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Hawaiian Airlines, Inc. Political Action Committee
Hawaiian Airlines, Inc.
3375 Koapaka Street, Suite G350
Honolulu, Hawaii 96819-1804

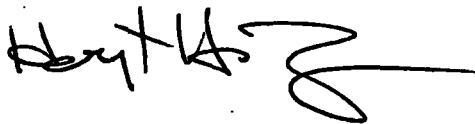
January 27, 2010

Federal Election Commission
999 E Street, NW
Washington, DC 20463

To Whom It May Concern:

Hawaiian Airlines, Inc. Political Action Committee, FEC Committee ID C00456939, hereby notifies the Commission of its intent to change its filing frequency from quarterly to monthly, pursuant to Section 104.5(c) of the Commission's Rules and concurrent with filing its 2009 Year-End Form 3X report.

Regards,



Hoyt H. Zia
Treasurer

100300230888

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

Hawaiian Airlines, Inc. Political Action Committee

Hawaiian Airlines, Inc.

ADDRESS (number and street) 3375 Koapaka Street

Check if different than previously reported. (ACC) Suite G350

Honolulu HI 96819 - 1804

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C 00456939

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11)
<small>(Non-Election Year Only)</small> |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12)
<small>(Non-Election Year Only)</small> |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |


- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |
- Election on MM / DD / YYYY in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|
- Election on MM / DD / YYYY in the State of

5. Covering Period 07 / 01 / 2009 through 12 / 31 / 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Hoyt H. Zia

Signature of Treasurer  Date 01 / 27 / 2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only						
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FEC FORM 3X
Rev. 12/2004

100300230889

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Hawaiian Airlines, Inc. Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2009"/>		487 00
(b) Cash on Hand at Beginning of Reporting Period.....	3737 00	
(c) Total Receipts (from Line 19)	1750 00	5500 00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5487 00	5987 00
7. Total Disbursements (from Line 31)	5400 00	5900 00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	87 00	87 00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0 00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0 00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

10030230890

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Hawaiian Airlines, Inc. Political Action Committee

Report Covering the Period: From:

07 / 01 / 2009

To:

12 / 31 / 2009

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

1750 00

5500 00

(ii) Unitemized

0 00

0 00

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

1750 00

5500 00

(b) Political Party Committees

0 00

0 00

(c) Other Political Committees (such as PACs).....

0 00

0 00

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

1750 00

5500 00

12. Transfers From Affiliated/Other Party Committees.....

0 00

0 00

13. All Loans Received.....

0 00

0 00

14. Loan Repayments Received.....

0 00

0 00

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0 00

0 00

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0 00

0 00

17. Other Federal Receipts (Dividends, Interest, etc.).....

0 00

0 00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0 00

0 00

(b) Levin Funds (from Schedule H5).....

0 00

0 00

(c) Total Transfers (add 18(a) and 18(b))..

0 00

0 00

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

1750 00

5500 00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

1750 00

5500 00

100300230891

**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0 00	0 00
(ii) Non-Federal Share.....	0 00	0 00
(b) Other Federal Operating Expenditures	0 00	0 00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0 00	0 00
22. Transfers to Affiliated/Other Party Committees.....	0 00	0 00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5400 00	5900 00
24. Independent Expenditures (use Schedule E)	0 00	0 00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0 00	0 00
26. Loan Repayments Made.....	0 00	0 00
27. Loans Made.....	0 00	0 00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0 00	0 00
(b) Political Party Committees	0 00	0 00
(c) Other Political Committees (such as PACs).....	0 00	0 00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0 00	0 00
29. Other Disbursements	0 00	0 00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0 00	0 00
(ii) "Levin" Share.....	0 00	0 00
(b) Federal Election Activity Paid Entirely With Federal Funds	0 00	0 00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0 00	0 00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5400 00	5900 00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5400 00	5900 00

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**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1750 00	5500 00
34. Total Contribution Refunds (from Line 28(d))	0 00	0 00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1750 00	5500 00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0 00	0 00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0 00	0 00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0 00	0 00

100300230893

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 OF 8	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Hawaiian Airlines, Inc. Political Action Committee

Full Name (Last, First, Middle Initial) A. Ingram, Peter R.		Date of Receipt 07 / 10 / 2009
Mailing Address 3375 Koapaka Street, Suite G350		Amount of Each Receipt this Period 1000 00
City Honolulu,	State Zip Code HI 96819	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Hawaiian Airlines, Inc. EVP, CFO and Treasurer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000 00	

