Edgar Filing: HAWAIIAN HOLDINGS INC - Form 4

HAWAIIAN Form 4 February 23,	HOLDINGS IN	C								
	_							OMB A	PPROVAL	
FORM	I 4 UNITED	STATES		RITIES A ashington			E COMMISSIO		3235-0287	
Check the								Expires:	January 31,	
if no long subject to Section 1 Form 4 o	6. r			SECU	WNERSHIP OF	Estimated burden hou response	urs per			
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17((a) of the	Public U	Jtility Hol	ding Cor		inge Act of 1934, t of 1935 or Secti 1940			
(Print or Type F	Responses)									
	ddress of Reporting	Person <u>*</u>	Symbol	er Name and		-	5. Relationship o Issuer	of Reporting Per	rson(s) to	
			HAWA	AIIAN HC	DLDING	S INC [HA	A] (Che	eck all applicabl	e)	
(Last) C/O HAWA	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/20/2009				Director 10% Owner X Officer (give title Other (specify				
	KOAPAKA STR		02/20/2	2009			below) Senior V	below) P-Sales and Ma	rketing	
				4. If Amendment, Date Original Filed(Month/Day/Year)			6. Individual or Joint/Group Filing(Check Applicable Line)			
HONOLUL	U, HI 96819						_X_ Form filed by Form filed by Person	One Reporting P More than One R		
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
	2. Transaction Date (Month/Day/Year)		Date, if	3. Transactio Code (Instr. 8)	4. Securit nAcquired Disposed (Instr. 3, 4	(A) or 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 Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(D) Price				
Reminder: Rep	ort on a separate line	e for each cl	ass of sec	eurities benef	Perso inform requir	ns who re nation con red to resp ays a curre	or indirectly. spond to the colle tained in this form ond unless the fo ently valid OMB co	n are not rm	SEC 1474 (9-02)	
	Tab					posed of, or convertible	· Beneficially Owned securities)	d		

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	ionDerivative	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			
TANIGUCHI GLENN G C/O HAWAIIAN HOLDINGS, INC. 3375 KOAPAKA STREET, SUITE G-350 HONOLULU, HI 96819			Senior VP-Sales and Marketing				
Signatures							

/s/ Glenn G. Taniguchi <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.

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.