FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 193
or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* GO EK Ventures IV, LLC					2. Issuer Name and Ticker or Trading Symbol EASTMAN KODAK CO [KODK]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner					
(Last) 7632 CO	(Last) (First) (Middle) 7632 COUNTY ROAD 42					3. Date of Earliest Transaction (Month/Day/Year) 04/01/2022									Officer (below)	give title		Other (s below)	specify
(Street) VICTOR NY 14564				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting					
(City) (State) (Zip)															Person				
1. Title of Security (Instr. 3) 2. Transa Date (Month/Date)			saction	action 2A. Deemed Execution Date,			3. Transaci Code (In	Transaction Disposed Of (D) (Instr. 3, 4 Code (Instr. 5)					5. Amoun Securities Beneficia Owned Fo Reported	s Forn Ily (D) o ollowing (I) (Ir		Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									v	Amount	(A) or (D)		Price	Transacti (Instr. 3 a				(111511.4)	
			Table II -						uired, Di						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Transa Code (8)		n of		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	or Nu	ount nber Shares					
5.00% Cumulative Series C Convertible Preferred Stock	\$10 ⁽¹⁾	04/01/2022			J ⁽²⁾		13,045		04/15/2022		(3)	Commo Stock	n 13	0,450	\$0	1,056,€	574	D	
		Reporting Person*							•										•
(Last) 7632 CO	UNTY RO	(First) AD 42	(Middl	e)															
(Street) VICTOR		NY	1456	4															
(City)		(State)	(Zip)																
		Reporting Person*																	
(Last) 3175 GR	EEN DOLI	(First) PHIN LANE	(Middl	e)															
(Street) NAPLES		FL	3410	2															
(City)		(State)	(Zip)																

- 1. The initial conversion price is subject to certain customary anti-dilution adjustments and to proportional increase in the event of the liquidation preference of the Series C Convertible Preferred Stock is increased.
- 2. The reporting person received 13,045 shares of 5.00% Cumulative Series C Convertible Preferred Stock as a payment-in-kind dividend on aggregate shares of Series C Preferred Stock owned at the close of business on the record date of April 1, 2022, and payable on April 15, 2022.
- 3. The 5.00% Cumulative Series C Convertible Preferred Stock is convertible into Common Stock at any time on a ten-for-one basis and has no expiration date.

B. Thomas Golisano

04/01/2022

** Signature of Reporting Person

Date

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

- * 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.

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 Number.