FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
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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

								• •											
Name and Address of Reporting Person* Bricker Jude						2. Issuer Name and Ticker or Trading Symbol Sun Country Airlines Holdings, Inc. [SNCY]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
					٦									Director			10% Ov	/ner	
(Last)	(Last) (First) (Middle)					Date of Earliest Transaction (Month/Day/Year)								Officer (below)	Officer (give title below)		Other (specify below)		
C/O SUN COUNTRY AIRLINES HOLDINGS, INC.					11	11/16/2021								Ch	Chief Executive Officer				
2005 CARGO ROAD																			
						If Amendment, Date of Original Filed (Month/Day/Year)							6 In	6. Individual or Joint/Group Filing (Check Applicable					
(Street)					_ "	monanish, bac or original rilea (monanbay/rear)								Line)					
' '	APOLIS M	IN	55450										Form fil	orm filed by One Reporting Person					
				_									Form fil Person	led by More than One Reportin		ting			
(City)	(5	state)	(Zip)											Person					
													<i>a</i> · · · ·						
		Ta	ble I - N	on-Der	rıvatıv	ve Se	ecur	ities Ac	quired	ı, Dı	sposed o	of, or Be	neficially	Owned					
1. Title of	Security (Ins	tr. 3)		2. Trans	action	ion 2A. Deemed Execution Date.			3. 4. Securities Acquired Disposed Of (D) (Instr.				5. Amour Securitie				7. Nature of Indirect		
Date (Month/Day/					Day/Yea			Code (Instr.) (D) (IIISII.	o, 4 ana o,	Beneficia	lly (D) o		or Indirect	Beneficial Ownership			
										I I		Owned Following Reported Transaction(s)		(I) (Instr. 4)		(Instr. 4)			
								Code	v	Amount	(A) or (D)	Price	(Instr. 3 a						
Common Stock, par value \$0.01 per share 11/16/20						.021		M		162,768	A	\$5.3	240,000			D			
The state of the s					0.10.00.4	1024					_	404 004		77.222		_			
Common	Stock, par	value \$0.01 per	share	11/16	5/2021	.021		S		162,768	D	\$31.281	3 77,232			D			
			Table II	- Deriv	/ative	Sec	uriti	es Acq	uired,	Dis	posed of	or Ben	eficially	Owned					
											converti								
1. Title of	2.	3. Transaction	3A. Deem	4.				6. Date Exercisable and			7. Title an		8. Price of	9. Number of		10.	11. Nature		
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)			Transa Code (Expiration Date (Month/Day/Year)			of Securit Underlyin		Derivative Security	derivative Securities		Ownership Form:	Beneficial	
(Instr. 3)					8)	Acquired (A) Derivative Sec (Instr. 3 and 4)						(Instr. 5)	Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)			
	Security						of (D) (Instr. 3, 4 and 5)		(,		Following		(I) (Instr. 4)			
				ŀ			3, 4	u.iu 5)					Amount	-	Transaction(s		s)		
													or		(111511.4)				
					Code	v	(A)	(D)	Date Exercis	isable	Expiration Date	Title	Number of Shares						
Employee																			
Stock Option	\$5.3	11/16/2021			М			162,768	(1)		11/21/2028	Common	162,768	\$0	457,87	70	D		
(Right to	45.5	11/10/2021										Stock	=52,7 50	•	,0	. •	~		

Explanation of Responses:

1. Vest in four annual installments, subject to continued service, beginning April 11, 2019.

/s/ Eric Levenhagen, as 11/18/2021 attorney-in-fact for Jude Bricker

** 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.