

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person *				2.	2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer						
											(Check all applicable)						
Goodman Se	an D			\mathbf{A}	MC	ENT	ERTAII	NM	ENT	HOLI)IN	GS.					
Goodman Scan D.					INC. [AMC]							Director 10% Owner					
(Last) (First) (Middle)					3. Date of Earliest Transaction (MM/DD/YYYY)							X Officer (give title below) Other (specify below)					
												EXECUTIVE VICE PRESIDENT & CFO					
11500 ASH STREET					8/16/2021												
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)						6. Individual or Joint/Group Filing (Check Applicable Line)						
I E AWOOD	VC (()	11															
LEAWOOD, KS 66211											X _ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)																	
					_	_		_			_	_		_			
								•	red, Di	sposed o	f, or	Ben	eficially Owne	ed			
1.Title of Security (Instr. 3)			2. T	rans. Date	2A. De Execu	3. Trans. Co (Instr. 8)					5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			6. Ownership	7. Nature		
(Instr. 3)					Date, if any				(Instr. 3, 4 and 5)				Instr. 3 and 4)	Transaction(s)		Form:	Beneficial
															Direct (D) or Indirect	Ownership	
										(A) or						(I) (Instr.	(IIISII. 4)
					Code V Amount (D) Price			4)									
CLASS A COMMON STOCK 8/16/2021				16/2021			$S^{(1)}$		45405	D	\$34.79	(2)	111300			D	
	Tab	le II - De	rivative S	ecurities	Bene	eficially	Owned ((e.g.	, puts,	calls, wa	ırran	ıts, o	ptions, conver	tible secu	ırities)		
1. Title of Derivate	2. Conversion or Exercise Price of Derivative Security	ion Date Ex Da ve	3A. Deemed						6. Date Exercisable and Expiration Date Securities Derivative						9. Number of		11. Nature
Security (Instr. 3)			Execution Date, if any	(Instr. 8)				Exp						Securities Securities	Ownership Form of	of Indirect Beneficial	
			, ,				of (D)				(Instr. 3 ar		d 4)	(Instr. 5)	Beneficially		Ownership
							4 and 5)					1			Owned Following	Security: Direct (D)	(Instr. 4)
								Dat		Expiration	Title		ount or Number of		Reported	or Indirect	
				Code	V	(A)	(D)	Exe	rcisable	Date	1100	Share	es		Transaction(s) (Instr. 4)	(1) (Instr. 4)	
					-			•									

Explanation of Responses:

- (1) The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person more than 30 days prior to the transaction.
- (2) The price reported is a volume weighted average price. The shares were sold in multiple transactions at prices ranging from \$32.74 to \$36.14, inclusive. The reporting person undertakes to provide the Issuer, any security holder of Issuer, and the staff of the SEC, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.

Reporting Owners

Reporting Owners									
Paparting Owner Name / Addr	200	Relationships							
Reporting Owner Name / Addr	Director	10% Owner	Officer		Other				
Goodman Sean D.									
11500 ASH STREET			EXECUTIVE VICE	PRESIDENT & CFO					
LEAWOOD, KS 66211									

Signatures

/S/EDWIN F GLADBACH, ATTORNEY-IN-FACT	8/18/202
**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 control number.