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| CORNING Form 4 | INC /NY | | | | | | | | | |
|--|---|--|--------------------|----------------------------|-----------------------------|---------------------------------|---------------|--|--|--|
| May 17, 20 | | | | | | | | | 0.45 | |
| FOR | VI 4 _{UNITED} | STATES S | SECU | RITIES | AND EX | KCH | ANGE C | COMMISSION | | APPROVAL |
| Chaolat | this box | | | | n, D.C. 2 | | | | Number: | 3235-0287 |
| if no lo subject Section Form 4 Form 5 | nger to STATE 16. or | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, | | | | | | | | January 31, 2005 I average burs per 0.5 |
| obligati may co | ions Section 17 | (a) of the P | ublic U | Jtility Ho | | mpai | ny Act of | 1935 or Sectio | n | |
| (Print or Type | e Responses) | | | | | | | | | |
| 1. Name and McRae La | Address of Reporting wrence D | Ś | Symbol | | nd Ticker o C /NY [G | | ling | 5. Relationship of Issuer | | |
| (Last) | (First) | | | | Transaction | - | | (Cheo | k all applicab | ble) |
| ONE RIVI | ERFRONT PLAZ | | (Month/ 05/16/2 | Day/Year) 2007 | | | | Director X Officer (give below) Senic | | % Owner ther (specify ent |
| CODUNY | (Street) | | | nendment, l onth/Day/Ye | Date Origin ear) | nal | | 6. Individual or Ja Applicable Line) _X_ Form filed by M | One Reporting | Person |
| | G, NY 14831 | | | | | | | Person | | in pointing |
| (City) | (State) | (Zip) | Tal | ble I - Non | -Derivativ | e Secu | ırities Acq | uired, Disposed o | f, or Benefici | ally Owned |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Da any (Month/Day/ | ate, if | Code (Instr. 8) | onor Dispos (Instr. 3, 4 | ed of (4 and 5 (A) or | 5) | 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 | 0541610007 | | | | Amount | (D) | Price | | D | |
| Stock | 05/16/2007 | | | М | 15,000 | А | \$ 4.06 | 142,804 | D | |
| Common Stock | 05/16/2007 | | | S | 15,000 | D | \$ 23.6386 | 127,804 | D | |
| Common Stock | | | | | | | | 759.77 | Ι | HELD BY WIFE - EMP. BENEFIT PLAN |
| Common Stock | | | | | | | | 5,019.65 | Ι | TRUSTEE U/EMPLOYEE BENEFIT |

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PLAN

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 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. Transactio Code (Instr. 8) | | | 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 |
| Stock Options (Right to buy) | \$ 4.06 | 05/16/2007 | | М | | 15,000 | 12/04/2003 | 12/03/2012 | Common Stock | 15,000 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | | |
|---|---------------|-----------|-----------------------|-------|--|--|--|--|
| reporting o when reality read on | Director | 10% Owner | Officer | Other | | | | |
| McRae Lawrence D ONE RIVERFRONT PLAZA CORNING, NY 14831 | | | Senior Vice President | | | | | |
| Signatures | | | | | | | | |
| Denise A. Hauselt, Power of | | 05/17/20 | 07 | | | | | |

Attorney

05/17/2007

Date

<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).

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.