FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| l | Estimated average burden | | | | | | | | |
| l | 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 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 an | | 2. Issuer Name and Ticker or Trading Symbol CARNIVAL CORP [CCL] | | | | | | | | | | olicable) | g Person(s) to 10% | lssuer Owner | | | | |
|--|--|--|-------|------------------------------------|------------------------------|--------------|---|---------------|--|---|--|---|--|-------------------|---|---|---|--|
| (Last) | | 3. Date of Earliest Transaction (Month/Day/Year) 08/27/2003 | | | | | | | | | Officer (give title below) | | Othe below | (specify /) | | | | |
| 810 7TH | 4. 11 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | | |
| (Street) NEW YO | (Street) NEW YORK NY 10119 | | | | | | | | | | | | | X | Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| (City) | (Si | ate) (| (Zip) | | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yell) | | | | | | Execution Da | | , | 3. Transa Code (8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an | | | d 5) Secu Bene | | ficially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | v | Amount | (A) or (D) | Price | | Trans | action(s) 3 and 4) | | (| | | | |
| Common Stock, par value \$0.01 per share 08/27/200 | | | | | | 03 | | | S | | 58,000 | D | \$34.46 | 38(1) | | 2,000 | 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) | ative Conversion Date Executive or Exercise (Month/Day/Year) if any | | | eemed tion Date, n/Day/Year) | 4. Transa Code (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. : and 4) | | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exerc | cisable | Expiration Date | Title | Amount or Number of Shares | | | | | |

Explanation of Responses:

1. Represents an average price per share sold. The actual prices are 2,000 at \$34.34; 5,300 at \$34.38; 2,200 at \$34.39; 1,000 at \$34.40; 1,000 at \$34.41; 800 at \$34.43; 7,400 at \$34.44; 1,500 at \$34.45; 3,900 at \$34.46; 400 at \$34.47; 500 at \$34.48; 3,400 at \$34.49; 23,500 at \$34.51; and 2,300 \$34.52.

Remarks:

Stuart Subotnick 08/27/2003

** 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.