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

# **SCHEDULE 13G**

Under the Securities Exchange Act of 1934 (Amendment No. 1)\*

# KINS Technology Group Inc.

(Name of Issuer)

Class A Common Stock, par value \$0.0001 per share

(Title of Class of Securities)

49714K109

(CUSIP Number)

December 31, 2022

(Date of Event Which Requires Filing of This Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

- x Rule 13d-1(b)
- o Rule 13d-1(c)
- o Rule 13d-1(d)

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

<sup>\*</sup>The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

| 1  | NAMES OF REPORTING PERSONS   |   |               |                   |              |              |                      |  |  |  |  |
|--|--|---|---------------|-------------------|--------------|--------------|----------------------|--|--|--|--|
| -  | I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)  |   |               |                   |              |              |                      |  |  |  |  |
|  |  |   |               |                   |              |              |                      |  |  |  |  |
|  | Castle Creek Arbitrage, LLC  CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions)  (a)o |   |               |                   |              |              |                      |  |  |  |  |
| 2  | CHECK THE A  | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions) |               |                   |              |              |                      |  |  |  |  |
| _  |  |   |               | (b)o              |              |              |                      |  |  |  |  |
|  |  |   |               |                   |              |              |                      |  |  |  |  |
| 3  | SEC USE ONL  | Y   |               |                   |              |              |                      |  |  |  |  |
|  |  |   |               |                   |              |              |                      |  |  |  |  |
|  |  |   |               |                   |              |              |                      |  |  |  |  |
| 4  | CITIZENSHIP  | OR PLACE  | E OF ORGANI   | IZATION           |              |              |                      |  |  |  |  |
| _  | _ ,  |   |               |                   |              |              |                      |  |  |  |  |
|  | Delaware   | 1   |               |                   |              |              |                      |  |  |  |  |
|  |  | 5   | SOLE VOT      | ING POWER         |              |              |                      |  |  |  |  |
|  |  |   | 0             |                   |              |              |                      |  |  |  |  |
| NULLADED   | OF   |   | U CHARER I    | OTING DOLVED      |              |              |                      |  |  |  |  |
| NUMBER   | OF   | 6   | SHARED V      | OTING POWER       |              |              |                      |  |  |  |  |
| SHARES   | ALIV   |   | 0             |                   |              |              |                      |  |  |  |  |
| OWNED B  | BENEFICIALLY OWNED BY  |   | O E DICE      | POSITIVE POWER    |              |              |                      |  |  |  |  |
| EACH REI   |  | 7   | SOLE DISP     | OSITIVE POWER     |              |              |                      |  |  |  |  |
| PERSON V   |  |   | 0             |                   |              |              |                      |  |  |  |  |
| LIGOIV   | <b>1111.</b>   | _   | SHAREDE       | DISPOSITIVE POWE  | FD .         |              |                      |  |  |  |  |
|  |  | 8   | SHARED L      | DIST OSTITVE TOWE | 210          |              |                      |  |  |  |  |
|  |  |   | 0             |                   |              |              |                      |  |  |  |  |
| _  | AGGREGATE  | AMOUNT  | BENEFICIAL    | LY OWNED BY EA    | CH REPORTIN  | G PERSON     |                      |  |  |  |  |
| 9  |  |   |               |                   |              |              |                      |  |  |  |  |
|  | 0  |   |               |                   |              |              |                      |  |  |  |  |
| 10   | CHECK BOX I  | F THE AG  | GREGATE AN    | MOUNT IN ROW (9)  | ) EXCLUDES C | ERTAIN SHARE | S (see instructions) |  |  |  |  |
| 10   |  |   |               | ` '               | ,            |              | ` ,                  |  |  |  |  |
|  | О  |   |               |                   |              |              |                      |  |  |  |  |
| 11 PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9) |  |   |               |                   |              |              |                      |  |  |  |  |
| 11   |  |   |               |                   |              |              |                      |  |  |  |  |
|  | 0.00%  |   |               |                   |              |              |                      |  |  |  |  |
| 12   | TYPE OF REP  | ORTING PE   | ERSON (see in | nstructions)      |              |              |                      |  |  |  |  |
| 1-   |  |   |               |                   |              |              |                      |  |  |  |  |
|  | ΤΔ   |   |               |                   |              |              |                      |  |  |  |  |

