## Edgar Filing: HAWAIIAN HOLDINGS INC - Form 5

HAWAIIAN HOLDINGS INC Form 5 January 26, 2017 FORM 5 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 Check this box if no longer subject to Section 16. ANNUAL STATEMENT OF CHANGES IN BENEFICIAL Form 4 or Form 5 obligations **OWNERSHIP OF SECURITIES** may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 1(b). Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported 30(h) of the Investment Company Act of 1940 Form 4 Transactions Reported 1. Name and Address of Reporting Person <sup>\*</sup> 2. Issuer Name and Ticker or Trading Jenson Randall Symbol HAWAIIAN HOLDINGS INC [HA] 3. Statement for Issuer's Fiscal Year Ended (Last) (First) (Middle) (Month/Day/Year) 12/31/2016 C/O HAWAIIAN HOLDINGS, INC., 3375 KOAPAKA STREET, SUITE G-350 (Street) 4. If Amendment, Date Original Filed(Month/Day/Year) HONOLULU, HIÂ 96819

\_X\_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person

6. Individual or Joint/Group Reporting

(check applicable line)

5. Relationship of Reporting Person(s) to

(Check all applicable)

below)

10% Owner \_\_\_Other (specify

Issuer

below)

\_\_X\_\_ Director

\_Officer (give title

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Estimated average

burden hours per

| (City)                               | (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |   |   |   |                            |  |   |  |  |
|--------------------------------------|--|---|---|---|----------------------------|--|---|--|--|
| 1.Title of<br>Security<br>(Instr. 3) | 2. Transaction Date<br>(Month/Day/Year)  | 2A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 3.<br>Transaction<br>Code<br>(Instr. 8) | 4. Securities Acquired<br>(A) or Disposed of<br>(D)<br>(Instr. 3, 4 and 5)<br>(A) | Securities                 | 6. Ownership<br>Form: Direct<br>(D) or<br>Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |
| Common<br>Stock                      | 12/29/2016   | Â   | G                                       | (A)<br>or<br>Amount (D) Price<br>10,000 D \$ 0                                    | (Instr. 3 and 4)<br>35,466 | D  | Â   |  |  |

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

Persons who respond to the collection of information **SEC 2270** contained in this form are not required to respond unless (9-02)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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transaction<br>Code<br>(Instr. 8) | 5.<br>Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) | (Month/Day/Year)<br>ive<br>ies<br>ed<br>ed |                    | 7. Titl<br>Amou<br>Under<br>Secur<br>(Instr. | int of<br>rlying                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9.<br>Of<br>B<br>O<br>E<br>I<br>S<br>F<br>i<br>(I |
|---|---|---|---|---|---|--|--------------------|--|--|---|---|
|   |   |   |   |   | (A) (D)   | Date<br>Exercisable                        | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares |   |   |

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## **Reporting Owners**

| <b>Reporting Owner Name / Address</b>   | Relationships |          |           |         |       |  |
|---|---------------|----------|-----------|---------|-------|--|
|   |               | Director | 10% Owner | Officer | Other |  |
| Jenson Randall<br>C/O HAWAIIAN HOLDINGS, INC.<br>3375 KOAPAKA STREET, SUITE G-3<br>HONOLULU, HI 96819 | 50            | ÂX       | Â         | Â       | Â     |  |
| Signatures  |               |          |           |         |       |  |
| /s/ Aaron Alter, by power of attorney   |               | 25/2017  |           |         |       |  |
| **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).

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.