### DONAHUE TIMOTHY M

Form 4

January 04, 2007

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

**OMB APPROVAL** 

Form 4 or Form 5 obligations may continue. See Instruction

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

burden hours per response... 0.5

1(b).

Stock

(Print or Type Responses)

	Address of Reporting I E TIMOTHY M	Symbol	2. Issuer Name and Ticker or Trading Symbol EASTMAN KODAK CO [EK]			5. Relationship of Reporting Person(s) to Issuer		
(Last)  EASTMAN	, ,	(Month/D 01/02/2	· ·	on	_X_ Director Officer (give below)		Owner or (specify	
	(Street) PER, NY 14650	4. If Ame	ndment, Date Origi th/Day/Year)	nal		Ŷ	erson	
(City)	•	(Zip) Tabl	e I - Non-Derivati	ve Securities Acc	Person  quired, Disposed of	f, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction(A) or	(A) or nt (D) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common	01/02/2007		A 768 (	1) A \$	9,513 (2)	D		

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

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SEC 1474

(9-02)

26.04

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	onof Deriv Secun Acqu (A) o Dispo of (D	rities priced or osed o) : 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pr Deri Sect (Inst
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option (right to buy) (3)	\$ 25.92						<u>(4)</u>	11/05/2011	Common Stock	2,000	
Option (right to buy) (3)	\$ 29.1						<u>(4)</u>	01/01/2012	Common Stock	2,000	
Option (right to buy) (3)	\$ 36.66						<u>(4)</u>	11/21/2012	Common Stock	2,000	
Option (right to buy) (3)	\$ 24.49						<u>(4)</u>	11/18/2013	Common Stock	2,000	
Option (right to buy) (3)	\$ 31.71						<u>(4)</u>	12/09/2014	Common Stock	1,500	
Option (right to buy) (5)	\$ 24.75						<u>(4)</u>	12/06/2012	Common Stock	1,500	
Option (right to buy) (5)	\$ 25.88						<u>(4)</u>	12/11/2013	Common Stock	1,500	
Phantom Stock Units	<u>(6)</u>	12/14/2006		A	68.1 (7)	l	(8)	(8)	Common Stock	68.1	•

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
• 6	Director	10% Owner	Officer	Other			
DONAHUE TIMOTHY M EASTMAN KODAK COMPANY 343 STATE STREET	X						

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#### ROCHESTER, NY 14650

## **Signatures**

Patick M. Sheller, as attorney-in-fact for Timothy M.
Donahue
01/04/2007

\*\*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) Grant of shares in partial payment of annual retainer.
- (2) Some of these shares are restricted.
- (3) Stock option granted under the 2000 Omnibus Long-Term Compensation Plan in a transaction exempt under Rule 16b-3.
- (4) These options vest one year after the date of grant
- (5) Stock option granted under the 2005 Omnibus Long-Term Compensaton Plan.
- (6) This award converts to common stock on a 1-for-1 basis.
- (7) These units were credited to the reporting person's account as dividend equivalents.
- (8) Phantom stock units do not have exercise dates or expiration dates.

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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