FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
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l	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)

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

	nd Address of exander S		2. Issuer Name <b>and</b> Ticker or Trading Symbol Sabre Corp [ SABR ]									all applic	,			vner				
(Last) 3150 SA	(Fi BRE DR		3. Date of Earliest Transaction (Month/Day/Year) 03/22/2016								X	below)			респу					
(Street) SOUTHLAKE TX 76092 (City) (State) (Zip)							4. If Amendment, Date of Original Filed (Month/Day/Year)								Form f	or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson				
		•		Non-Deri	vative	e Sec	uriti	es A	cauired	. D	isposed o	f. or B	enefic	ially	Owned	 I				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye					ion	2A. Deemed Execution Date,			3. Transacti Code (Ins	on	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			5. Amor Securit Benefic Owned		int of es ially Following	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code V Amount		Amount	(A) or (D) Price			Reported Transaction(s) (Instr. 3 and 4)			[	(Instr. 4)	
Common	Stock	016	16			M <sup>(1)</sup>		3,000	A \$9.17		17	30,140			D					
Common Stock 03/22/201							.6		S <sup>(1)</sup>		2,335	D	\$27.43	301 <sup>(2)</sup>	27,805			D		
		Т	able								posed of, , converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed tion Date, n/Day/Year)	4. Transa Code ( 8)				6. Date E Expiratio (Month/D	n Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e O S Fe Ily D OI (I)	LO. Downership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal	ble	Expiration Date	Title	Amou or Numb of Share	er						
Options to Purchase Common	\$9.17	03/22/2016			M <sup>(1)</sup>			3,000	(3)		05/15/2022	Commor Stock	3,00	0	\$9.17	34,988		D		

## **Explanation of Responses:**

- 1. The transactions reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan executed by the reporting person on February 27, 2015.
- 2. The price reported is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$27.35 to \$27.51, inclusive. The reporting person undertakes to provide to Sabre Corporation, any security holder of Sabre Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote to this Form 4.
- 3. The options to purchase 100,000 shares of common stock vest and become exercisable as to 25% of the shares of common stock subject to each such option on the first anniversary of the date of grant of May 15, 2012 and as to 4.6875% of such shares at the end of each successive three-month period thereafter, subject to Mr. Alt's continued employment through each vesting date.

## Remarks:

Steve W. Milton as attorney-infact for Alexander S. Alt

03/22/2016

\*\* 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.