ALASKA AIR GROUP, INC.

Form 4

November 18, 2015

FORM 4	1							OMB APP	ROVAL		
	■ UNITED STA	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							3235-0287		
Check this bo if no longer subject to Section 16. Form 4 or Form 5	STATEMEN	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES						Expires: January Estimated average burden hours per response			
obligations may continue See Instruction 1(b).	Section 17(a) of	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940									
Print or Type Resp	oonses)										
1. Name and Addr BERRY CHRIS MICHAEL	ess of Reporting Person	Symbol	Symbol ALASKA AIR GROUP, INC.				Relationship of Reporting Person(s) to ssuer (Check all applicable)				
(Last) 19300 INTERN	(First) (Middle	(Month/Day/Y	3. Date of Earliest Transaction (Month/Day/Year) 11/16/2015				·	le 10% O below) ACCT OFCR			
SEATTLE, WA	(Street) A 98188	4. If Amendmo		inal		Applio_X_ F	cable Line) Form filed by Oncorm filed by Mor	t/Group Filing(e Reporting Person re than One Repo	on		
(City)	(State) (Zip)	Table I -	Non-Derivati	ve Secur	ities	Acquired,	Disposed of, o	or Beneficially	Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquir Transaction(A) or Disposed of Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D)			d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s (Instr. 3 and 4	Ownership Form: Direct (D) or Indirect (I) (s) (Instr. 4)	7. Nature of Indirect Beneficial Ownershij (Instr. 4)		
RESTRICTED STOCK UNIT							4,500	D			
COMMON STOCK ESPP	11/16/2015		S 6	66	D	\$ 76.273	181	D			
Reminder: Report of	on a separate line for ea	ach class of securities									
			Dor	aana w	20 20	anand to	the collection	on of CEC	11/7/		

information contained in this form are not

required to respond unless the form displays a currently valid OMB control number.

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(9-02)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	orNumber	Expiration D	ate	Amount	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underly	ing	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securitie	es	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3	and 4)		Own
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
								^	mount		
									mount		
						Date	Expiration Date	or Title Number of			
						Exercisable					
				C + V	(A) (D)						
				Code V	(A) (D)			S	hares		

Reporting Owners

Relationships Reporting Owner Name / Address

> Officer Other Director 10% Owner

BERRY CHRISTOPHER MICHAEL 19300 INTERNATIONAL BLVD SEATTLE, WA 98188

PRIN ACCT OFCR

Signatures

JEANNE E GAMMON, ATTORNEY IN FACT FOR CHRISTOPHER MICHAEL **BERRY**

11/18/2015

**Signature of Reporting Person

Date

Explanation of Responses:

- 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).
- STOCK UNITS AWARDED UNDER ALASKA AIR GROUP'S 2008 PERFORMANCE INCENTIVE PLAN; SUBJECT TO FORFEITURE.
- SHARES ACQUIRED UNDER THE ALASKA AIR GROUP, INC. 2010 EMPLOYEE STOCK PURCHASE PLAN THROUGH (2) 8/31/2015. TOTAL ESPP SHARES HELD AFTER THIS TRANSACTION REFLECTS THE VOLUNTARY REPORTING OF 32 SHARES ACQUIRED UNDER THE ESPP ON 8/31/15.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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