FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Indigo Frontier Holdings Company, LLC						2. Issuer Name and Ticker or Trading Symbol Frontier Group Holdings, Inc. [ULCC]									Check all a	nip of Report oplicable) ector			Issuer Owner	
(Last)	, , , , , , , , , , , , , , , , , , , ,			e)		Date of Earliest Transaction (Month/Day/Year) 4/05/2024								cer (give title ow)	e	Othe belov	r (specify v)			
C/O INDIGO PARTNERS 2525 EAST CAMELBACK ROAD, SUITE 900						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(Street) PHOENI	treet) HOENIX AZ 85016			5		Form filed by More than One Reporting Person													eporting	
(City)	(State) (Zip)					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.														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye					ear) l	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				5) Secu Bene Owne	5. Amount of Securities Beneficially Owned Following Reported		vnership n: Direct r ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	An	nount	(A) c (D)	Price	Trans	action(s) 3 and 4)	(Inst	r. 4)	(instr. 4)	
Common Stock 04/05/2024					24	1			J ⁽¹⁾		178,834,034		D	\$0.0	00	0		I	by Indigo Frontier Holdings Company, LLC ⁽²⁾	
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)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any			cution Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exp (Mo	ate Ex iration nth/Da	n Da		7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficia Owned Following Reported	Following Reported Transaction(s)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	e rcisab	ole	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. Represents a pro-rata distribution in-kind by Indigo Frontier Holdings Company, LLC to its members for no consideration.
- 2. These shares are held directly by Indigo Frontier Holdings Company, LLC. William A. Franke is a member of the Issuer's Board of Directors and the sole member of Indigo Denver Management Company, LLC, which is the managing member of Indigo Frontier Holdings Company, LLC.

INDIGO FRONTIER HOLDINGS COMPANY, LLC, by: Indigo Denver Management Company, LLC, 04/09/2024 its managing member, by: /s/ William A. Franke, managing

** Signature of Reporting Person Date

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.