Bauer Kris B Form 4/A May 22, 2012

FORM 4

OMB APPROVAL

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

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

January 31, Expires:

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

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting F Bauer Kris B	Person <u>*</u>	2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) (First) (M	Iiddle)	Allegiant Travel CO [ALGT] 3. Date of Earliest Transaction				
8360 SOUTH DURANGO D	,	(Month/Day/Year) 05/18/2012	Director 10% Owner X Officer (give title Other (specify below) SVP-Operations			
(Street)		4. If Amendment, Date Original Filed(Month/Day/Year) 05/21/2012	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
LAS VEGAS, NV 89113	· · ·		Form filed by More than One Reporting Person			

(City)	(State)	(Zip) Tabl	e I - Non-D	Perivative Securities	es Acquired, Disposed o	of, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any		3. Transaction	4. Securities Acquion(A) or Disposed of (Instr. 3, 4 and 5)	of (D) Securities	Securities Form: Direct Indirect		
		(Month/Day/Year)	(Instr. 8)	(A) or	Owned Following Reported Transaction(s) (Instr. 3 and 4)	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Common Stock	05/18/2012		F	\$ 882 (1) D 63	3.33 15,808 <u>(3)</u>	D		

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title	and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration D	ate	Amour	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)	Bene
	Derivative				Securities			(Instr. :	3 and 4)		Owne
	Security				Acquired						Follo
	·				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									A		
									Amount		
						Date	Expiration		or		
					Exercisable	Date		Number			
				~					of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

Bauer Kris B

8360 SOUTH DURANGO DRIVE SVP-Operations

LAS VEGAS, NV 89113

Signatures

Robert B. Goldberg, under power of attorney 05/22/2012

**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) Beneficial owner granted shares of restricted stock on 5/18/2010 with vestng over three years. Upon vesting, beneficial owner returned to Company a portion of the vested shares for tax withholding purposes.
- (2) Shares of restricted stock effectively repurchased by Company at \$63.33 per share to fund the beneficial owner's required tax withholding.
- (3) The sole reason for the filing of this Form 4/A is to correct the amount of securities beneficially owned following the transaction date. All other information contained on the original Form 4 was accurately reported.

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.

Reporting Owners 2