FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF

| OMB APPROVAL             |               |  |  |  |  |  |  |
|--------------------------|---------------|--|--|--|--|--|--|
| OMB Number:              | 3235-<br>0104 |  |  |  |  |  |  |
| Estimated average burden |               |  |  |  |  |  |  |
| hours per response:      | 0.5           |  |  |  |  |  |  |

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

**SECURITIES** 

| 1. Name and Address of Reporting Person*  Neale Erin Rose  | 2. Date of I<br>Requiring S<br>(Month/Day<br>07/01/202 | Statement<br>y/Year) | 3. Issuer Name and Ticker or Trading Symbol Sun Country Airlines Holdings, Inc. [ SNCY ] |  |                                       |  |  |   |  |  |
|--|--|----------------------|--|--|---------------------------------------|--|--|---|--|--|
| (Last) (First) (Middle) C/O SUN COUNTRY AIRLINES   |  |                      | Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner |  |                                       | 5. If Amendment, Date of Original Filed (Month/Day/Year)   |  |   |  |  |
| HOLDINGS, INC.<br>2005 CARGO ROAD  | _  |                      | X Officer (give title below)  General Counsel as   | Other (specify below)                  |                                       | Individual or Joint/Group Filing (Check Applicable Line)     Form filed by One Reporting Person     Form filed by More than One Reporting Person |  |   |  |  |
| (Street) MINNEAPOLIS MN 55450  | _  |                      |  |  |                                       |  |  |   |  |  |
| (City) (State) (Zip)   |  |                      |  |  |                                       |  |  |   |  |  |
| Table I - Non-Derivative Securities Beneficially Owned   |  |                      |  |  |                                       |  |  |   |  |  |
| 1. Title of Security (Instr. 4)  |  |                      | 2. Amount of Securities<br>Beneficially Owned (Instr.<br>4)                              |  |                                       | Nature of Indirect Beneficial     Ownership (Instr. 5)   |  |   |  |  |
| Common Stock, par value \$0.01 per share   |  |                      | 19,715   | D                                      |                                       |  |  |   |  |  |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |                      |  |  |                                       |  |  |   |  |  |
| . Title of Derivative Security (Instr. 4)  2. Date Exercisable and Expiration Date (Month/Day/Year)                |  | ate                  | 3. Title and Amount of Securities<br>Underlying Derivative Security<br>(Instr. 4)        |  | 4.<br>Convers<br>or Exerc<br>Price of | ion C  | 5.<br>Ownership<br>Form:<br>Direct (D) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |  |  |
|  | Date<br>Exercisable                                    | Expiration<br>Date   | Title  | Amount<br>or<br>Number<br>of<br>Shares | Derivativ<br>Security                 | /e   o   | or Indirect<br>(I) (Instr. 5)          | 3,  |  |  |
| Employee Stock Option (right to buy)   | (1)  | 07/27/2031           | Common Stock   | 20,150                                 | 33.5                                  |  | D                                      |   |  |  |

## **Explanation of Responses:**

1. An option to purchase 12,392 shares vested on March 19, 2022 and the remaining option to purchase 7,758 shares vested on April 19, 2022.

/s/ Erin Rose Neale 07/11/2022

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (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.