HAWAIIAN HOLDINGS INC

Form 5

February 10, 2017

FORM	15							OMB AF	PROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMI							MMISSION	OMB Number:	3235-0362		
Check this no longer	IENT OF CHANGES IN BENEFICIAL ERSHIP OF SECURITIES 16(a) of the Securities Exchange Act of 1934,					Expires:	January 31,				
to Section 16. Form 4 or Form 5 obligations may continue. See Instruction ANNUAL STATEM OWNE					Act of 1934,	Estimated a burden hour response					
Form 3 H Reported Form 4 Transaction Reported	oldings Section 17(a	a) of the Public U 30(h) of the In		_	-			1			
Falvey Barbara Symbol			Name and Ticker or Trading AIIAN HOLDINGS INC [HA]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (N						(Checl	k all applicable	able)		
			rement for Issuer's Fiscal Year Ended h/Day/Year) 1/2016			-	Director 10% OwnerX_ Officer (give title Other (specify below)				
	AIIAN HOLDING 5 KOAPAKA ST 50					U		uman Resource	es		
	nendment, Date Original Ionth/Day/Year)			6	6. Individual or Joint/Group Reporting (check applicable line)						
HONOLUL	.U, HI 96819					_	X_ Form Filed by (Form Filed by Merson	One Reporting Pe			
(City)	(State)	(Zip) Tab	le I - Non-Der	ivative Sec	curiti	es Acqui	red, Disposed of	or Beneficial	v Owned		
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed 3. 4. Securities Acquired (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Instr. 8) (A) or Disposed of (Instr. 3, 4 and 5) (A) or Amount (D) P		equired d of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect					
Common Stock	02/22/2016	Â	S4	5,000	D	\$ 41.25	51,117	D	Â		
	oort on a separate line ficially owned directly		contained i	in this for	m ar	e not re	lection of information of the control of the contro	ond unless	SEC 2270 (9-02)		

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1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Title	e and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration Da	ate	Amou	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ties	(Instr. 5)
	Derivative				Securities			(Instr.	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									A mannt	
									Amount	
						Date	Expiration		or	
						Exercisable	Date		Number of	
					(A) (D)					
					(A) (D)				Shares	

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Falvey Barbara						
C/O HAWAIIAN HOLDINGS, INC.	â	â	SVP-Human Resources	â		
3375 KOAPAKA STREET, SUITE G-350	А	A	A SVF-Human Resources	A		
HONOLULU. HI 96819						

Signatures

/s/ Aaron Alter, by power of attorney

**Signature of Reporting Person Date

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.

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