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HAWAIIA Form 4 February 22	N HOLDINGS IN 3, 2009	IC								
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FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								N OMB Number:	3235-0287	
Check this box if no longer STLATENCENTE OF CHANCES IN DENEELCIAL ONVICE								Expires:	January 31,	
subject Section Form 4	NGES IN SECUF	RITIES	Estimated burden hou response	urs per						
Form 5 obligati may co <i>See</i> Ins 1(b).	ions Section 17	(a) of the l	Public U	Jtility Hol	ding Cor		nge Act of 1934, of 1935 or Secti 940			
(Print or Type	e Responses)									
1. Name and Zia Hoyt	2. Issuer Name and Ticker or Trading Symbol HAWAIIAN HOLDINGS INC [HA				5. Relationship of Reporting Person(s) to Issuer					
(Last)	(First) (Middle)				L	(Cho	eck all applicabl	e)	
C/O HAW INC., 3375 SUITE G-	3. Date of Earliest Transaction(Month/Day/Year)02/20/2009				Director 10% Owner XOfficer (give title Other (specify below) below) Secretary*					
JUIL C	(Street)		4 If Δm	endment D	ate Origina	1	6. Individual or	Joint/Group Fili	ng(Check	
				d(Month/Day/Year) Applicable Li _X_ Form file			Applicable Line) _X_ Form filed by			
HONOLU	LU, HI 96819						Person	More than One K	eporung	
(City)	(State)	(Zip)	Tat	ole I - Non-I	Derivative	Securities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	Disposed	(A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount		(Instr. 3 and 4)			
Reminder: Re	eport on a separate line	e for each cl	ass of sec	urities benef	ficially ow	ned directly of	or indirectly.			
					Perso inform requir	ns who res nation cont red to respo ays a curre	spond to the colle ained in this forn ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)	
	Tab					posed of, or convertible s	Beneficially Owner securities)	d		
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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities

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Security (Instr. 3)	or Exercise Price of Derivative Security		any (Month/Day/Year)	Code (Instr. 8)	Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)		(Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Options	\$ 3.78 <u>(1)</u>	02/20/2009		А	40,000	(2)	02/20/2014	Common Stock	40,000
Deferred Stock Units	<u>(3)</u>	02/20/2009		А	17,500	(4)	(4)	Common Stock	17,500

Reporting Owners

Reporting Owner Name / Address		Relationships					
	Director	10% Owner	Officer	Other			
Zia Hoyt C/O HAWAIIAN HOLDINGS, INC 3375 KOAPAKA STREET, SUITE HONOLULU, HI 96819			Secretary*				
Signatures							
/s/ Hoyt Zia 02/20/2	009						

<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) In accordance with the Company's 2005 Stock Incentive Plan, the exercise price per share of the options is the closing price of the Common Stock on the NASDAQ Stock Market on the date of grant.
- (2) The options vest at the rate of 33 1/3% per year beginning on the first anniversary of the date of grant.
- (3) 1-for-1

The deferred stock units vest at the rate of 33 1/3% per year beginning on the first anniversary of the date of grant. The shares of

(4) Common Stock underlying such deferred stock units are distributable at any time within 90 days following the date on which such deferred stock units become fully vested.

Remarks:

*Mr. Zia is also the Senior Vice President, General Counsel and Secretary of Hawaiian Airlines, Inc., the issuer's wholly-owned

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.