EASTMAN CHEMICAL CO

Form 4

February 24, 2015

FORM 4

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

OMB 3235-0287

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

Form 5 obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

Stock

(Print or Type Responses)

Name and Address of Reporting Person * Lindsay Ronald Carter			2. Issuer Name and Ticker or Trading Symbol EASTMAN CHEMICAL CO [EMN] 3. Date of Earliest Transaction (Month/Day/Year) 02/20/2015					5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle) 200 SOUTH WILCOX								(Check all applicable) Director 10% Owner Officer (give title Other (specify below) Chief Operating Officer				
KINGSPOF	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						
(City)	(State)	(Zip)						Person				
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution D any (Month/Day		med on Date, if	3.	4. Security or (A) or Di (Instr. 3, 4)	ties Ac sposed	quired 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		
Common Stock	02/20/2015			A	30,000 (1)	A	\$ 0	139,185 (2) (3)	D			
Common Stock	02/20/2015			F	10,654 (4)	D	\$ 75.47	128,531	D			
Common Stock								955	I	By ESOP		
Common Stock								483 (5)	I	By 401(k) Plan		

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

Plan

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SEC 1474 (9-02)

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 Exerc	cisable and	7. Title	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration Date		Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						Ì
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date		Number		
						Z.ici cisuoie	2		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

Lindsay Ronald Carter 200 SOUTH WILCOX KINGSPORT, TN 37660

Chief Operating Officer

Signatures

Brian L. Henry, by Power of Attorney

02/24/2015 Date

**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) Payout under performance shares awarded at beginning of three-year (2012-2014) performance period.
- (2) Includes 10 shares acquired since February 26, 2014 resulting from automatic reinvestment of dividends.
- (3) Includes 27,500 shares reported as indirectly beneficially owned by GRAT in the reporting person's February 26, 2014 Form 4 filing.
- (4) Shares of common stock withheld in payment of tax liability incident to payout under performance shares.
- (5) Includes 10 shares acquired since February 26, 2014 resulting from automatic reinvestment of dividends.

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.

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