FORM 4

Check this box if no longer subject

to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

Vashington,	D.C. 20549	
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STATEMENT	OF CHANGE	S IN BENEFIC	IAL OWNE	RSHIP

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

10. Ownership

Form: Direct (D)

or Indirect (I) (Instr. 4)

11. Nature

of Indirect

Ownership

(Instr. 4)

				01 36	ction 30(n) of the in	ivesime	iil Coi	Tipatiy Act of	1940				
1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol CARNIVAL CORP [CCL]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
WEISENBURGER RANDALL J			<u>Orna will condense to the con</u>					X	Director	10% (Owner		
(Last)	(First)	(Middle)			. Date of Earliest Transaction (Month/Day/Year) $4/08/2024$					Officer (give title below)	Other below	(specify	
C/O CARNIVAL CORPORATION			4. If Amendment, Date of Original Filed (Month/Day/Year)					6 Ind	6. Individual or Joint/Group Filing (Check Applicable				
3655 NW 871	H AVE.			,	amonamont, Bate o	Originic		a (Monanbay)	1001)	Line)			
										X	Form filed by On		
(Street)	EI	22170.2	1420								Form filed by Mo Person	re than One Re	porting
MIAMI	FL	33178-2	.428	Rule 10b5-1(c) Transaction Indication									
(014.)				Trais 1000 1(0) Traisaction maioation									
(City) (State) (Zip)				Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									
		Table I - No	n-Deriva	tive S	Securities Acq	uired,	Dis	posed of,	or Ber	neficially	y Owned		
Date		2. Transact Date (Month/Day	Execution Date,		Transaction		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	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	Transaction(s) (Instr. 3 and 4)		(111501. 4)
Common Stock 04/08/2		024		A ⁽¹⁾		12,141(2)	A	\$0	390,509.3245	D			
Common Stoc	k										961,238	I	By LP
		Table II -			curities Acqui	-				-	Owned		

6. Date Exercisable and

Expiration

Expiration Date

(Month/Day/Year)

Explanation of Responses:

2. Conversion

or Exercise Price of

Derivative

Security

1. Title of

Derivative

Security (Instr. 3)

1. Grant of restricted shares made pursuant to the Carnival Corporation 2020 Stock Plan. The restriction on the shares lapses in April 2027.

Code ν

2. The Boards of Directors approved a value of \$195,000 to be granted to the reporting person in the form of restricted shares. The number of restricted shares was determined by dividing the grant value by the average of the closing prices of a share of Carnival Corporation common stock over a 10-business day period ending on the date of grant, then rounding down to the nearest whole share.

Date

Exercisable

5. Number

Derivative

Securities

Acquired (A) or Disposed

of (D) (Instr. 3, 4

and 5)

(A) (D)

Transaction

Code (Instr. 8)

04/10/2024

8. Price of

Derivative

Security (Instr. 5)

9. Number of

Securities Beneficially

Owned Following Reported Transaction(s)

derivative

(Instr. 4)

** Signature of Reporting Person Date

7. Title and

Amount of

Securities Underlying

Derivative

Title

Security (Instr. 3 and 4)

Amount Number

Shares

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

3A. Deemed Execution Date.

if any (Month/Day/Year)

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

3. Transaction Date

(Month/Day/Year)

** 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.