

OMB APPROVAL	
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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

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* <u>BAND SIR JONATHON</u> (Last) (First) (Middle) <u>C/O CARNIVAL CORPORATION</u> <u>3655 N.W. 87TH AVENUE</u> (Street) <u>MIAMI FL 33178</u> (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>CARNIVAL CORP [CCL]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)
	3. Date of Earliest Transaction (Month/Day/Year) <u>04/09/2020</u>	
	4. If Amendment, Date of Original Filed (Month/Day/Year)	

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			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)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	04/09/2020		A ⁽¹⁾		14,090 ⁽²⁾	A	\$0	33,328.905	D	
Common Stock	04/09/2020		A ⁽³⁾		2,818 ⁽⁴⁾	A	\$12.42	36,146.905 ⁽⁵⁾	D	

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

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	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)
						Date Exercisable	Expiration Date					

Explanation of Responses:

- Issued pursuant to the Carnival Corporation 2020 Stock Plan. The restriction on the shares lapses on the third anniversary of the grant date.
- 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 shares was determined by dividing this value by the closing price of a share of Carnival Corporation common stock on April 9, 2020, then rounding down to the nearest whole share.
- The grant, which reflects the reporting person voluntarily deferring their Board of Director retainer and committee fees for April to June 2020 in the form of restricted shares as described in FN4, was approved by the Compensation Committee. The number of shares was determined by dividing the deferred retainer and committees fees by the closing price of a share of Carnival Corporation common stock on April 9, 2020, then rounding down to the nearest whole share.
- Issued pursuant to the Carnival Corporation 2020 Stock Plan. The restriction on the shares lapses on February 12, 2021.
- Includes shares acquired pursuant to the dividend reinvestment feature of the reporting person's brokerage account.

/s/ Sir Jonathon Band 04/13/2020
 ** 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.