HAWAIIAN HOLDINGS INC

Form 4

February 09, 2016

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

Estimated average

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Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005

OMB APPROVAL

Section 16. Form 4 or Form 5 obligations may continue.

See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

response...

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1(b).

(City)

(State)

(Zip)

(Print or Type Responses)

| 1. Name and Address of Reporting Person * Okinaka Shannon Lei | | | 2. Issuer Name and Ticker or Trading Symbol HAWAIIAN HOLDINGS INC [HA] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|---|---------|----------|---|--|--|--|--|
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction | (energian applicable) | | | |
| C/O HAWAIIAN HOLDINGS, INC., 3375 KOAPAKA STREET, SUITE G-350 | | | (Month/Day/Year) 02/07/2016 | Director 10% Owner _X Officer (give title Other (specify below) EVP, CFO and Treasurer | | | |
| (Street) | | | 4. If Amendment, Date Original | 6. Individual or Joint/Group Filing(Check | | | |
| HONOLULU, HI 96819 | | | Filed(Month/Day/Year) | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |

| | | Table | : 1 - MOII-DO | ciivative 5 | ccurit | ies Acq | juii cu, Disposcu o | i, oi benenciai | ly Owned | |
|------------------------|--------------------------------------|------------------|------------------|-------------------------|-----------|---------|--|---------------------------|-----------------------|--|
| 1.Title of Security | 2. Transaction Date (Month/Day/Year) | | 3. Transactio | 4. Securition(A) or Dis | | • | 5. Amount of Securities | 6. Ownership Form: Direct | 7. Nature of Indirect | |
| (Instr. 3) | (| any | Code | (D) | | | Beneficially | (D) or | Beneficial | |
| | | (Month/Day/Year) | (Instr. 8) | (Instr. 3, 4 and 5) | | | Owned | Indirect (I) | Ownership (Instr. 4) | |
| | | | | | | | Following | (Instr. 4) | | |
| | | | | | (A) or | | Reported Transaction(s) (Instr. 2 and 4) | | | |
| | | | Code V | Amount | (D) | Price | (Instr. 3 and 4) | | | |
| Common Stock | 02/07/2016 | | A | 16,070 (1) | A | \$0 | 55,200 | D | | |
| Common Stock | 02/07/2016 | | F | 5,660 | D | \$0 | 49,540 | D | | |
| Common Stock | 02/07/2016 | | F | 944 | D | \$0 | 48,596 | D | | |

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

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)required to respond unless the form

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

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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 Derivative | 2. Conversion | 3. Transaction Date (Month/Day/Year) | | 4. Transactio | 5. orNumber | 6. Date Exerc Expiration Da | | 7. Titl | | 8. Price of Derivative | 9. Nu Deriv |
|------------------------|--|--------------------------------------|------------------|------------------|---|--------------------------------|--------------------|--|--|------------------------|---|
| Security (Instr. 3) | or Exercise Price of Derivative Security | (Month/Day/Teat) | (Month/Day/Year) | Code | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | (Month/Day/Year) | | Underlying Securities (Instr. 3 and 4) | | Security (Instr. 5) | Secur Bene Owne Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Okinaka Shannon Lei C/O HAWAIIAN HOLDINGS, INC. 3375 KOAPAKA STREET, SUITE G-350 HONOLULU, HI 96819

EVP, CFO and Treasurer

Signatures

/s/ Aaron J. Alter, by power of attorney

02/09/2016

**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) Represents shares of common stock issued upon the vesting of performance based RSUs granted on February 7, 2013.

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.

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