FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

illigion, D.C. 20049	OMB APPROVAL

OMB Number:	3235-0287				
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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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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Name and Address of Reporting Person* Cullimore Philip					2. Issuer Name and Ticker or Trading Symbol EASTMAN KODAK CO [KODK]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Cullin	<u>ore Pilili</u>	<u>)</u>		-							,			Director			10% Ow	ner	
-													⊣ x		give title		Other (sp	pecify	
(Last)	(First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)									below)		below)			
EASTMAN KODAK COMPANY					09/03/2015								Senior Vice President						
343 STA	TE STREE	T		H						· · · · · · · ·	54)						(0) 1 1		
-					4. If Amendment, Date of Original Filed (Month/Day/Year) 09/08/2015								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street)				- 1	J9/UO/.	2015							X	Form file	ed by One	. Penni	ting Person		
ROCHE	STER 1	ΝΥ	14650										A	X Form filed by One Reporting Persor Form filed by More than One Repor					
,				I										Person	ea by Mor	e tnan	One Reporti	ng	
(City)	(State)	(Zip)											. 0.00					
(City)	(Sidic)	(Σιρ)																
		Ta	able I - Non-I	Derivat	ive S	ecurities	s Ac	quired, I	Disp	oosed o	f, or B	enet	ficially	Owned					
1. Title of	Security (Ins	str. 3)	2.	. Transact	action 2A. Deemed			3. 4. Securities Acquired (A)				or 5. Amount of				. Nature of			
Date					Execution Date, Day/Year) if any			, Transaction Disposed Code (Instr.		d Of (D) (Instr. 3, 4 and 5)		, 4 and 5)	Securities Beneficially			ndirect Beneficial			
(100)				nontinbay	,, rear	(Month/Day/Ye								Owned Fo			nstr. 4) (Ownership	
										(A) or			Reported Transaction			[((Instr. 4)		
								Code V Amour		Amount	(A) or (D)		Price	(Instr. 3 and 4)					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
						curities Ils, warr								wnea					
		1	·	-	, ou	,			<u> </u>								I	1	
1. Title of Derivative	2. Conversion		3A. Deemed Execution Date, if any	Code (Instr.		on Derivative tr. Securities		6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amo of Securities Underlying Deriv			mount	8. Price of Derivative	9. Number of derivative		10. Ownership	11. Nature of Indirect			
Security	or Exercise										ng De		Security	Securities Beneficially		Form:	Beneficial		
(Instr. 3)	Price of (Month/Day/Year) 8) Acquired (A) Security Or Disposed 4)								(Inst	r. 3 and	and (Instr. 5)		ally	Direct (D) or Indirect	Ownership (Instr. 4)				
	Security		of (D) (Instr. 3,			"						Owned Following		(I) (Instr. 4)	(
						4 and 5)									Reported Transact				
							ш	B-4-	_	· • ·			nount or		(Instr. 4)				
				Code	l v	(A)		Date Exercisable		Expiration Date	Title		umber of nares						
Stock				+			 		+		Commo	+							
Option	#12.7c(1)	09/03/2015 ⁽¹⁾		A ⁽¹⁾		17.202(1)		(1)		9/02/2022	Stock,		7.392 ⁽¹⁾	\$0	17.00	5 (1)	D		
(Right to	\$13.76 ⁽¹⁾	09/03/2015(1)		A		17,392 ⁽¹⁾		(1)	۱"	310212022	par value	· 1,	,332(1)	ΦU	17,392	Z\-'/	ם		
Buy)	I	1	I	1	1	I	ıl				\$.01	1			I			1	

Explanation of Responses:

1. Mr. Cullimore previously reported this option on his 9/3/15 Form 4, however, at that time, the number of shares underlying the option could not be determined. Mr. Cullimore is filing this amendment to report the number of shares underlying the option.

Remarks:

/s/ Karen M. Kelly, Attorney-infact for Philip Cullimore 09/23/2015

** 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.