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EASTMAN Form 4 February 23,	CHEMICAL CO											
									OMB AF	PROVAL		
FORM 4 UNITED STATES SECURITIES AN Washington, 1										3235-0287		
Check th if no long subject to Section 1 Form 4 o Form 5 obligatio may cont <i>See</i> Instru 1(b).	ENT OF suant to Se a) of the Pu 30(h) o	CHAN ection 1 ablic Ut	GES IN SECUE	January 3 Expires: 20 Estimated average burden hours per response 0								
(Print or Type I	Responses)											
ROGERS JAMES P Symbol			Symbol	in Franke and Frener of Franking				5. Relationship of Reporting Person(s) to Issuer				
				e of Earliest Transaction				(Check all applicable)				
	CHEMICAL 7, 200 SOUTH W	((Day/Year)				X Director X Officer (give below) Pres		Owner r (specify		
				endment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
KINGSPOR	RT, TN 37660							Form filed by M Person				
(City)	(State)	(Zip)	Tabl	le I - Non-I	Derivative S	Securi	ties Acqu	uired, Disposed of	, or Beneficial	y Owned		
1.Title of Security (Instr. 3)		Yransaction Date 2A. Deemed onth/Day/Year) Execution Date, if any (Month/Day/Year)			4. Securiti or(A) or Dis (Instr. 3, 4 Amount	sposed	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. 7. Nature of Ownership Indirect Form: Direct Beneficial (D) or Ownership Indirect (I) (Instr. 4) (Instr. 4)			
Common Stock	02/19/2010			А	13,871 (1)	А	\$0	69,480 <u>(2)</u>	D			
Common Stock	02/19/2010			F	3,669 (3)	D	\$ 60.02	65,811	D			
Common Stock								6,234 <u>(4)</u>	Ι	401(k)		
Common Stock								1,032	Ι	ESOP		
Common Stock								22,086 <u>(5)</u>	I	By Grat		

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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title a	nd	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amount	of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underlyin	ng	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securities	s	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3 a	and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								Δτ	nount		
								or			
							Expiration		umber		
							Date	of			
				Code V	(A) (D)				ares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
FB	Director	10% Owner	Officer	Other			
ROGERS JAMES P EASTMAN CHEMICAL COMPANY 200 SOUTH WILCOX DRIVE KINGSPORT, TN 37660	Х		President & CEO				
Signatures							
Brian L. Henry, by Power of Attorney	02/23/	/2010					
**Signature of Reporting Person	Da	ate					

Explanation of Responses:

- * 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).
- (1) Payout under performance shares awarded at beginning of three-year (2007-2009) performance period.
- (2) Includes 17,914 shares reported as indirectly beneficially owned in grantor retained annuity trust ("GRAT") in reporting person's Form 4 filed February 24, 2009 which were transferred out of GRAT.
- (3) Shares of common stock withheld in payment of tax liability incident to payout under performance shares.
- (4) Includes 832 shares acquired since February 20, 2009 resulting from company and employee payroll contributions and automatic reinvestment of dividends.

(5) Shares reported as directly beneficially owned prior to the reporting person's Form 4 filed February 26, 2008 which were contributed to a grantor retained annuity trust ("GRAT").

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.