Full Name (Last, First, Middle Initial) B. Zia, Hoyt H.		Date of Receipt 12 / 14 / 2009
Mailing Address 3375 Koapaka Street, Suite G350		Amount of Each Receipt this Period 250 00
City Honolulu,	State Zip Code HI 96819	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Hawaiian Airlines, Inc. SVP, General Counsel and Corp. Secretary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750 00	

Full Name (Last, First, Middle Initial) C. Hoffman, Alan L.		Date of Receipt 12 / 14 / 2009
Mailing Address 3375 Koapaka Street, Suite G350		Amount of Each Receipt this Period 500 00
City Honolulu,	State Zip Code HI 96819	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Hawaiian Airlines, Inc. SVP, Corporate Comm. and Public Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500 00	

SUBTOTAL of Receipts This Page (optional).....▶	1750 00
TOTAL This Period (last page this line number only).....▶	1750 00

100300230894

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 7 OF 8				
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Hawaiian Airlines, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Daniel K. Inouye for U.S. Senate

Date of Disbursement
07 / 20 / 2009

Mailing Address
P. O. Box 1196

City Honolulu, State HI Zip Code 96807

Purpose of Disbursement
Contribution

Candidate Name
Daniel K. Inouye

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: HI District: 00

Amount of Each Disbursement this Period
2400 00

Category/Type
0 1 1

B.

Full Name (Last, First, Middle Initial)
Dan 10

Date of Disbursement
10 / 08 / 2009

Mailing Address
1088 Bishop Street, Suite 1009

City Honolulu, State HI Zip Code 96813

Purpose of Disbursement
Contribution

Candidate Name
Daniel K. Inouye

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: HI District: 00

Amount of Each Disbursement this Period
500 00

Category/Type
0 1 1

C.

Full Name (Last, First, Middle Initial)
Friends for Harry Reid

Date of Disbursement
10 / 22 / 2009

Mailing Address
426 C Street, NE, Rear Bldg.

City Washington, State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name
Harry Reid

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: NV District: 00

Amount of Each Disbursement this Period
1000 00

Category/Type
0 1 1

SUBTOTAL of Disbursements This Page (optional).....▶ 3900 00

TOTAL This Period (last page this line number only).....▶

10030230895

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 8

21b 22 23 24 25 26
 27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

Hawaiian Airlines, Inc. Political Action Committee

Full Name (Last, First, Middle Initial)

<p>A. Friends of Mazie Hirono</p>		<p>Date of Disbursement</p> <p>MM / DD / YYYY 11 / 30 / 2009</p>	
<p>Mailing Address P.O. Box 677</p>			
<p>City Honolulu</p>	<p>State HI</p>	<p>Zip Code 96813</p>	
<p>Purpose of Disbursement Contribution</p>		<p>Amount of Each Disbursement this Period</p> <p>250 00</p>	
<p>Candidate Name Mazie Hirono</p>		<p>Category/Type 0 1 1</p>	
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: HI District: 02</p>			

<p>B. Colleen for Congress</p>		<p>Date of Disbursement</p> <p>MM / DD / YYYY 12 / 14 / 2009</p>	
<p>Mailing Address P.O. Box 1416</p>			
<p>City Honolulu,</p>	<p>State HI</p>	<p>Zip Code 96816</p>	
<p>Purpose of Disbursement Contribution</p>		<p>Amount of Each Disbursement this Period</p> <p>1000 00</p>	
<p>Candidate Name Colleen Hanabusa</p>		<p>Category/Type 0 1 1</p>	
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: HI District: 01</p>			

<p>C. Case for Congress</p>		<p>Date of Disbursement</p> <p>MM / DD / YYYY 12 / 30 / 2009</p>	
<p>Mailing Address P.O. Box 1171</p>			
<p>City Honolulu,</p>	<p>State HI</p>	<p>Zip Code 96807</p>	
<p>Purpose of Disbursement Contribution</p>		<p>Amount of Each Disbursement this Period</p> <p>250 00</p>	
<p>Candidate Name Edward Case</p>		<p>Category/Type 0 1 1</p>	
<p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		
<p>State: HI District: 01</p>			

SUBTOTAL of Disbursements This Page (optional).....

1500 00

TOTAL This Period (last page this line number only).....

5400 00

100300230896

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed. Exp.</i>	Shipping Date <i>1/26/10</i>
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

JWA
 PREPARER

1/28/10
 DATE PREPARED

100300230897