FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

•••	•	_	_	•	٠.				•	_	•	•	٠.	•	•	_	•	•	-
Ma	sh	inc	ıtor	า	П	C	20	154	ιq										

	OMB APPROVAL									
,	OMB Number:	3235-0287								

OMB Number:	3235-0287							
Estimated average burden								
hours per respons	se: 0.5							

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

1. Name ar	Sur	2. Issuer Name and Ticker or Trading Symbol Sun Country Airlines Holdings, Inc. [SNCY]								5. Relationship of Reportir (Check all applicable) Director			ng Person(s) to Issuer 10% Owner						
(Last) (First) (Middle)						SNCI								V	Office	er (give title		other (s	specify
C/O SUN INC. 2005 CA	3. Date of Earliest Transaction (Month/Day/Year) 10/01/2024									President & CFO									
	4. If /	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)									
(Street) MINNEAPOLIS MN 55450														V	Form filed by One Reporting Person Form filed by More than One Reporting				
(City) (State) (Zip)															Perso	on			
(Oity)		tive S	Secur	rities	Acc	auirec	d. Dis	sposed of	or E	Senefic	ially	Own	ed						
Table I - Non-Derivat 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/N						n 2A. Deemed Execution Date			3. Transa Code (1 8)	ction	4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			or 5. Amo and 5) Securi Benefi Owned		ount of ties cially I Following	6. Owners Form: Dir (D) or Ind (I) (Instr.	ect irect	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price		Transa	Reported Fransaction(s) Instr. 3 and 4)			(Instr. 4)
Common Stock, par value \$0.01 per share)24					978(1)	D	\$10.8	3629	38,273		D		
								osed of, convertib				Owne	t	,	<u> </u>				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date Security or Exercise (Month/Day/Year) if any			ition Date,		Transaction of Code (Instr. Deriva		ative ities ired sed 3, 4	Expiration I (Month/Day		ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own Forn Direc or In (I) (Ir	ership :: et (D) direct str. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

1. Represents the number of shares sold by the reporting person to cover tax withholding obligations in connection with the vesting of restricted stock units. This sale is mandated to satisfy the tax withholding obligations which are funded by a "sell to cover" transaction and does not represent a discretionary trade by the reporting person.

> /s/ Rose Neale, attorney-infact for David M. Davis

10/03/2024

** 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.