| 1                    | NAMES OF REPORTING PERSONS   |  |                          |                 |              |      |  |      |  |  |
|----------------------|--|--|--------------------------|-----------------|--------------|------|--|------|--|--|
| 1                    | I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)                                |  |                          |                 |              |      |  |      |  |  |
|                      |  |  |                          |                 |              |      |  |      |  |  |
|                      | Mr. Allan Weine  |  |                          |                 |              |      |  |      |  |  |
| 2                    | CHECK THE A  | CK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions) |                          |                 |              |      |  |      |  |  |
| _                    |  |  |                          |                 |              |      |  | (b)o |  |  |
| _                    |  |  |                          |                 |              |      |  |      |  |  |
| 3                    | SEC USE ONL  | Y  |                          |                 |              |      |  |      |  |  |
|                      |  |  |                          |                 |              |      |  |      |  |  |
| 4                    | CITIZENSHIP  | OR PLACE   | E OF ORGANIZ             | ZATION          |              |      |  |      |  |  |
| 4                    |  | III OKTEROD OF OKORNIZATION                                      |                          |                 |              |      |  |      |  |  |
|                      | United States  |  |                          |                 |              |      |  |      |  |  |
|                      |  | 5  | SOLE VOTI                | NG POWER        |              |      |  |      |  |  |
|                      |  | •  |                          |                 |              |      |  |      |  |  |
|                      |  |  | 0                        |                 |              |      |  |      |  |  |
| NUMBER (             | OF   | 6  | SHARED VO                | OTING POWER     |              |      |  |      |  |  |
|                      | SHARES   |  |                          |                 |              |      |  |      |  |  |
| BENEFICIA<br>OWNED B |  |  | SOLE DISPOSITIVE POWER   |                 |              |      |  |      |  |  |
| EACH REP             |  | 7  | SOLE DISPO               | JSITIVE POWER   |              |      |  |      |  |  |
| PERSON W             |  |  | 0                        |                 |              |      |  |      |  |  |
| LINGUL               | , 1111,  | 8  | SHARED DISPOSITIVE POWER |                 |              |      |  |      |  |  |
|                      |  | Ö  |                          |                 |              |      |  |      |  |  |
|                      |  |  | 0                        |                 |              |      |  |      |  |  |
| 9                    | AGGREGATE .  | AMOUNT 1   | BENEFICIALI              | Y OWNED BY EACH | REPORTING PE | RSON |  |      |  |  |
|                      |  |  |                          |                 |              |      |  |      |  |  |
|                      | 0  |  |                          |                 |              |      |  |      |  |  |
| <b>10</b>            | 10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (see instructions) |  |                          |                 |              |      |  |      |  |  |
|                      | 0  |  |                          |                 |              |      |  |      |  |  |
| 44                   | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)  |  |                          |                 |              |      |  |      |  |  |
| 11                   | reacent of class refresented by Awiount in Row (9)   |  |                          |                 |              |      |  |      |  |  |
|                      | 0.00%  |  |                          |                 |              |      |  |      |  |  |
| 12                   | TYPE OF REPO   | ORTING PE  | ERSON (see ins           | structions)     |              |      |  |      |  |  |
| 14                   |  |  |                          |                 |              |      |  |      |  |  |
|                      | IN   |  |                          |                 |              |      |  |      |  |  |

| 1                  | NAMES OF REPORTING PERSONS  |   |               |                 |              |            |                  |           |  |   |  |
|--------------------|---|---|---------------|-----------------|--------------|------------|------------------|-----------|--|---|--|
| 1                  | I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)                                 |   |               |                 |              |            |                  |           |  |   |  |
|                    |   |   |               |                 |              |            |                  |           |  |   |  |
|                    | CC ARB West, LLC  CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions)  (a)o |   |               |                 |              |            |                  |           |  |   |  |
| 2                  | CHECK THE A   | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions) |               |                 |              |            |                  |           |  |   |  |
|                    |   |   |               |                 |              |            |                  |           |  |   |  |
| 2                  | SEC USE ONL   | V   |               |                 |              |            |                  |           |  | _ |  |
| 3                  | DEC COE CIVE  | ,1  |               |                 |              |            |                  |           |  |   |  |
|                    |   |   |               |                 |              |            |                  |           |  |   |  |
| 4                  | CITIZENSHIP   | CITIZENSHIP OR PLACE OF ORGANIZATION                                |               |                 |              |            |                  |           |  |   |  |
| -                  |   |   |               |                 |              |            |                  |           |  |   |  |
|                    | USA   |   |               |                 |              |            |                  |           |  |   |  |
|                    |   | 5   | SOLE VOT      | ING POWER       |              |            |                  |           |  |   |  |
|                    |   |   |               |                 |              |            |                  |           |  |   |  |
| NIII ADED          | OF  | _   | U CHARED W    | OTING DOMER     |              |            |                  |           |  |   |  |
| NUMBER (<br>SHARES | OF  | 6   | SHARED V      | OTING POWER     |              |            |                  |           |  |   |  |
| BENEFICIA          | ALLY  |   | 0             |                 |              |            |                  |           |  |   |  |
| OWNED B            |   | 7   | SOLE DISP     | POSITIVE POWER  | <br>?        |            |                  |           |  |   |  |
| EACH REP           |   | /   | SOLL DIST     | COITTYETCWER    |              |            |                  |           |  |   |  |
| PERSON W           | VITH:   |   | 0             |                 |              |            |                  |           |  |   |  |
|                    |   | 8   | SHARED D      | DISPOSITIVE POW | VER          |            |                  |           |  | _ |  |
|                    |   | U   |               |                 |              |            |                  |           |  |   |  |
|                    |   |   | 0             |                 |              |            |                  |           |  |   |  |
| 9                  | AGGREGATE   | AMOUNT I  | BENEFICIAL    | LY OWNED BY E   | ACH REPORTI  | ING PERSON | N                |           |  |   |  |
|                    |   |   |               |                 |              |            |                  |           |  |   |  |
| 10                 | CHECK BOX I   | IE THE ACC  | CDECATE AN    | AOUNT IN DOM    | (0) EVCLUDES | CEDTAINC   | IIADES (ann inst | mustions) |  |   |  |
| 10                 | CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (see instructions)     |   |               |                 |              |            |                  |           |  |   |  |
|                    | 0   |   |               |                 |              |            |                  |           |  |   |  |
| 11                 | PERCENT OF  | CLASS REI   | PRESENTED     | BY AMOUNT IN    | ROW (9)      |            |                  |           |  | _ |  |
| 11                 |   |   |               |                 | (- )         |            |                  |           |  |   |  |
|                    | 0.00%   |   |               |                 |              |            |                  |           |  |   |  |
| 12                 | TYPE OF REP   | ORTING PE   | ERSON (see in | structions)     |              |            |                  |           |  |   |  |
| 1-                 |   |   |               |                 |              |            |                  |           |  |   |  |
| 1                  | DN  |   |               |                 |              |            |                  |           |  |   |  |

