EASTMAN CHEMICAL CO

Form 4 May 11, 2016

FORM 4

Check this box

if no longer

subject to

Section 16.

Form 4 or

obligations

Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

Number: 3235-0287

Expires: January 31, 2005

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

Issuer

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

2. Issuer Name and Ticker or Trading

may continue.

See Instruction

30(h) of the Investment Company Act of 1940

Symbol

1(b).

Costa Mark J

(Print or Type Responses)

1. Name and Address of Reporting Person *

| | | | EASTMAN CHEMICAL CO [EMN] | | | | (Check all applicable) | | | | |
|--------------------------------------|------------------------------------|-------------------|-------------------------------------------------------------|-------------------------------------------|---------------------------------------------|--------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------------------------|--|
| | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/09/2016 | | | | | _X_ Director _X_ Officer (give below) | 10% | Owner er (specify | |
| Filed(Mo | | | | Amendment, Date Original (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 | | | |
| KINGSPORT, TN 37660 | | | | | | | | Person | | | |
| (City) | (State) | (Zip) | Tab | le I - Non-I | Derivative (| Securi | ities Acq | uired, Disposed of | f, or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction D (Month/Day/Yea | ar) Execution any | med on Date, if Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securit on(A) or Dis (Instr. 3, 4) | sposed | of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | 05/09/2016 | | | M | 25,290 | A | \$ 33.08 | 185,730 | D | | |
| Common Stock | 05/09/2016 | | | S | 25,290 | D | \$ 75.05 (1) | 160,440 | D | | |
| Common Stock | 05/10/2016 | | | M | 13,110 | A | \$ 33.08 | 173,550 | D | | |
| Common Stock | 05/10/2016 | | | S | 13,110 | D | \$ 75.38 (2) | 160,440 | D | | |
| | | | | | | | | 2,352 | I | By ESOP | |

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Common Stock

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

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(9-02)

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 actionDerivative Securities 8) Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|-----------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|----------------------------------------|--------------------------------------------------------------------------------------------------|---------------|----------------------------------------------------------|-----------------|---------------------------------------------------------------|-------------------------------------|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Employee Stock Option (right to buy) | \$ 33.08 (3) | 05/09/2016 | | M | | 25,290 (3) | 10/30/2010 | 10/29/2017 | Common Stock | 25,290 (3) |
| Employee Stock Option (right to buy) | \$ 33.08 (3) | 05/10/2016 | | M | | 13,110 (3) | 10/30/2010 | 10/29/2017 | Common Stock | 13,110 (3) |

Reporting Owners

**Signature of Reporting Person

Attorney

| Reporting Owner Name / Address | Relationships | | | | | | |
|---------------------------------------------------------|---------------|-----------|-------------------------|-------|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | |
| Costa Mark J 200 SOUTH WILCOX KINGSPORT, TN 37660 | X | | Chief Executive Officer | | | | |
| Signatures | | | | | | | |
| Brian L. Henry, by Power of | | | | | | | |

05/11/2016

Date

Reporting Owners 2

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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).
- Average weighted sale price for shares disposed of in the reported transaction. The shares were sold in multiple broker's transactions at various prices per share ranging from \$75.00 to \$75.22. The reporting person undertakes to provide to the issuer, any stockholder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnotes (1) and (2) to this Form 4.
- Average weighted sale price for shares disposed of in the reported transaction. The shares were sold in multiple broker's transactions at various prices per share ranging from \$75.00 to \$75.97.
- (3) The option exercise price was halved and the number of shares underlying the option was doubled in the October 3, 2011 2-for-1 stock split by dividend of the common stock.

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.