FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGE</b>	S IN BENEF	ICIAL OWNE	RSHIP

UNIB APPI	ROVAL						
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*  Carpacks Grace M.				2. Issuer Name and Ticker or Trading Symbol Matson, Inc. [ MATX ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Cerocke Grace M					industry, inc. [ man ]									17	Direct Office	tor er (give title		Owner (specify
(Last) (First) (Middle) 1411 SAND ISLAND PARKWAY				3. Date of Earliest Transaction (Month/Day/Year) 09/04/2024									Senior Vice President					
(Street) HONOLULU HI 96819				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person						
(City)	(Sta	ate) (Z	Zip)										Form filed by More than One Reporting Person					
		Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired	, Dis	posed of	, or B	Benefi	cially	Own	ed		
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)				Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)			red (A) o	4 and Securi Benefi Owned		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) o (D)	r Price	е		ted action(s) 3 and 4)		(Instr. 4)	
Common Stock 09/04/20				.024			S		2,096	D	\$13	34.23	13	2,180	D			
		Tal	ble II -								osed of, convertib				Owne	d		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)  3A. Deemed Execution Date, if any (Month/Day/Year)		Execution Date, if any		4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo	r osed ) r. 3, 4	Expiration De (Month/Day/		ite	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Der Sec (Ins	Price of ivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)
			Code	v	(A)	(D)	Date Exercis	eablo	Expiration Date	Title	Amoun or Numbe of Shares	or						

**Explanation of Responses:** 

/s/ Grace M. Cerocke

09/05/2024

\*\* Signature of Reporting Person Date

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

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).