Edgar Filing: HAWAIIAN HOLDINGS INC - Form 4

| HAWAIIAN Form 4 December 20 | 1 HOLDINGS I | NC | | | | | | | | | |
|---|--|-----------------------------|--|---|--|--|------------------|---|--|------------------------------|--|
| | | | | | | | | | OMB A | PPROVAL | |
| FORM | UNITE | Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | |
| Check th if no long subject to Section 1 Form 4 c Form 5 obligatio may com <i>See</i> Instr | ger 5 16. 5 5 5 5 5 5 5 5 5 5 5 5 5 | ursuant to a 7(a) of the | F CHANGES IN BENEFICIAL OW SECURITIES Section 16(a) of the Securities Exchang Public Utility Holding Company Act of of the Investment Company Act of 194 | | | | xchang Act of | NERSHIP OF See Act of 1934, of 1935 or Section | | irs per | |
| 1(b). | uction | () | | | - I · · · | | | | | | |
| (Print or Type] | Responses) | | | | | | | | | | |
| Falvey Barbara Sym | | | Symbol | 2. Issuer Name and Ticker or Trading Symbol HAWAIIAN HOLDINGS INC [HA] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | (First) | (Middle) | 3. Date of | Earliest Tra | ansaction | | | (Chec | k all applicable | e) | |
| | AIIAN HOLDIN KOAPAKA ST 50 | | (Month/D 12/16/20 | • | | | | Director X Officer (give below) SVP H | | 6 Owner er (specify es | |
| | (Street) | | 4. If Amendment, Date Original Filed(Month/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 | | | | | |
| HONOLUL | U, HI 96819. | | | | | | | Person | Aore than One Re | eporting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative S | Securi | ties Acc | uired, Disposed of | f or Beneficial | llv Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date 2A. Dee (Month/Day/Year) Execution any (Month/ | | med 3. | | 4. Securities Acquired stion(A) or Disposed of (D) 3) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of | |
| Common | | | | Code V | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | | |
| Common Stock | 12/16/2010 | | | М | 200 | А | \$ 3.45 | 200 | D | | |
| Common Stock | 12/16/2010 | | | S | 200 | D | \$ 8.2 | 0 | D | | |

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

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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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. Number on of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisab Expiration Date (Month/Day/Year | | 7. Title and A Underlying S (Instr. 3 and | |
|---|---|---|---|--|---|---|--------------------|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Option (right to buy) | \$ 3.45 | 12/16/2010 | | М | 200 | 08/29/2010 <u>(1)</u> | 08/29/2017 | Common Stock | 200 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---------------------------------------|---------------|-----------|-----------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| Falvey Barbara | | | | | | |
| C/O HAWAIIAN HOLDINGS, INC. | | | SVP Human | 1 | | |
| 3375 KOAPAKA STREET, SUITE G-350 | | | Resources | | | |
| HONOLULU, HI 96819 | | | | | | |
| Signatures | | | | | | |
| | | | | | | |

| /s/ Hoyt H. Zia, by power of | 12/20/2010 |
|------------------------------|------------|
| attorney | 12/20/2010 |

<u>**</u>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) The option is fully vested and exercisable.

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.