FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washingto

Washington, D.C. 20549	OMB APPROVAL				
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	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).

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* Wilson Scott Albert						2. Issuer Name and Ticker or Trading Symbol Sabre Corp [SABR]									k all app Direc	licable) tor	ng Per	rson(s) to Is	vner
(Last)	Last) (First) (Middle) C/O SABRE CORPORATION				3. Date of Earliest Transaction (Month/Day/Year) 05/15/2024									X	below	Officer (give title below) Executive V		Other (s below) President	вресіту -
(Street)	LAKE T	KE TX 76092				4. If Amendment, Date of Original Filed (Month/Day/Year)									ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				on
(City)	(Si	tate) (Z	Zip)		$ _{\Box}$	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a satisfy the affirmative defense conditions of Rule 10b5-1(c). See Insti													
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired	, Dis	posed of	, or B	Benef	ficially	y Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execu	eemed ution Date, / th/Day/Year)				s Acquired (A) Of (D) (Instr. 3, 4			5. Amo Securit Benefic Owned Report	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	unt (A) (D)		rice	Transaction(s) (Instr. 3 and 4)				(IIISU. 4)	
Common Stock 05/15/					2024				A		236,593(1	(1) A \$		\$3.17	708,590			D	
Common Stock 05/15/					2024				F ⁽²⁾		21,049	Г) [\$3.17	17 687,541			D	
	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)	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)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			Amount of Securities		De Se (In	8. Price of Derivative Security (Instr. 5) Security (Instr. 5) Securities Beneficial Owned Following Reported Transactic (Instr. 4)		,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. The Reporting Person received a grant of restricted share units on the transaction date. The restricted share units award vests as follows: 33 1/3% on the first anniversary of the date of grant (5/15/25); 33 1/3% on the second anniversary of the date of grant (5/15/26), and 33 1/3% on the third anniversary of the date of grant (5/15/27), subject to the Reporting Person's continued employment with the Issuer through each vesting date.
- 2. This transaction represents the automatic surrender of shares to the Issuer upon vesting of restricted shares units to satisfy the Reporting Person's tax withholding obligations.

Remarks:

/s/ Steve Milton, as attorneyin-fact for Scott Albert Wilson

05/17/2024

** 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 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.