| 1            | NAMES OF REPORTING PERSONS   |  |                        |                  |               |  |      |  |  |  |
|--------------|--|--|------------------------|------------------|---------------|--|------|--|--|--|
| 1            | I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY)                                |  |                        |                  |               |  |      |  |  |  |
|              |  |  |                        |                  |               |  |      |  |  |  |
|              | CC Arbitrage, Ltd  |  |                        |                  |               |  |      |  |  |  |
| 2            | CHECK THE A  | CK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (see instructions) |                        |                  |               |  |      |  |  |  |
| _            |  |  |                        |                  |               |  | (b)o |  |  |  |
| _            |  |  |                        |                  |               |  |      |  |  |  |
| 3            | SEC USE ONL  | Y  |                        |                  |               |  |      |  |  |  |
|              |  |  |                        |                  |               |  |      |  |  |  |
| 4            | CITIZENSHIP  | OR PLACE   | OF ORGANIZATION        | )N               |               |  |      |  |  |  |
| 4            | GITIELINGIIII  | 011121102  | 01 0110111111          |                  |               |  |      |  |  |  |
|              | Cayman Islands   | ;  |                        |                  |               |  |      |  |  |  |
|              |  | 5  | SOLE VOTING P          | OWER             |               |  |      |  |  |  |
|              |  | 9  |                        |                  |               |  |      |  |  |  |
|              |  |  | 0                      |                  |               |  |      |  |  |  |
|              | NUMBER OF  |  | SHARED VOTIN           | G POWER          |               |  |      |  |  |  |
| SHARES       |  | 6  | 0                      |                  |               |  |      |  |  |  |
| BENEFICIA    |  | 7  | SOLE DISPOSITIVE POWER |                  |               |  |      |  |  |  |
|              | OWNED BY<br>EACH REPORTING   |  | SOLE DISPOSITI         | VE POWER         |               |  |      |  |  |  |
| PERSON WITH: |  |  | 0                      |                  |               |  |      |  |  |  |
| LINGOI       | , 1111,  | 8  | SHARED DISPOS          | SITIVE POWER     |               |  |      |  |  |  |
|              |  | Ŏ  |                        |                  |               |  |      |  |  |  |
|              |  |  | 0                      |                  |               |  |      |  |  |  |
| 9            | AGGREGATE .  | AMOUNT I   | BENEFICIALLY OV        | VNED BY EACH REP | ORTING PERSON |  |      |  |  |  |
|              |  |  |                        |                  |               |  |      |  |  |  |
|              | 0  |  |                        |                  |               |  |      |  |  |  |
| <b>10</b>    | 10 CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (see instructions) |  |                        |                  |               |  |      |  |  |  |
|              | 0  |  |                        |                  |               |  |      |  |  |  |
| 44           | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)  |  |                        |                  |               |  |      |  |  |  |
| 11           | 1 FERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)  |  |                        |                  |               |  |      |  |  |  |
|              | 0.00%  |  |                        |                  |               |  |      |  |  |  |
| 12           |  | ORTING PE  | RSON (see instructi    | ons)             |               |  |      |  |  |  |
| 14           |  |  |                        |                  |               |  |      |  |  |  |
|              | 00   |  |                        |                  |               |  |      |  |  |  |

