SEC Form 4	
FORM 4	UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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OMB Numbe	r: 3235-0287				
Estimated average burden					
hours per res	sponse: 0.5				

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Section 16.	box if no longe Form 4 or Form may continue. 1(b).	m 5	STA		ed purs	uant te	o Sect	tion 16(a)	of the Se	ecuriti	EFICIA	ge Act of 19		ΗP	Estima	Number ated ave per res	erage burden	3235-0287 0.5
1. Name and Address of Reporting Person [*] MINICUCCI BENITO				2. Is:	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol ALASKA AIR GROUP, INC.								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) ALASKA AIR GROUP, INC.					3. Date of Earliest Transaction (Month/Day/Year) 02/25/2024								CEO AND PRESIDENT				pecify	
19300 INTERNATIONAL BLVD (Street) SEATTLE WA 98188				4. lf .	4. If Amendment, Date of Original Filed (Month/Day/Year)								ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State	:) (Z	ip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Tab	le I - No	n-Deri	vative	e Sec	uriti	es Acc	juired,	Dis	posed of	f, or Ben	eficially	Owned				
Date				ate E Ionth/Day/Year) i			2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		ies Acquired (A) or Of (D) (Instr. 3, 4 and		Beneficia Owned Fo	s Ily	Form	Direct Indirect str. 4)	7. Nature of ndirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 and	on(s)			(Instr. 4)	
COMMON STOCK 02/25				5/2024				М		12,580 A		\$0 ⁽¹⁾	143,	3,509		D		
COMMON STOCK 02/25				5/2024				F		4,655 D ⁽²⁾ \$		\$38.65	5 138,	138,854		D		
		Т									osed of, onvertib			wned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year)		Execution if any	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		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 Amou of Securities Underlying Deriva Security (Instr. 3 a 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares					
RESTRICTED STOCK UNITS	\$0 ⁽¹⁾	02/25/2024			М			12,580	02/25/20	24	02/25/2024	COMMON STOCK	12,580	\$0	0		D	

Explanation of Responses:

1. Each restricted stock unit (RSUs) represents a contingent right to receive one share of ALK common stock.

2. The shares withheld were an exempt disposition to the Issuer under Rule 16b-3(e) to satisfy tax withholding obligations arising out of the vesting of RSUs and settled with shares by the reporting person. **Remarks:**

<u>/s/ Howard Kuppler, by power</u> of attorney	<u>02/26/2024</u>
** Signature of Reporting Person	Date

** Signature of Reporting Person

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.