FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## OMB APPROVAL OMB Number: 32350104 Estimated average burden hours per response: 0.5

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and Address of Reporting Person* Park Kuuhaku T	2. Date of E Requiring S (Month/Day 02/01/202	Statement //Year)	3. Issuer Name and Ticker or Trading Symbol Matson, Inc. [ MATX ]				
(Last) (First) (Middle) 1411 SAND ISLAND PARKWAY			4. Relationship of Reporting Issuer (Check all applicable)	10% Owner Other (specify below)		5. If Amendment, Date of Original Filed (Month/Day/Year)	
(Street) HONOLULU HI 96819	_		X Officer (give title below) Senior Vice Pr			6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person	
(City) (State) (Zip)							
Table I - Non-Derivative Securities Beneficially Owned							
1. Title of Security (Instr. 4)			. Amount of Securities Beneficially Owned (Instr. )	3. Own Form: I (D) or II (I) (Inst	Direct Ondirect	Nature of Indirect Beneficial vnership (Instr. 5)	
Common Stock			11,838(1)	D			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)							
1. Title of Derivative Security (Instr. 4)	2. Date Exerc Expiration D (Month/Day/	ate	3. Title and Amount of Sounderlying Derivative Sounders, 4)		4. Conversion		6. Nature of Indirect Beneficial Ownership (Instr.
	Date Exercisable	Expiration Date	Title	Amount or Security Number of Shares		or Indirect (I) (Instr. 5)	5)

## **Explanation of Responses:**

1. The reported number of shares of the Issuer's common stock includes 2,174 shares underlying restricted stock units that will be issued in one or more increments as those units vest over the Reported Person's period of continued employment with the Issuer.

/s/ Kuuhaku T. Park

02/09/2022

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  If the form is filed by more than one reporting person, see Instruction 5 (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 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.