FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

	THE EXCHANGE C	•
Nachington	D.C. 20540	

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box if no longer subject to

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative

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

. ,	ee Instruc					10.1			and Time!	-	allia a d	Sb1			5 D :	-4:1:	f D "	D-	(-) 4!	
1. Name and Address of Reporting Person* TUCHMAN MARTIN					2. Issuer Name and Ticker or Trading Symbol FTAI Aviation Ltd. FTAI									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
TOCHWAN WARTIN													1		Director		10% Owner			
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 12/16/2024									Officer (give title Other (spec below) below)				specify			
415 WEST 13TH STREET 7TH FLOOR					If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)						4. 11 /	Amena	ment,	Date 0	Origina	riled	(Month/Da	y/ rear	'	Line)					
NEW YORK NY 10014														√	Form filed by One Reporting Person Form filed by More than One Reporting					
																Perso		ile lilali	One Repo	orung
(City)		(Sta	te) (2	Zip)																
			Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Disp	osed of	, or E	Benefi	icially	/ Own	ed			
[Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed		Disposed (ties Acquired (A) or I Of (D) (Instr. 3, 4 and			Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	(A) (D)		ice		ed ction(s) 3 and 4)			(Instr. 4)
Ordinary Shares				12/16/2024					A		648	Α \$		\$0 (1)	369,809			D		
Ordinary	Shares															27	7,991		I I	By Trust
Series B Preferred Shares															20	0,000		I	By Trust	
Series C Preferred Shares															80	0,000		I !	By Trust	
Series D	Series D Preferred Shares														40),000	I		By Trust	
			Tal									sed of, o				Owne	d			
Security or (Instr. 3) Pri	2. Convers or Exerc Price of Derivati Security	sion cise ve	3. Transaction Date (Month/Day/Year)	3A. Dee Execution if any (Month/	on Date,	4. Transa Code (8)				6. Date Exerci Expiration Dat (Month/Day/Ye		e Amo Secu Unde Deriv Secu		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y C F D o (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)
						Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amous or Number of Shares	er					

Explanation of Responses:

1. Shares were issued to director as compensation for services provided to the issuer in accordance with the issuer's Nonqualified Stock Option and Incentive Award Plan and the additional terms established by resolution of the Board of Directors. The applicable closing share price was \$135.08 on December 12, 2024.

Remarks:

/s/ BoHee Yoon, as Attorney-

12/16/2024

** 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.