FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20049

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

## Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## Filed nursuant to Section 16(a) of the Securities Exchange Act of 1934

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*  TED ARISON 1992 IRREVOCABLE  TRUST FOR LIN NO 2						2. Issuer Name and Ticker or Trading Symbol CARNIVAL CORP [ CCL ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title below)  Other (specify below)				
(Last) (First) (Middle) C/O COUTTS JERSEY LTD 23-25 BROAD ST						3. Date of Earliest Transaction (Month/Day/Year) 09/19/2003										See footno	ote 1 below		
(Street) ST. HELIER CHANNEL D9 00000 ISLANDS  (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									i. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(Gily)	(0.			n-Deriv	ative	Sec	curiti	es Acc	quired.	Dis	posed o	f, or E	3ene	ficially	Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date					ansaction		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			A) or	5. Am Secur Benef	ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	) or )	Price	Trans	action(s) 3 and 4)		(111341. 4)	
Common Stock 09/19/2					/2003	2003			S		1,900(2	2)	D	\$35.52	45,	,798,999	$D^{(1)}$		
Common Stock 09/19/2					2003			S		2,800(2	2)	D \$35.6		45,796,199		<b>D</b> <sup>(1)</sup>			
Common Stock 09/19/2					/2003				s 5,300 <sup>(2)</sup> D		\$35.62	45,790,899		$D^{(1)}$					
		Та									sed of, onvertib				wned				
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. Transactio Code (Inst 8)		5. Number of		6. Date Exercis Expiration Date (Month/Day/Yea		е	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((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 Exercisa		Expiration Date	Title	Amo or Num of Sha	ber					

## **Explanation of Responses:**

- 1. The reporting person may be deemed a member of a Section 13(d) group that owns more than 10% of the Common Stock of Carnival Corporation. However, the reporting person disclaims such group membership, and this report shall not be deemed an admission that the reporting person is a member of a Section 13(d) group that owns more than 10% of the Common Stock of Carnival Corporation for purposes of Section 16 or for any other purpose.
- 2. The shares covered by this form are being sold pursuant to a Rule 10b5-1(c) sales plan dated August 28, 2003.

John J. O'Neil, Authorized

Signatory, JJO Delaware, Inc., 09/23/2003

Trustee

John J. O'Neil, Authorized

Signatory, JMD Delaware, Inc., 09/23/2003

**Trustee** 

\*\* 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.