FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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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

				-															
Name and Address of Reporting Person* Skilonsky, Engals S					2. Issuer Name and Ticker or Trading Symbol EASTMAN KODAK CO [EK]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Sklarsky Frank S</u>														Director		10% Owne		ner	
														X Officer (give title below)			Other (speci below)		
(Last)	(I	First)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)									Executive Vice President					
343 STATE STREET					12/12/2008									2.110	cuare	100 11	corden		
(Street)					If Amendment, Date of Original Filed (Month/Day/Year)								6 Indi	6. Individual or Joint/Group Filing (Check Applicable Line)					
ROCHESTER NY 14650					4. II Allichamont, Date of Original Flied (World/Day/Teal)								X	/ _ / / / / / / / / / / / / / _ / / / / / / / / / / / / / _ / / / / / / / / / / / / / _ / / / / / / / / / / / / / _ / / / / / / / / / / / / / _ /					
(City)	(\$	State)	(Zip)											Form filed by More than One Reporting Person					
			Table I - Non	-Deriva	ative \$	Securiti	es Ac	cquired	, Dis	posed of	f, or	r Benef	ficially C	wned					
Date			2. Transa Date (Month/D		Executi if any	2A. Deemed Execution Date, if any (Month/Day/Year)				ties Acquired (A) or I Of (D) (Instr. 3, 4 a					6. Own Form: (D) or I (I) (Ins	Direct II Indirect E tr. 4) C	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)					
Common Stock														39,969(1)		(1) D			
			Table II - D					• ′	•	osed of, onvertib			-	vned					
			Transa Code (5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		(A) ed	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo Securities Under Derivative Secur (Instr. 3 and 4)		nderlying ecurity	erlying Derivative		er of ve es ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
		Code V (A) (D) Exercisable Date Title			mount or lumber of chares	(Instr.		ction(s) 4)											

(3)

(3)

(3)

12/31/2009(8)

12/31/2011⁽⁸⁾

Explanation of Responses:

1. Some of these shares are restricted.

\$25.88

\$23.28

\$7,41

(5)

(5)

 $2.\ Stock\ option\ granted\ under\ the\ 2005\ Omnibus\ Long-Term\ Compensaton\ Plan.$

12/12/2008

- ${\it 3. These options vest one-third on each of the first three anniversaries of the date of grant.}\\$
- $4.\ These s units granted under the 2005\ Omnibus\ Long-Term\ Compensation\ Plan;\ Leadership\ Stock\ 2007\ cycle.$
- 5. These units convert on a one-for-one basis.
- ${\it 6. These units were credited to the reporting person's account as dividend equivalents.}\\$
- 7. The effective date for these restricted stock units is January 1, 2009.
- 8. This is the date these restricted stock units will vest.

Remarks:

Option

(right to buy)⁽²⁾

Option (right to buy)⁽²⁾

Option

(right to buy)⁽²⁾

Restricted

Stock Units⁽⁴⁾

Restricted

Units⁽⁷⁾

<u>Laurence L. Hickey as attorney-in-fact for Frank S. Sklarsky</u>

12/19/2008

100,000

109,890

207,800

24,723,255

26,300

D

D

D

D

D

** Signature of Reporting Person

Commor

Stock

Stock

Common

Stock

Commo

Stock

Common

Stock

12/11/2013

12/10/2014

12/08/2015

12/31/2009(8)

12/31/2011(8)

100,000

109,890

207,800

937.9085

26,300

\$0

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).

I(6)

937.9085

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.