Edgar Filing: CORNING INC /NY - Form 4

CODVIDIC INC AIV

Form 4	NC /N Y										
December 08	, 2005										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
	UNITEI) STATES		hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check this if no long subject to Section 10 Form 4 or	er STATE 5.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							burden hou	Estimated average burden hours per	
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, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940							0.5				
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> HOUGHTON JAMES R			2. Issuer Name and Ticker or Trading Symbol CORNING INC /NY [GLW]				5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle) 80 E. MARKET ST., SUITE 300			3. Date of Earliest Transaction (Month/Day/Year) 12/07/2005					(Check all applicable) <u>X</u> Director <u>X</u> Officer (give title <u>10%</u> Owner below) Other (specify below) Chairman of the Board			
				4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
CORNING,	NY 14830							Form filed by M Person	Iore than One Re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date2A. Deemed3.4. Securities Acqui(Month/Day/Year)Execution Date, if anyTransaction(A) or Disposed of CodeCode(Month/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)		of	SecuritiesForm: DirectIndiBeneficially(D) orBenOwnedIndirect (I)Ow							
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	12/07/2005			А	62,000	А	\$0	779,570	D		
Common Stock								9,782	I	by wife (1)	

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.

Edgar Filing: CORNING INC /NY - Form 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	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	Expiration Date (Month/Day/Year)		7. Title and Amoun Underlying Securit (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sh
Nonqualified Stock Option (right to buy)	\$ 21.08	12/07/2005		А	77,000	12/07/2006	12/06/2015	Common Stock	77,0

Reporting Owners

Reporting Owner Name / Address								
	Director	10% Owner	Officer	Other				
HOUGHTON JAMES R 80 E. MARKET ST. SUITE 300 CORNING, NY 14830	Х		Chairman of the Board					
Signatures								
J. Philip Hunter, as Attorney-in-Fact pursuant to Power of Attorney dated July 12, 12/08/200								

<u>**</u>Signature of Reporting Person

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) The reporting person disclaims beneficial ownership of these securities and this report shall not be deemed an admission that the person is the beneficial owner of the securities for purposes of Section 16 or for any other purpose.

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.

Date