FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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

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 and Address of Reporting Person* Trousdale William (Last) (First) (Middle) C/O SUN COUNTRY AIRLINES HOLDINGS,					2. Issuer Name and Ticker or Trading Symbol Sun Country Airlines Holdings, Inc. [SNCY] 3. Date of Earliest Transaction (Month/Day/Year) 07/05/2023										all app Direct Office below	olicable) etor er (give title v)	ng Person(s) to 10% C Other below) Anlys & Tre		owner (specify
INC. 2005 CARGO ROAD					4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting					son	
(Street) MINNEAPOLIS MN 55450				50	Rule 10b5-1(c) Transaction Indication														
(City) (State) (Zip)					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table I	1 - I	Non-Derivat	tive S	ecu	rities	Acc	quire	d, Di	sposed o	f, or	Benefic	ially	Owr	ned			
Date				2. Transaction Date (Month/Day/Yea	Executio		on Date, T		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 a			and 5) Secu Bene Own Follo		icially d ving	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
								С	ode	v .	Amount	(A) or (D)	Price		Trans	ransaction(s) nstr. 3 and 4)			
Common Stock, par value \$0.01 per share					3			S			998	D	\$22.182	2.1828 ⁽²⁾		12,990		D	
		Tab	le I	II - Derivativ (e.g., put	ve Se ts, ca	curi IIs, v	ties <i>A</i> varra	Acqu ınts,	uired , opt	l, Dis ions,	posed of, converti	or B	eneficia ecurities	ally (s)	Owne	ed			
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Exercise (Month/Day/Year) if an		Deemed ecution Date, any onth/Day/Year)	Transaction Code (Instr. 8)		Secu Acqu (A) o Dispo	rative rities iired r osed) c. 3, 4	Expi (Mor	iration I nth/Day	(Year)	Amo Secu Unde Deriv Secu (Instr	Amount or Number of	-		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. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan. The 10b5-1 trading plan was adopted on February 10, 2023.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$21.81 to \$22.33, inclusive. The reporting person undertakes to provide to Sun Country Airlines Holdings, Inc. ("Sun Country"), any security holder of Sun Country, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (2) to this Form 4.

/s/ Rose Neale, attorney-infact for William Trousdale

07/07/2023

Date

** Signature of Reporting Person

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.