#### Edgar Filing: SKYWEST INC - Form 4

Check this box       if no longer         subject to       Statement OF CHANGES IN BENEFICIAL OWNERSHIP OF         Section 16.       Sector 16.									3235-0287 January 31, 2005 verage		
(Print or Type Responses)											
1. Name and ATKIN JE	Address of Reporting F RRY C	;	Symbol	Name and			ng	5. Relationship of I Issuer			
(Last)	(First) (N			Earliest T	-			(Check	all applicable	)	
(Month/I 444 RIVER ROAD 08/11/1				/Day/Year) /1997				_X_ Director 10% Owner _X_ Officer (give title Other (specify below) Chairman, President and CEO			
				endment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State) (	(Zip)	Tabl	e I - Non-I	Derivative	Secu	rities Acqu	iired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactic Code (Instr. 8)	4. Securi or(A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	08/11/1997			Code V S	Amount 1,000 (1)		Price \$ 17 (1)	(Instr. 3 and 4) 283,471 ( <u>1</u> )	D		
Common Stock	08/11/1997			S	4,000 (1)	D	\$ 17.125 (1)	279,471 <u>(1)</u>	D		
Common Stock	08/18/1997			S	5,000 (1)	D	\$ 17 <u>(1)</u>	274,471 <u>(1)</u>	D		
Common Stock	08/18/1997			G	1,000 (1)	D	\$ 0	273,471 <u>(1)</u>	D		
Common Stock								209,555 <u>(1)</u>	Ι	By spouse	

#### Edgar Filing: SKYWEST INC - Form 4

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

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 Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Title and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration D	ate	Amount of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securities	(Instr. 5)	Bene
	Derivative				Securities			(Instr. 3 and 4	l)	Owne
	Security				Acquired					Follo
					(A) or					Repo
					Disposed					Trans
					of (D)					(Instr
					(Instr. 3,					
					4, and 5)					
								<b>A</b> m any	. <del>.</del> .	
								Amou	n	
						Date	Expiration	Of Title Numb		
						Exercisable	Date	Title Number		
				Cada V	$(\mathbf{A})$ (D)			of Shores		
				Code V	(A) (D)			Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
ATKIN JERRY C 444 RIVER ROAD ST GEORGE, UT 84790	Х		Chairman, President and CEO					
Signatures								
/s/ Eric Christensen, Attorney-in-Fact		03/20/200	6					
**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) Numbers have not been adjusted to reflect (i) the 2-for-1 split that occurred on June 8, 1998 nor (ii) the 2-for-1 split that occurred on December 15, 2000.

#### **Remarks:**

This Form 4 is being re-submitted to the Commission because, although the Reporting Person's records indicate that the origin

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.