Edgar Filing: RATCLIFFE PETER GERVIS - Form 4

RATCLIFF Form 4 April 17, 20	E PETER GERVI	S									
FORM	ЛЛ								PPROVAL	_	
	UNITED	STATES		RITIES An ashington			E COMMISSION	N OMB Number:	3235-0	287	
Check th if no lon	ider					Expires:	January 3	/ 31, 2005			
subject t Section Form 4 of	SIAIEN 16.	1ENT OI	F CHAI	Estimated burden hou response	average urs per						
Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940											
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> RATCLIFFE PETER GERVIS			2. Issuer Name and Ticker or Trading Symbol CARNIVAL PLC [CUK]				5. Relationship of Reporting Person(s) to Issuer				
		AC 111 \				J	(Check all applicable)				
(Last)	(First) (I	Middle)		of Earliest T Day/Year)	ransaction		X Director	109	% Owner		
C/O CARN CORPORA AVE	04/15/2009				Officer (give title Other (specify below)						
				If Amendment, Date Original led(Month/Day/Year)			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
MIAMI, FI	2 33178						Person	More than One R	eporting		
(City)	(State)	(Zip)	Tał	ole I - Non-l	Derivative	Securities .	Acquired, Disposed o	of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	Disposed (Instr. 3, 4	(A) or of (D) 4 and 5) (A) or	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature o Indirect Beneficial Ownership (Instr. 4)		
				Code v	Amount	(D) Price	;				
Reminder: Rep	port on a separate line	for each cl	ass of sec	urities bene	•	•	•				
					inforn requii	nation con red to resp ays a curre	spond to the colle tained in this form ond unless the for ently valid OMB co	n are not rm	SEC 1474 (9-02)		
	Tab					sposed of, or convertible	r Beneficially Owned securities)	1			

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	D

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 5	8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		d d of		(Instr. 3 and 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Restricted Stock Units	<u>(1)</u>	04/15/2009		A <u>(2)</u>		4,647		02/20/2012	<u>(3)</u>	Trust Shares (beneficial Interest In Special Voting Share)	4,647

Reporting Owners

Reporting Owner Name / Address		Relationships						
	Director	10% Owner	Officer	Other				
RATCLIFFE PETER GERVIS C/O CARNIVAL CORPORAT 3655 NW 87TH AVE MIAMI, FL 33178		Х						
Signatures								
/s/ Peter G 04 Ratcliffe 04	4/17/20)09						
<u>**</u> Signature of Reporting Person	Date							

Explanation of Responses:

- * 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).
- (1) Award of restricted stock units which represents a hypothetical interest in Carnival plc ordinary shares, which will vest on the third anniversary of the grant date. The restricted stock units will accumulate dividend equivalents and may only be settled in shares.
- (2) Grant made pursuant to the Carnival Corporation 2001 Outside Director Stock Plan.
- (3) No expiration date. The award will either vest or be forfeited pursuant to the terms of the Restricted Stock Unit Agreement between the reporting person an the issuer.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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