## FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

	Washi	ngton, D.C. 20549	)	
<b>STATEMENT</b>	<b>OF CHANGI</b>	ES IN BENE	EFICIAL O	WNERSHIP

OMB APP	ROVAL
OMB Number:	3235-0287
Estimated average b	urden
hours per response:	0.5

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

											.,,								
Name and Address of Reporting Person*     Faraci Philip J				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)  Director 10% Owner						
(Last)	(F	irst)	(Middle)		Date of Earliest Transaction (Month/Day/Year)						7	below)	(give title		Other (s	specify			
343 STATE STREET				12/	12/12/2006									Senior Vice President					
J43 STATE STREET			1 If	A If Amondment Date of Original Filed (Month/Day/March									6. Individual or Joint/Group Filing (Check Applicable						
(Street)				-"	If Amendment, Date of Original Filed (Month/Day/Year)								Line	Line)					
ROCHE	STER N	Y	14650									'	X Form filed by One Reporting Person  Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)											Person					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				Execution Date,      Day/Year)   if any		Execution Date, if any		e, Transaction Disposed Code (Instr. 5)		rities Acquired (A) o ed Of (D) (Instr. 3, 4			5. Amour Securitie Beneficia Owned F	s Illy ollowing	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
						Code	v	Amount	(A (D	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock												10,000(1)			D				
			Table II -	Deriva	tive	Seci	urities	Acq	uired, D	ispo	sed of	or Be	nefi	cially	Owned		,	<u> </u>	1
				(e.g., p	uts,	call	s, warr	ants	s, option	s, c	onverti	ble se	curit	ies)					
			ransac Code (Ir	ansaction of Expode (Instr. Derivative (Mo			6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)			curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
							Am			mount r									
									Date		xpiration		0						
				-   0	Code	V	(A)	(D)	Exercisable	D	ate	Title	s	hares					-
Option (right to buy)	\$26.47								(3)	0	5/31/2012	Commo Stock	<sup>n</sup> 5	2,500		52,50	0	D	
Option (right to buy)	\$26.46								(3)	0!	5/11/2012	Commo	n 1	0,000		10,00	0	D	
Option (right to buy) <sup>(2)</sup>	\$24.75								(3)	13	2/06/2012	Commo	n 2	0,940		20,94	0	D	
Option (right to buy) <sup>(2)</sup>	\$25.01								(3)	0:	1/31/2013	Commo	ns 2	5,000		25,00	0	D	
Option (right to buy) <sup>(2)</sup>	\$32.5								(3)	1	2/05/2011	Commo		2,500		32,50	0	D	
Option (right to buy) <sup>(2)</sup>	\$25.88	12/12/2006			A		58,690		(3)	13	2/11/2013	Commo	<sup>n</sup> 5	8,690	\$0	58,69	0	D	

## **Explanation of Responses:**

- 1. These shares are restricted.
- 2. Stock option granted under the 2005 Omnibus Long-Term Compensaton Plan.
- 3. These options vest one-third on each of the first three anniversaries of the grant date.

## Remarks:

Laurence L. Hickey, as attorney-in-fact for Philip J.

12/14/2006

\*\* 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.