LOVELESS KEITH

Form 4

February 02, 2007

FORM 4

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

OMB Number:

3235-0287

0.5

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

OMB APPROVAL

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Section 16. Form 4 or Form 5 obligations may continue.

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

1(b).

COMMON

STOCK (2)

(Print or Type Responses)

See Instruction

1. Name and Address of Reporting Person *LOVELESS KEITH		rson * 2. Issuer I Symbol	2. Issuer Name and Ticker or Trading Symbol				5. Relationship of Reporting Person(s) to Issuer			
		ALASKA	A AIR GR	OUP IN	C [AI	LK]	(Chec	k all applicable)	
(Last)	(First) (Mid	Idle) 3. Date of I	3. Date of Earliest Transaction							
		(Month/Da					Director		Owner	
	RLINES INC, 193	300 01/31/20)7				_X_ Officer (give below)	below)	r (specify	
INTERNATIO	ONAL BLVD						· · · · · · · · · · · · · · · · · · ·	GENERAL CO	OUNSEL	
	4. If Amen	If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
SEATTLE, W	A 98188	Filed(Month	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State) (Zi	Table	I - Non-Der	ivative Se	curitie	es Acqu	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction Date		3.	4. Securi			5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)		TransactionAcquired (A) or				Securities	Form: Direct		
(Instr. 3)		any (Month/Day/Year)	Code Disposed of h/Day/Year) (Instr. 8) (Instr. 3, 4 a				Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(Month/Day/Tear)	(IIISII. 0)	(Instr. 3, 4 and 5)		3)			(Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(mon. 1)	(Insti. 1)	
COMMON STOCK (1)	01/31/2007		A	1,480	A	\$0	14,750	D		

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

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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 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. Transactic Code (Instr. 8)	5. Number on f 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 Amount Underlying Securitie (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Am or Nur of Sha
EMPLOYEE STOCK OPTION (RIGHT TO BUY)	\$ 42.85	01/31/2007		A(3)	6,710	01/31/2008	01/31/2017	COMMON	6,

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

LOVELESS KEITH ALASKA AIRLINES INC 19300 INTERNATIONAL BLVD SEATTLE, WA 98188

VP/LEGAL & GENERAL COUNSEL

Signatures

SHANNON K. ALBERTS FOR KEITH LOVELESS, ATTORNEY-IN-FACT

02/02/2007

**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) RESTRICTED STOCK UNITS AWARDED UNDER THE 2004 LONG-TERM INCENTIVE EQUITY PLAN; SUBJECT TO FORFEITURE.
- (2) SHARES HELD IN EMPLOYEE STOCK OWNERSHIP PLAN AS OF DECEMBER 31, 2006.
- (3) GRANT OF STOCK OPTIONS UNDER THE 2004 LONG-TERM INCENTIVE EQUITY PLAN. THIS GRANT WILL VEST 25% EACH YEAR FOR FOUR YEARS BEGINNING ON JANUARY 31, 2007.

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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