## FORM 4

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

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
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*  HARRISON ANDREW R				2. Issuer Name and Ticker or Trading Symbol ALASKA AIR GROUP, INC. [ ALK ]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner						
(Last) 19300 IN	(Firs	est) (M	liddle)		3. Date of Earliest Transaction (Month/Day/Year) 02/09/2016											give title  EVP &	& CRO	Other (s below)	
(Street) SEATTLE			8188		4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
(City)	(Sta		ip) 	on-Deriv	vative Securities Acquired, Disposed of, or Beneficially Owned														
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day.				ion 2A. Deemed Execution Date,			3. 4. Securi Transaction Dispose Code (Instr. and 5)			rities Acquired (A) or ed Of (D) (Instr. 3, 4			5. Amou Securitie Beneficia Owned	s Forn Ily (D) c		: Direct c	. Nature f Indirect seneficial Ownership		
					Code	v	Amount	(A) c	r Price		Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		Instr. 4)				
RESTRICTED STOCK UNIT 02/09/2						016			A <sup>(1)</sup>		3,050 A		\$0	1	11,920		D		
COMMON STOCK 02/09/2					016			A <sup>(3)</sup>		4,050 A		\$0		12,304		D			
COMMON STOCK 02/09/20					.016			F <sup>(4)</sup>		1,108	D	\$65.	63	3 11,196			D		
			Tabl	e II - Deri					uired, Di					Own	ed				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, n/Day/Year)		ransaction Code (Instr.		Number E		6. Date Exercisa Expiration Date (Month/Day/Yea		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		o D S	. Price if perivative security instr. 5)	9. Numbo derivative Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
					Code	v	(A)		Date Exercisabl		Expiration Date	Title	Amour or Number of Shares	er					
EMPLOYEE STOCK OPTION (RT TO BUY)	\$65.63	02/09/2016			A		7,310		02/09/2017	(2)	12/09/2026	COMMO! STOCK	7,310		\$0	7,310	0	D	

## **Explanation of Responses:**

- 1. STOCK UNITS AWARDED UNDER THE ALASKA AIR GROUP, INC. 2008 PERFORMANCE INCENTIVE PLAN ON 02/09/2016 WILL CLIFF VEST ON 02/09/2019. UNITS ARE SUBJECT TO FORFEITURE.
- $2. \ \ OPTIONS \ \ VEST \ IN \ 25\% \ INCREMENTS \ \ OVER \ \ FOUR \ \ YEARS \ \ (02/09/2017, \ 02/09/2018, \ 02/09/2019 \ \ AND \ 02/09/2020).$
- 3. ALK COMMON SHARES ISSUED UPON ATTAINING PERFORMANCE GOALS SET FOR A THREE-YEAR PERIOD ENDING 12/31/2015, IN ACCORDANCE WITH THE TERMS OF PERFORMANCE STOCK UNITS GRANTED ON 02/11/2013 UNDR THE ISSUER'S 2008 PERFORMANCE INCENTIVE PLAN; PER APPROVAL BY THE BOARD'S COMPENSATION AND LEADERSHIP DEVELOPMENT COMMITTEE ON 02/09/2016.
- $4. \ COMMON\ SHARES\ FORFEITED\ TO\ COVER\ PAYROLL\ TAXES\ UPON\ VESTING\ OF\ PERFORMANCE\ STOCK\ UNITS\ ON\ 02/09/2016.\ AMOUNT\ PROVIDED\ IN\ COLUMN\ 4\ REPRESENTS\ THE\ FMV\ OF\ THE\ SHARES\ ON\ THE\ DATE\ OF\ FORFEITURE.$

/S/ JEANNE E GAMMON, ATTORNEY IN FACT FOR ANDREW R. HARRISON

02/11/2016

\*\* 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.