FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPRO	VAL
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* MASSON BERNARD (Last) (First) (Middle) 343 STATE STREET					Same and Ticker or Trading Symbol EASTMAN KODAK CO [EK] 3. Date of Earliest Transaction (Month/Day/Year) 02/17/2004							(Che	Relationship of Reporting Person(s) to Issuer heck all applicable) Director 10% Owner X Officer (give title Other (specify below) Senior Vice President				
(Street) ROCHE		Y State)	14650 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	dividual or Joint/Group Filing (Check Applicable) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(Oity)	(0	,	able I - Non	-Deriva	itive S	Securitie	es Acai	uired. D	isp	osed of.	or Bene	ficially	Owned				
1. Title of Security (Instr. 3) 2. Transa Date						3. 4. Securities Transaction Disposed O		es Acquired (A) or Of (D) (Instr. 3, 4 and 5		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							Code V	,	Amount	(A) or (D)	Price	Reported Transactio (Instr. 3 an	en(s) ed 4)			(Instr. 4)	
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		3A. Deemed Execution Date if any (Month/Day/Yea	4. Transaction Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis. Expiration Date (Month/Day/Yea		isable and 7. Title and Air of Securities		d Amount les g Security	8. Price of Derivative Security (Instr. 5)		s Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
				Code	v	(A)	(D)	Date Exercisal	ble	Expiration Date	Title	Amount or Number of Shares	Trans (Instr.				
Option (right to buy)	\$36.66							(1)		11/21/2012	common stock	23,000		23,000	0	D	
Option (right to buy)	\$24.49							(1)		11/18/2010	common stock	14,400		14,400	0	D	
Restricted Stock Units ⁽⁴⁾	(2)							(3)		(3)	common stock	20,000		20,000	0	D	
Stock Units	(2)							(3)		(3)	common stock	207.12		207.12	2	D	
Stock Unit	(2)	02/17/2004		A		8,614 ⁽⁵⁾		(5)		(6)	Common Stock	8,614	\$29.02	8,614	1	D	
Stock Unit	(2)	02/17/2004		F			124.9 ⁽⁷⁾	(3)		(3)	Common Stock	124.9	\$29.02	8,489.	.1	D	

Explanation of Responses:

- 1. These options vest one-third on each of the first three anniversaries of the date of grant.
- 2. These units convert on a one-for-one basis.
- 3. This date is not applicable to these units.
- 4. The restricted award and dividend equivalents are being reported separately to reflect that the award is restricted and the dividend equivalents are not restricted.
- 5. These units represent stock awarded under the Eastman Kodak Company 2000 Omnibus Long-Term Compensation Plan and deferred under that Plan as stock units. The units are entitled to dividend equivalents on each dividend payment date.
- 6. Deferred awards will be paid out on the date or dates selected by the Issuer
- 7. Payment of FICA taxes.

Remarks:

James M. Quinn, as attorney-infact for Bernard Masson 02/18/2004

** 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.