#### HAWAIIAN HOLDINGS INC

Form 4

October 28, 2014

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB APPROVAL** OMB

Number:

3235-0287

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Reporting Person(s) to

response...

if no longer subject to Section 16. Form 4 or Form 5 obligations

may continue.

See Instruction

Check this box

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Falvey Barbara			2. Issuer Name <b>and</b> Ticker or Trading Symbol HAWAIIAN HOLDINGS INC [HA]	5. Relationship of Issuer (Check	
(Last)	(First)	(Middle)	3. Date of Earliest Transaction	(Check	
			(Month/Day/Year)	Director	

10/24/2014

ck all applicable)

**SVP-Human Resources** 

Director 10% Owner X\_ Officer (give title Other (specify below)

C/O HAWAIIAN HOLDINGS, INC., 3375 KOAPAKA STREET, SUITE G-350

(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

HONOLULU, HI 96819

(City)	(State)	(Zip) Tak	ole I - Non-	Derivative	Secu	rities Acquii	red, Disposed of,	or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	•				(D)	5. Amount of Securities Ownership Beneficially Form: Owned Direct (D) Following or Indirect Reported (I) Transaction(s) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)	(Insur 1)	
Common Stock	10/24/2014		M	13,000	A	\$ 3.45	116,487	D	
Common Stock	10/24/2014		S	13,000	D	\$ 16.0585 (1)	103,487	D	
Common Stock	10/27/2014		M	5,000	A	\$ 3.45	108,487	D	
Common Stock	10/27/2014		S	5,000	D	\$ 16.35	103,487	D	

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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.

SEC 1474 (9-02)

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 of ciorDerivative 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)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 3.45	10/24/2014		M		13,000	(2)	08/29/2017	Common Stock	13,000
Employee Stock Option (right to buy)	\$ 3.45	10/27/2014		M		5,000	(2)	08/29/2017	Common Stock	5,000

# **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

Falvey Barbara C/O HAWAIIAN HOLDINGS, INC. 3375 KOAPAKA STREET, SUITE G-350 HONOLULU, HI 96819

**SVP-Human Resources** 

### **Signatures**

/s/ Hoyt Zia, by power of

attorney 10/28/2014

\*\*Signature of Reporting Person Date

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### **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).
  - The sale price reported in column 4 of Table I represents the weighted average sale price of the shares sold ranging from \$16.04 to \$16.09
- (1) per share. Upon request by the Commission staff, the Issuer, or a security holder of the Issuer, the Reporting Person will provide full information regarding the number of shares sold at each separate price.
- (2) Shares subject to the option are fully vested and immediately 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.