Instru 1(b).	nue. Section 17(a		blic Uti	lity Hold	ing Com	pany	Act o	ge Act of 1934, of 1935 or Sectio 40	n		
(Print or Type R	esponses)										
PARKER SIR JOHN Sy			2. Issuer Name and Ticker or Trading Symbol CARNIVAL CORP [CCL]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			3. Date of Earliest Transaction(Month/Day/Year)04/14/2015					X Director Officer (give below)	10%	9) 9 Owner er (specify	
	(Street)	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				
MIAMI, FL	33178							Form filed by M Person			
(City)	(State) (A	Zip)	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	any		TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial	
Common Stock	04/14/2015			A <u>(1)</u>	3,369 (2)	A	\$ 0	36,409.0018 (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)

Edgar Filing: CARNIVAL CORP - Form 4

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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	Expiration D (Month/Day/ e	5. Date Exercisable and Expiration Date Month/Day/Year)		le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

 Relationship

 Reporting Owner Name / Address
 Director
 10% Owner
 Officer
 Other

 Director
 10% Owner
 Officer
 Other

 PARKER SIR JOHN
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X
 X

<u>**</u>Signature of Reporting Person

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) Issued pursuant to the Carnival Corporation 2011 Stock Plan. The restriction on the shares lapses on the third anniversary of the grant date.

The Board of Directors approved a value of \$160,000 to be awarded to the reporting person in the form of restricted shares. The number(2) of shares was determined by dividing the closing price of a share of Carnival Corporation common stock on April 14, 2015 and dividing it into \$160,000, then rounding down to the nearest whole share.

(3) Includes shares acquired pursuant to the dividend reinvestment feature of the reporting person's brokerage account.

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.