FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours ner resnonse.	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

1. Name and Address of Reporting Person* <u>Trousdale William</u>						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) Director Officer (give title Other (specify											wner		
(Last) (First) (Middle) C/O SUN COUNTRY AIRLINES HOLDINGS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 02/09/2023 VP-Fin. Plan. & Anlys & Treas.													
(Street) MINNEAPOLIS MN 55450						f Amer	ndmer	nt, Date	of Orig	inal Fi	iled (Month/D		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)) (Zip)																
1. Title of	Security (Ins		le I - I	Non-Deri		2A. D	eeme	d	3.		4. Securities	Acquired	(A) or		5. Amou	ınt of	6. O		7. Nature
Date		Date (Month/Day	//Year)	Execution Date,		Transaction Code (Instr. 8)					Benefic Owned		ially Following	Form: Direct (D) or Indirect (I) (Instr. 4)		of Indirect Beneficial Ownership			
									v	Amount	(A) or (D)	Price			eported ransaction(s) nstr. 3 and 4)			(Instr. 4)	
Common Stock, par value \$0.01 per share 02/09/202					023	23		M		7,436	A	\$5.	3	23,793			D		
Common Stock, par value \$0.01 per share 02/09/202					023	23			M		5,515	A	\$5.	3	29,308			D	
Common Stock, par value \$0.01 per share 02/09/202					023	23		S ⁽¹⁾		12,951	D	\$20.59	20.5939(2)		16,357		D		
		Т	able								sposed of				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	tion Date,	4. Transaction Code (Instr. 8)				6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		De Se (In	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	i S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amous or Number of Shares	er					
Employee Stock Option (Right to Buy)	\$5.3	02/09/2023			M			7,436	(3	3)	11/07/2028	Common Stock	7,430	6	\$0	5,515		D	
Employee Stock Option (Right to	\$5.3	02/09/2023			M			5,515	(2	3)	11/07/2028	Common Stock	5,51:	5	\$0	0		D	

Explanation of Responses:

- 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 \$20.29 to \$21.01 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. Grants may have a graded vesting schedule. Date Exercisable will vary for each vesting tranche.

/s/ Rose Neale, attorney-in-fact 02/10/2023 for William Trousdale

** 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.