Edgar Filing: HAWAIIAN HOLDINGS INC - Form 4

| HAWAIIAN Form 4 June 06, 2016 | HOLDINGS IN | IC | | | | | | | | | |
|---|--|--------------------|---|--|-----------|--|---|--|--|--------------|--|
| FORM | 4 | | | | | | | | OMB AF | PROVAL | |
| Washington, D.C. 20549 | | | | | | | OMB Number: | 3235-0287 | | | |
| Section 16. | | | | | | | | Expires: | January 31, 2005 | | |
| | | | | GES IN BENEFICIAL OWNERSHIP OF SECURITIES | | | | | Estimated average burden hours per | | |
| Form 4 or Form 5 | | rsuant to S | Section 10 | 5(a) of the | - Securit | ies F | xchang | e Act of 1934, | response 0.5 | | |
| obligation may conti <i>See</i> Instru 1(b). | nue. Section 17 | (a) of the l | Public Ut | | ling Con | npany | y Act of | 1935 or Section | 1 | | |
| (Print or Type R | esponses) | | | | | | | | | | |
| Woerth Duane E. Symbol | | | | r Name and Ticker or Trading | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| | | | of Earliest Transaction | | | (Check all applicable) | | | | | |
| | | | | nth/Day/Year) | | | X_ Director10% Owner Officer (give titleOther (specify below) | | | | |
| | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | | | | | | |
| INDIAN RC BEACH, FL | | | | | | | | Form filed by M Person | | | |
| (City) | (State) | (Zip) | Table | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | y Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) |) Execution any | ned | 3. Transactio Code (Instr. 8) | 4. Securi | ties Ad spose 4 and (A) or | cquired d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of | |
| Common Stock | 06/02/2016 | | | М | 3,334 | A | \$ 14.96 | 12,455 | D | | |

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 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. Transactio Code (Instr. 8) | 5. Number out Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. H Der Sec (Ins |
|---|---|---|---|--|--|--|--------------------|---|--|----------------------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | |
| Stock Option (right to buy) | \$ 14.96 | 06/02/2016 | | М | 3,334 | <u>(1)</u> | 05/22/2024 | Common Stock | 3,334 | |

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Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--|---------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| Woerth Duane E. 1108 GULF BOULEVARD #207 INDIAN ROCKS BEACH, FL 33785 | Х | | | | | |
| Signatures | | | | | | |
| /s/ Aaron Alter, by power of attorney | 06/06/2016 | | | | | |
| <u>**</u> Signature of Reporting Person | Da | ate | | | | |

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 shares subject to the option vest at the rate of 33 1/3% per year following the date of grant (May 22, 2014).

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.