Edgar Filing: EGGERS WILLIAM D - Form 4

| EGGERS V Form 4 | VILLIAM D | | | | | | | | |
|--|--|--|--|--|--|---|---|--|--------------------------|
| December 2 | 21, 2005 | | | | | | | | |
| FORM | ЛЛ | STATES | | | | | E COMMISSIO | | PPROVAL |
| Check t if no lor subject Section Form 4 Form 5 | MENT OF | F CHAN | SECUI | Estimated burden hou response | urs per | | | | |
| obligati may con <i>See</i> Inst 1(b). (Print or Type | ons Section 17 ruction | (a) of the I | Public U | Itility Hol | ding C | | t of 1935 or Secti | | |
| 1. Name and Address of Reporting Person <u>*</u> EGGERS WILLIAM D | | | 2. Issuer Name and Ticker or Trading Symbol CORNING INC /NY [GLW] | | | | 5. Relationship of Reporting Person(s) to Issuer | | |
| (Last) (First) (Middle) ONE RIVERFRONT PLAZA | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/20/2005 | | | | (Check all applicable) <u></u> Director <u></u> 10% Owner <u></u> Officer (give title <u></u> Other (specify below) Senior Vice President | | |
| CORNING | | 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 Form filed by More than One Reporting | | | |
| | | (7:) | | | | | Person | | |
| (City) 1.Title of Security (Instr. 3) | (State) 2. Transaction Date (Month/Day/Year) | Execution any | ed Date, if | 3. Transactic Code (Instr. 8) Code V | 4. Secu onAcquire Dispose (Instr. 3 | rities ed (A) or ed of (D) 5, 4 and 5) (A) or | Acquired, Disposed 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | of, or Beneficia 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect |
| Reminder: Re | port on a separate lin | e for each cl | ass of sec | urities bene | Pers info requ | sons who re rmation cor uired to resp | or indirectly. espond to the collected ntained in this forr pond unless the fo ently valid OMB co | n are not orm | SEC 1474 (9-02) |

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. Number | 6. Date Exercisable and | 7. Title and Amount of | 8. Pric |
|-------------|-------------|---------------------|--------------------|-------------|-----------------|-------------------------|------------------------|---------|
| Derivative | Conversion | (Month/Day/Year) | Execution Date, if | Transaction | onof Derivative | Expiration Date | Underlying Securities | Deriva |
| Security | or Exercise | | any | Code | Securities | (Month/Day/Year) | (Instr. 3 and 4) | Securi |

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| (Instr. 3) | Price of Derivative Security | (Month/Day/Year) | (Instr. 8) | Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | (Instr. | | | |
|------------------|------------------------------------|------------------|--------------|---|-----|---------------------|--------------------|-----------------|--|-------|
| | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Phantom Stock | \$ 0 <u>(1)</u> | 12/20/2005 | J <u>(1)</u> | 46.23 | | (1) | (1) | Common Stock | 46.23 | \$ 19 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|---|---------------|-----------|-----------------------|-------|--|--|--|
| | Director | 10% Owner | Officer | Other | | | |
| EGGERS WILLIAM D ONE RIVERFRONT PLAZA CORNING, NY 14831 | | | Senior Vice President | | | | |
| Signatures | | | | | | | |
| Denise A. Hauselt, Power of Attorney | 12/21/2005 | | | | | | |

**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).

Date

(1) The reported Phantom Stock Units are acquired on a monthly basis pursuant to the terms of Corning's Supplemental Investment Plan and will be settled for cash at fair market value on or after the reporting person's retirement or other termination of service.

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.