FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287
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hours per response: 0.5

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

1. Name and Address of Reporting Person* TACKETT SHANE R					2. Issuer Name and Ticker or Trading Symbol ALASKA AIR GROUP, INC. [ALK]										ck all applic	tionship of Reporting Per all applicable) Director Officer (give title below) VP/LABOR REL		son(s) to Is	
(Last) (First) (Middle) 19300 INTERNATIONAL BLVD					3. Date of Earliest Transaction (Month/Day/Year) 02/10/2015									X	Officer below)			Other (s	
(Street) SEATTLI	LE WA 98188 (State) (Zip)				4. If Amendment, Date of Original Filed (Month/Day/Year)									Line)	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	e I - N	on-Deriv	ative S	ecı	urities	Ac	quired, [Disp	osed of	f, or	Bene	eficially	y Owned				
Date					Γransaction te onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)			tion ıstr.	4. Securities Acquired (Disposed Of (D) (Instr. and 5)				5. Amou Securitie Benefici Owned	es	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount		(A) or (D)	Price	Followir Reported Transact (Instr. 3	ed ction(s)		. 4)	Instr. 4)
COMMON STOCK 401(K)(1)														2,8	2,878			ESOP FRUST	
COMMON STOCK ESPP(2)															49	94		D	
COMMON STOCK 02/10					:015				A ⁽³⁾		3,472	2	A	\$0	7,1	117	D		
RESTRICTED STOCK UNIT 02/10/2					015				A ⁽⁵⁾		2,090)	A	\$0	8,510			D	
COMMON STOCK 02/10/2					015				F ⁽⁶⁾		950		D	\$63.51	6,167			D	
			Tab	le II - Deri											vned				
1. Title of Derivative Security (Instr. 3)	or Exercise (Month/Day/Year) if any				5. Number		s, options, co 6. Date Exercise Expiration Date (Month/Day/Yea		able and	7. Title and Amount of Securities Underlying Derivative S (Instr. 3 and		, I Security	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirec (I) (Instr. 4)	Beneficial Ownership ect (Instr. 4)		
EMPLOYEE STOCK OPTION	\$65.37	02/10/2015			Code	V	(A) 1,850	(D)	02/10/2016	1	Date 02/10/2025		MMON OCK	1,850	\$0	1,85	0	D	

Explanation of Responses:

(RT TO BUY)

- $1.\ COMMON\ SHARES\ HELD\ IN\ THE\ ALASKA\ AIR\ GROUP\ INC.\ EMPLOYEE\ STOCK\ OWNERSHIP\ 401(K)\ PLAN\ TRUST\ AS\ OF\ 12/31/14.$
- 2. TOTAL COMMON SHARES ACQUIRED AS OF 12/31/2014 AS A PARTICIPANT IN THE ISSUER'S 2010 EMPLOYEE STOCK PURCHASE PLAN,
- 3. ALK COMMON SHARES ISSUED UPON ATTAINING PERFORMANCE GOALS SET FOR A THREE-YEAR PERIOD ENDING 12/31/2014, IN ACCORDANCE WITH THE TERMS OF PERFORMANCE STOCK UNITS GRANTED ON 2/14/2012 UNDER THE ISSUER'S 2008 PERFORMANCE INCENTIVE PLAN; PER APPROVAL BY THE BOARD'S COMPENSATION COMMITTEE ON 2/10/2015.
- $4. \ \ OPTIONS \ GRANTED \ VEST \ IN \ 25\% \ INCREMENTS \ OVER \ FOUR \ YEARS \ (02/10/2016, \ 02/10/2017, \ 02/10/2018 \ AND \ 02/10/2019).$
- 5. STOCK UNITS AWARDED UNDER THE ALASKA AIR GROUP, INC. 2008 PERFORMANCE INCENTIVE PLAN ON 2/10/2015 WILL CLIFF VEST ON 2/10/2018. UNITS ARE SUBJECT TO FORFEITURE.
- 6. COMMON SHARES FORFEITED TO COVER PAYROLL TAXES UPON VESTING OF PERFORMANCE STOCK UNITS ON 02/10/2015. AMOUNT PROVIDED IN COLUMN 4 REPRESENTS THE FMV OF THE SHARES ON THE DATE OF FORFEITURE.

/S/ JEANNE E GAMMON,
ATTORNEY IN FACT FOR
SHANE R. TACKETT

02/12/2015

** 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.