Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Vashington, | D.C. | 20549 | |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APP | ROVAL |
|--------------------|-----------|
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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 and Address of Reporting Person* Neale Erin Rose (Last) (First) (Middle) C/O SUN COUNTRY ARLINES HOLDINGS, INC. 2005 CARGO ROAD | | | | | Sun Country Airlines Holdings, Inc. [SNCY] Date of Earliest Transaction (Month/Day/Year) 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. | X | all app Direct Officet below S | er (give title Other (s | | wner specify pplicable | | |
|---|--|---------|----------------------------|-----------------|---|---|--------------|-------|------------|---|---|---|--------|--|-------------------------|--|--|--|------------|
| (Street) MINNEAPOLIS MN 55450 | | | | Ru | Form filed by More than One Reporting Person Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | | |
| (City) | (Sta | ate) (Z | Zip) | | | Check this box to indicate that a transaction was made pursuant to a contra satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction | | | | | | | | | | | | | |
| | | Table | I - N | on-Deriva | tive | Secui | rities | Ac | quired | d, Dis | sposed of | , or B | enefic | ially | Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/) | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Disposed Of | | | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Transa | saction(s) r. 3 and 4) | | | (111501.4) |
| Common Stock, par value \$0.01 per share 04/02/20 | | | |)24 | | | S | | 786(1) | D | \$14.4 | 146 36,992 | | 6,992 | | D | | | |
| Common Stock, par value \$0.01 per share 04/03/20 | | |)24 | | | S ⁽²⁾ | | 1,760 | D | \$14. | 41 | 35,232 | | D | | | | | |
| | 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) | erivative Conversion or Exercise (Month/Day/Year) Frice of Derivative Security Conversion or Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Conversion or Exercise (Month/Da | | 4. Transa Code 8) | | | | Expiration D | | expiration | 7. Title Amou Securi Under Deriva Securi 3 and | nt of ities lying ative ity (Instr. | • | | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

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.
- 2. This sale was effected pursuant to a Rule 10b5-1 trading plan. The 10b5-1 trading plan was adopted on June 5, 2023.

04/04/2024 /s/ Erin Rose Neale

** 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.