

WILSON ROBERT PAUL III  
 Form 3  
 June 11, 2018

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
 Expires: January 31, 2005  
 Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

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

(Print or Type Responses)

1. Name and Address of Reporting Person *			2. Date of Event Requiring Statement		3. Issuer Name <b>and</b> Ticker or Trading Symbol	
Â WILSON ROBERT PAUL III			(Month/Day/Year)		Allegiant Travel CO [ALGT]	
(Last)	(First)	(Middle)	06/01/2018		4. Relationship of Reporting Person(s) to Issuer	
1201 N TOWN CENTER DR					5. If Amendment, Date Original Filed(Month/Day/Year)	
(Street)						
LAS VEGAS,Â NVÂ 89144					6. Individual or Joint/Group Filing(Check Applicable Line)	
(City)	(State)	(Zip)			<input type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person	
					(Check all applicable) <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below)    (specify below) EVP and CIO	

**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	18,196 <sup>(1)</sup>	D	Â

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

SEC 1473 (7-02)

**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.**

**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 of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable    Expiration Date	Title    Amount or Number of			

Stock Appreciation Right	Â (2)	02/25/2020	Common Stock	Shares 3,045	\$ 181.47	(I) (Instr. 5) D	Â
--------------------------	-------	------------	-----------------	-----------------	-----------	------------------------	---

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
WILSON ROBERT PAUL III 1201 N TOWN CENTER DR LAS VEGAS, NV 89144	Â	Â	Â EVP and CIO	Â

## Signatures

Robert B. Goldberg, under power of attorney  
Date: 06/11/2018

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

\* 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).

(1) Of these shares, 643 shares are shares of restricted stock vesting on February 17, 2019; 3,750 shares are shares of restricted stock vesting one-half on each of May 7, 2019 and May 7, 2020; 1,534 shares are shares of restricted stock vesting one-half on each of February 21, 2019 and February 21, 2020; and 2,859 shares are shares of restricted stock vesting one-third on each of February 8, 2019, February 8, 2020 and February 8, 2021.

(2) Cash-settled stock appreciation rights exercisable one-third on each of February 25, 2016, February 25, 2017 and February 25, 2018. Fully vested.

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.