FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

OMB APPROVAL											
OMB Number:	3235-0287										
Estimated average burden											
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).

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* Mader Jeffrey						2. Issuer Name and Ticker or Trading Symbol Sun Country Airlines Holdings, Inc. [SNCY]								5. Relationship of Repo (Check all applicable) Director X Officer (give ti			g Pers	10% Ov	vner
(Last) C/O SUNINC.	C/O SUN COUNTRY AIRLINES HOLDINGS,						3. Date of Earliest Transaction (Month/Day/Year) 09/24/2021								below) below) Chief Information Off. & EVP				
(Street) MINNE	_ 4. l	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(5)		Zip)	Non-Deriv	vative	Sec	uriti	ies A	canirea	4 D	isnosed o	of or B	enefic	ially	Owner	<u> </u>			
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye					ion	2A. Deemed Execution Date,		Deemed 3. cution Date, Tra		3. 4. Securities Disposed Of Code (Instr.		s Acquired (A) or f (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
						Code	v	Amount	(A) or (D)	Price			ted action(s) 3 and 4)			(Instr. 4)			
Common Stock, par value \$0.01 per share 09/24/202						21			М		7,206	A	\$5	.3	8,	,543		D	
Common Stock, par value \$0.01 per share 09/24/202					021				S ⁽¹⁾		7,206	D	\$36.00	007(2)	1,337			D	
		Т	able I								sposed of , converti				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed tion Date, n/Day/Year)	4. Transa Code (8)				6. Date I Expirati (Month/I	on D		7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amou or Numb of Share	er					
Employee Stock Option (Right to	\$5.3	09/24/2021			M			7,206	(3)		11/21/2028	Common Stock	n 7,20	06	\$0	54,854		D	

Explanation of Responses:

Buv)

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$36.00 to \$36.01, 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.
- 3. Vest in four annual installments, subject to continued service, beginning April 11, 2019.

/s/ Eric Levenhagen, as attorney-in-fact for Jeffrey

09/27/2021

Mader

** 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.