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

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	iuc. Sec		Filed							es Exchang npany Act o		of 1934		<u> </u>	ours per	r response:	0.5
1. Name and Address of Reporting Person* Philipovitch Kerry				2. Issuer Name and Ticker or Trading Symbol Sun Country Airlines Holdings, Inc. [SNCY]								Check all	applicable) irector	Ü	Person(s) to I	wner		
(Last) (First) (Middle)														Officer (give title below)			Other (specify below)	
C/O SUN COUNTRY AIRLINES HOLDINGS, INC.					3. Date of Earliest Transaction (Month/Day/Year) 03/19/2021													
2005 CARGO ROAD				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) MINNEAPOLIS MN 55450												X F	,					
(City)	(Sta	ate) (Z	ip)															
		Table	I - Nor	n-Deriva	tive S	Secui	rities	Acq	uired,	Disp	osed of	, or E	Benefic	ially O	wned			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,		Date,	Transaction Disposed Code (Instr. 5)		ies Acquired (A Of (D) (Instr. 3		and See Be Ow	Amount of curities neficially rned Followiported	Fo (D	Ownership orm: Direct o) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Code	v	Amount	(A) (D)		Tra	Transaction(s) (Instr. 3 and 4)			(111301. 4)		
Common Stock, par value \$0.01 per share 03/19/				2021		P		2,250	2,250 A		24	5,139		D				
		Tal									sed of, o				ned	,	·	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)		te	7. Title Amou Secur Under Deriva Secur 3 and	int of ities rlying ative ity (Instr.	8. Price Derivat Securit (Instr. 5	derivat Securit Benefic Owned Follow Report	tive ties cially I ing ed ction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

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

03/22/2021

Philipovitch

** 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.