## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	JVAL				
OMB Number:	3235-0287				
Estimated average burd	en				
hours per response:	0.5				
	OMB Number: Estimated average burd				

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 and Address of Reporting Person*  Hawley Michael					2. Issuer Name <b>and</b> Ticker or Trading Symbol EASTMAN KODAK CO [ EK ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Trawicy Wirehaer														X Directo	r		10% Ow	ner
	Last) (First) (Middle) EASTMAN KODAK COMPANY 343 STATE STREET				3. Date of Earliest Transaction (Month/Day/Year) 08/06/2007									(give title	Other (s below)		pecify	
343 S1A	IE SIKEE	1			4.1	f Ame	endment, D	ate o	f Original	Filed	(Month/Day	//Year)		idividual or J	loint/Group	Filing	(Check App	licable
(Street) ROCHESTER NY 14650												- 1	Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(S	state)	(Zip)															
		Tal	ble I - Non		ativ	e Se	curities	Ac	guired,	Disp	osed o	f, or Ber	neficial	y Owned				
1. Title of Security (Instr. 3) 2. Tr			2. Trans Date (Month/	saction	n ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)		d (A) or	5. Amour Securitie Beneficia	es For ally (D) Following (I) (		Direct I Indirect E str. 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											5,362	5,362.55(1)		D				
			Table II - I									or Bene le secu		Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Dat if any (Month/Day/Ye	ate, T	4. Transaction Code (Instr. 8)				6. Date Exercisa Expiration Date (Month/Day/Yea		•	7. Title an Amount o Securities Underlyin Derivative (Instr. 3 an	f g Security	8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficial Owned Following Reported	Own Forn Director In (I) (Ir	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				c	Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)			
Option (right to buy) <sup>(2)</sup>	\$31.71								(3)	1	2/09/2014	Common Stock	1,500		1,500		D	
Option (right to buy) <sup>(4)</sup>	\$24.75								(3)	1	2/06/2012	Common Stock	1,500		1,500		D	
Option (right to buy) <sup>(4)</sup>	\$25.88								(3)	1	2/11/2013	Common Stock	1,500		1,500		D	
Phantom Stock	(5)	07/16/2007			J	v	33.24 <sup>(7)</sup>		(6)		(6)	Common Stock	33.24	\$0	3,846.4	.2	D	

## **Explanation of Responses:**

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

## Remarks:

Laurence L. Hickey, as attorney-in-fact for Michael **Hawley** 

\*\* Signature of Reporting Person

08/06/2007

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.