SEC Form 4	
FORM 4	U

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

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

OMB Number:	3235-0287
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

1. Title of Security (Instr. 3) 2. Transa				2A. Deemed	3.	4. Securities Acquired (A)	or	5. Amount of	6. Ownership	7. Nature of			
		Table I - Noi	n-Derivative S	Securities Acq	uired, Dis	oosed of, or Benefic	cially C	Owned					
(City)	(State)	(Zip)											
	***	55100						Form filed by Mor Person	e than One Repo	orting			
(Street)	WA	98188					X	Form filed by One	Reporting Perso	on			
			4. If Ar	4. If Amendment, Date of Original Filed (Month/Day/Year)				6. Individual or Joint/Group Filing (Check Applicable Line)					
19300 INTERN	NATIONAL BL	VD											
C/O ALASKA AIRLINES, INC.			04/30	/2020				EVP FINANCE/CFO					
(Last) (First) (Middle)			e of Earliest Transac	tion (Month/D	ay/Year)	X	below)	below)					
						-		Director Officer (give title	10% C Other	)wner (specify			
1. Name and Address of Reporting Person <sup>*</sup> TACKETT SHANE R				er Name <b>and</b> Ticker			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
			01 500		council com	Sariy 7 let 01 1040							

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
	Code V Amount (A) or (D) Price		Price	Transaction(s) (Instr. 3 and 4)		(1130.4)				
COMMON STOCK 401(K) <sup>(1)</sup>								2,807	Ι	ESOP TRUST
COMMON STOCK	04/30/2020		A <sup>(2)</sup>	v	202	A	\$27.642	10,787	D	
COMMON STOCK	08/03/2020		М		330	A	\$0	11,117	D	
COMMON STOCK	08/03/2020		F <sup>(3)</sup>		81	D	<b>\$34</b> <sup>(4)</sup>	11,036	D	

 
 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of		Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security rity (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			Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
RESTRICTED STOCK UNIT	\$0	08/03/2020		М			330	08/03/2020	08/03/2027	COMMON STOCK	330	\$0	0	D	

Explanation of Responses:

1. COMMON SHARES HELD IN THE ALASKA AIR GROUP INC. EMPLOYEE STOCK OWNERSHIP 401(K) PLAN TRUST AS OF 12/31/2019.

2. SHARES ACQUIRED UNDER THE ALASKA AIR GROUP, INC. EMPLOYEE STOCK PURCHASE PLAN IN A TRANSACTION THAT IS EXEMPT UNDER BOTH RULE 16b-3(d) and RULE 16b-3(c). 3. SHARES FORFEITED TO COVER PAYROLL TAXES UPON VESTING OF RESTRICTED STOCK UNITS ON 08/03/2020.

3. SHARES FORFEITED TO COVER PAYROLL TAXES UPON VESTING OF RESTRICTED STOCK UNITS ON 08/03/2020.

4. PRICE PROVIDED IN COLUMN 4 REPRESENTS THE FMV OF ALK SHARES ON THE DATES SHARES WERE FORFEITED FOR PAYROLL TAXES.

<u>JEANNE E. GAMMON,</u> <u>ATTORNEY IN FACT FOR</u> ( <u>SHARE R. TACKETT</u>

08/04/2020

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $\ast$  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.