FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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*  Gearhart Jeffrey J			2. Date of E Requiring S (Month/Day 04/20/202	Statement //Year)	3. Issuer Name and Ticker or Trading Symbol  CARNIVAL CORP [ CCL ]						
(Last) (First) (Middle) C/O CARNIVAL CORPORATION					4. Relationship of Reporting Issuer (Check all applicable)				5. If Amendment, Date of Original Filed (Month/Day/Year)		
3655 N.W. 87TH AVENUE					X Director Officer (give title below)		Owner (specify )	specify (Ch	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting		
(Street) MIAMI	FL	33178	,						Person	by More than One Person	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)									4. Nature of Indirect Beneficial Ownership (Instr. 5)		
1. Title of Sec	urity (Instr. 4)				Amount of Securities Beneficially Owned (Instr. 4)	. Form: I (D) or I	Direct Indirect				
1. Title of Sec	, ,				Beneficially Owned (Instr.	Form: I (D) or I (I) (Inst	Direct Indirect				
	, ,			) Derivative	Beneficially Owned (Instr. 4)	Form: I (D) or I (I) (Inst	Direct Indirect tr. 5)	Own			
Common Sto	, ,	(e.g.		Derivative Is, warran	Beneficially Owned (Instr. 4)  0  2 Securities Beneficints, options, conver	Form: I (D) or II (I) (Inst  ially Owr tible sec	Direct Indirect tr. 5)	Own			

**Explanation of Responses:** 

/s/ Jeffrey J. Gearhart

04/21/2020

\*\* 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 5 (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.