#### ALASKA AIR GROUP, INC.

Form 4

January 27, 2014

#### FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB APPROVAL** 

OMB 3235-0287 Number:

January 31, Expires: 2005

10% Owner

Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

(Check all applicable)

Issuer

Director

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** Form 4 or

2. Issuer Name and Ticker or Trading

ALASKA AIR GROUP, INC.

3. Date of Earliest Transaction

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

Symbol

[ALK]

(Middle)

1(b).

(Last)

(Print or Type Responses)

JOHNSON GLENN S

1. Name and Address of Reporting Person \*

(First)

19300 INTERN	ATIONAL BLV	(Month/Day/	(Month/Day/Year) 01/24/2014				Officer (give title Other (specify below)  PRESIDENT/HORIZON AIR				
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
SEATTLE, WA	98188					For	rm filed by More th	an One Reporti	ng		
(City)	(State) (Zip	Table I	- Non-Deri	vative Seco	urities	Acquired, I	Disposed of, or B	eneficially O	wned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code (Instr. 8)	iotor Dispo (Instr. 3,	osed of , 4 and (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
COMMON STOCK 401(K) (1)							2,549	I	ESOP TRUST		
RESTRICTED STOCK UNIT (2)							18,070	D			
COMMON STOCK ESPP							347	D			
COMMON STOCK	01/24/2014		S	3,000	D	\$ 80.3501	9,315	D			

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

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 control number.

SEC 1474 (9-02)

> 9. Nu Deriv Secur Bene

Follo Repo Trans (Insti

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 Exerci	sable and	7. Title a	ınd	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	iorNumber	er Expiration Date		Amount of		Derivative
Security	or Exercise		any	Code	of	(Month/Day/Y	(ear)	Underlyi	ing	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative			Securities	(Instr. 5)	
	Derivative			Securities				(Instr. 3	and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									mount	
						Date	Expiration Date	or		
						Exercisable			umber	
								of		
				Code V	$^{\prime}$ (A) (D)			Sh	nares	

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

JOHNSON GLENN S 19300 INTERNATIONAL BLVD SEATTLE, WA 98188

PRESIDENT/HORIZON AIR

### **Signatures**

/S/ JEANNE E. GAMMON, ATTORNEY IN FACT FOR GLENN S. JOHNSON

01/27/2014

\*\*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).
- (1) COMMON SHARES HELD IN THE ALASKA AIR GROUP, INC. EMPLOYEE STOCK OWNERSHIP 401(K) PLAN TRUST, AS OF 12/31/13.
- (2) STOCK UNITS AWARDED UNDER THE 2008 PERFORMANCE INCENTIVE PLAN; NOT VESTED BUT NO LONGER SUBJECT TO FORFEITURE.
- (3) SHARES ACQUIRED UNDER THE ALASKA AIR GROUP, INC. 2010 EMPLOYEE STOCK PURCHASE PLAN, AS OF 12/31/13.

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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