#### **Item 1(a).** Name of Issuer:

KINS Technology Group Inc. (the "Issuer")

#### **Item 1(b).** Address of Issuer's Principal Executive Offices:

Four Palo Alto Square, Suite 200 3000 El Camino Real Palo Alto, CA

#### **Item 2(a).** Name of Person Filing:

This statement is being jointly filed by:

- · Castle Creek Arbitrage, LLC, a Delaware limited liability company, ("Castle Creek")
- · Mr. Allan Weine, as the principal beneficial owner of Castle Creek Arbitrage, LLC
- · CC ARB West, LLC is a Delaware limited liability company
- · CC Arbitrage, Ltd. is a Cayman Island Company

Each of the foregoing is referred to as a "Reporting Person" and collectively as the "Reporting Persons."

Castle Creek Arbitrage, LLC serves as a registered investment adviser whose clients are CC Arb West, LLC and CC Arbitrage, Ltd. Mr. Weine is the managing member of Castle Creek. By virtue of these relationships, each of Castle Creek and Mr. Weine may be deemed to beneficially own the Issuer's Common Shares directly owned by CC ARB West, LLC and CC Arbitrage, Ltd.

#### **Item 2(b).** Address of Principal Business Office or, if none, Residence:

The principal business address of each reporting person is 111 W. Beaver Creek Blvd PO Box 3500 Avon, CO 81620.

## **Item 2(c).** Citizenship:

Castle Creek Arbitrage, LLC is a Delaware limited liability company.

Mr Weine is a US citizen.

CC ARB West, LLC is a Delaware limited liability company.

CC Arbitrage, Ltd. is a Cayman Island Company

# **Item 2(d).** Title of Class of Securities:

Class A Common Stock, par value \$0.0001 per share (the "Shares")

# Item 2(e). CUSIP Number: 49714K109

#### Item 3. If this Statement is filed pursuant to 240.13d-1(b) or 240.13d-2(b) or (c), check whether the person filing is a:

- (a) o Broker or dealer registered under Section 15 of the Act;
- (b) o Bank as defined in Section 3(a)(6) of the Act;
- (c) o Insurance company as defined in Section 3(a)(19) of the Act;
- (d) o Investment company registered under Section 8 of the Investment Company Act of 1940;
- (e) x An investment adviser in accordance with Rule 13d-1(b)(1)(ii)(E);
- (f) o An employee benefit plan or endowment fund in accordance with Rule 13d-1(b)(1)(ii)(F);
- (g) o A parent holding company or control person in accordance with Rule 13d-1(b)(1)(ii)(G);
- (h) o A savings association as defined in Section 3(b) of the Federal Deposit Insurance Act (12 U.S.C. 1813);
- (i) o A church plan that is excluded from the definition of an investment company under section 3(c)(14) of the Investment Company Act of 1940;
- (j) o A non-U.S. institution in accordance with Rule 240.13d-1(b)(1)(ii)(J);
- (k) o Group, in accordance with Rule 240.13d-1(b)(1)(ii)(K). If filing as a non-U.S. institution in accordance with Rule 240.13d-1(b) (1)(ii)(J), please specify the type of institution:

## Item 4. Ownership.

The information required by Items 4(a) - (c) is set forth in Rows (5) – (11) of the cover page for each Reporting Person hereto and is incorporated herein by reference for each such Reporting Person.

# Item 5. Ownership of Five Percent or Less of a Class.

If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be the beneficial owner of more than five percent of the class of securities, check the following  $\boxtimes$ .

### Item 6. Ownership of More than Five Percent on Behalf of Another Person.

Not applicable.

# Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on by the Parent Holding Company.

Not applicable.

#### Item 8. Identification and Classification of Members of the Group.

Not applicable.

#### Item 9. Notice of Dissolution of Group.

Not applicable.

# Item 10. Certification.

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired and are held in the ordinary course of business and were not acquired and are not held for the purpose of and do not have the effect of changing the control of the issuer of the securities and were not acquired and are not held in connection with or as a participant in any transaction having such purpose or effect for the time being.

# **SIGNATURE**

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

Dated: February 13, 2023 Castle Creek Arbitrage, LLC

By: Castle Creek Arbitrage, LLC As Investment Manager

By: /s/ Mr. Allan Weine Name: Mr. Allan Weine

Title: Managing Member of the Investment Manager

By: /s/ Chris Perz Name: Chris Perz

Title: Chief Compliance Officer