

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL	
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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* <u>Wildcat Capital Management, LLC</u>  (Last) (First) (Middle) <u>888 7TH AVENUE, 37TH FLOOR</u>  (Street) <u>NEW YORK NY 10106</u>  (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) <u>04/05/2024</u>	3. Issuer Name and Ticker or Trading Symbol <u>Frontier Group Holdings, Inc. [ ULCC ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director <input checked="" type="checkbox"/> 10% Owner  Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person  <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	28,061,351	I	See note <sup>(1)</sup>

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

1. Name and Address of Reporting Person\*  
Wildcat Capital Management, LLC  
 (Last) (First) (Middle)  
888 7TH AVENUE, 37TH FLOOR  
 (Street)  
NEW YORK NY 10106  
 (City) (State) (Zip)

1. Name and Address of Reporting Person\*  
Wildcat Partner Holdings, LP  
 (Last) (First) (Middle)  
301 COMMERCE STREET, SUITE 3150  
 (Street)  
FORT WORTH TX 76102  
 (City) (State) (Zip)

1. Name and Address of Reporting Person\*  
Potter Leonard

(Last)	(First)	(Middle)
C/O WILDCAT CAPITAL MANAGEMENT, LLC		
888 7TH AVENUE, 37TH FLOOR		

(Street)		
NEW YORK	NY	10106

(City)	(State)	(Zip)
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**Explanation of Responses:**

1. Wildcat Partner Holdings, LP ("WPH") directly holds 28,061,351 shares of common stock (the "WPH Shares"). Wildcat Capital Management, LLC ("Wildcat Capital") may be deemed to beneficially own the WPH Shares based on having voting power, which includes the power to vote or to direct the voting of such shares, and investment power, which includes the power to dispose, or direct the disposition of, such shares, pursuant to the terms of the WPH limited partnership agreement and an investment management agreement by and between Wildcat Capital and WPH. Mr. Potter is an officer and the sole member of Wildcat Capital. Because of the relationship of Mr. Potter to Wildcat Capital, Mr. Potter may be deemed to beneficially own the WPH Shares. Each Reporting Person disclaims beneficial ownership of any common stock beneficially owned by the other Reporting Persons except to the extent of their pecuniary interest therein.

/s/ Leonard A. Potter,  
President, Wildcat Capital 04/08/2024  
Management, LLC

/s/ Sherri Conn, Vice  
President, Wildcat Partner 04/08/2024  
Holdings, LP

/s/ Leonard A. Potter 04/08/2024

\*\* 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 5 (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.**