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Kulovaara E Form 4										
February 14 FORM Check th if no lon, subject to Section 1 Form 4 of Form 5 obligation may con See Instr 1(b).	1 4 UNITED UNITED UNITED STATEN STATEN Section 17	MENT O	Was F CHAN Section 1 Public U	shington, IGES IN SECUR 6(a) of th	, D.C. 20 BENEF RITIES e Securi ding Cor	1CIA ties E	LOWN Exchange y Act of	OMMISSION ERSHIP OF Act of 1934, 1935 or Sectior	OMB Number: Expires: Estimated a burden hour response	•
(Print or Type) 1. Name and A Kulovaara I	Address of Reporting	Person <u>*</u>	Symbol	r Name and L CARIB				5. Relationship of Issuer (Check	Reporting Pers	
	(First) (ARIBBEAN CRU CARIBBEAN V		-	f Earliest Ti Day/Year)	ransaction			Director Officer (give below) EV		Owner r (specify
MIAMI, FL	(Street) 2 33132			ndment, Da nth/Day/Year	-	ıl		6. Individual or Joi Applicable Line) _X_ Form filed by O Form filed by M Person	ne Reporting Per	rson
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Secur	rities Acqu	iired, Disposed of,	or Beneficiall	v Owned
1.Title of Security2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transactior(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A)				5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. 7. Nat Ownership Indired Form: Direct Benefit (D) or Owner	7. Nature of Indirect	
Common Stock	02/12/2019			Code V A	Amount 7,479	or (D) A	Price \$ 0 (2)	(Instr. 3 and 4) 32,946	D	
Common Stock	02/12/2019			F	2,152 (3)	D	\$ 116.08	30,794	D	
Commn Stock	02/13/2019			А	3,896 (5)	А	\$ 0 <u>(2)</u>	34,690	D	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

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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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Title Amount Underly Securiti (Instr. 3	t of ving es	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
			Code V	4, and 5)	Date Exercisable	Expiration Date	o Title N o	Jumber		

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Kulovaara Harri U ROYAL CARIBBEAN CRUISES LTD. 1050 CARIBBEAN WAY MIAMI, FL 33132			EVP, Maritime			
Signatures						
Ryan Lawrence, Attorney-in-Fact for Har Kulovaara	ri U.		02/14/2019			
<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).

Represents shares of common stock underlying performance shares granted to the reporting person under the Royal Caribbean Cruises Ltd. 2008 Equity Incentive Plan, as amended. The target award was authorized by the Compensation Committee on 02/09/2016. The

- (1) Let 2008 Equity incentive rais, as an ended. The target award was authorized by the Compensation Committee on 02/12/2019. The award vested in one installment on 02/12/2019.
- (2) Granted in consideration for service as an officer of the issuer.
- (3) Represents the number of shares of common stock withheld by the issuer to cover the reporting person's tax liability associated with the vesting of shares underlying certain performance shares on 02/12/2019.
- (4) Represents the average of the high and low prices for the issuer's common stock on the NYSE on 2/12/2019.
- (5) Represents shares of common stock underlying restricted stock units granted to the reporting person under the Royal Caribbean Cruises Ltd. 2008 Equity Incentive Plan. Award vests in four equal annual installments commencing on the first anniversary of the grant date.

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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.