FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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

OMB APPROVAL									
OMB Number:	3235-0287								
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

Name and Address of Reporting Person* <u>Levenhagen Eric</u>					2. Issuer Name and Ticker or Trading Symbol Sun Country Airlines Holdings, Inc. [ SNCY ]					Y] (Che	elationship of ck all applica Director	able)	Perso	on(s) to Issu 10% Ov Other (s	ner	
(Last)	(F	irst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/21/2022						X	below)		Off., (	below) GC & Sec	`
C/O SUN COUNTRY AIRLINES HOLDINGS, INC.																
(Street)	APOLIS M	IN	55450	_   4.						Line	. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person					
(City)	(S	itate)	(Zip)		Form filed by More than One Reporting Person							ting				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)			5. Amoun Securities Beneficia Owned Fo Reported	lly ollowing	Form: (D) or		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code V	Amount	(A) or (D)	Price	Transacti (Instr. 3 a	ion(s)			illstr. 4)		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Transa Security or Exercise (Month/Day/Year) if any Code		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)  6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and Am of Securities (Month/Day/Year)  6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and Am of Securities (Month/Day/Year)  7. Title and Am of Securities (Month/Day/Year)  8. Date Exercisable and Expiration Date (Month/Day/Year)  9. Date Exercisable and Expiration Date (Month/Day/Year)  9. Date Expiration Date (Month/Day/Year)  9. Date Exercisable and Exercisable and Expiration Date (Month/Day/Year)  9. Date Exercisa				ies g Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(0)		
Employee Stock Option (Right to Buy)	\$5.3	09/21/2022		A		14,872 <sup>(1)</sup>		(2)	11/21/2028	Common Stock	14,872	\$5.3	14,873	3	D	

## **Explanation of Responses:**

1. On November 21, 2018, the reporting person was granted an option to purchase 198,281 shares of common stock. The option vests in six installments based on Sun Country's satisfaction of certain performance criteria. The performance criteria for the second installment were met resulting in vesting of the option as to 14,872 shares on September 19, 2022.

2. Certain sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan. Other grants may have a graded vesting schedule. Date Exercisable will vary for each vesting tranche.

/s/ Rose Neale, as attorney-infact for Eric M. Levenhagen

09/23/2022

\*\* 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 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.