FORM 4

Check this box if no longer subject

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
ON	IB Number:	3235-0287								
Est	Estimated average burden									
hou	urs per response:	0.5								

to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	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*  Wall Jenai S	2. Issuer Name <b>and</b> Ticker or Trading Symbol Matson, Inc. [ MATX ]	(

Name and Address of Reporting Person*  Wall Jenai S					2. Issuer Name <b>and</b> Ticker or Trading Symbol  Matson, Inc. [ MATX ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
vvall Je	<u> </u>				1			- ,					X Dire	ctor	1	0% Ov	vner		
(Last) (First) (Middle) 1411 SAND ISLAND PARKWAY				3. Date of Earliest Transaction (Month/Day/Year) 05/21/2021								Offic belo	er (give title w)		ther (s elow)	specify			
(Chart)					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) HONOL	.ULU HI		96819										X Forn	n filed by On	e Reporting	Perso	on		
HONOL	OLU HI	; 	70013											Form filed by More than One Reporting Person					
(City)	(St	ate)	(Zip)																
		Table	e I - Noi	า-Deriva	ative S	ecur	ities Acq	uired,	Dis	osed of	, or Bei	nefici	ally Owr	ed					
Date			2. Transa Date (Month/Da		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			nd Securi Benef Owner	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	ect (	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Common Stock 05/21/.				2021			P		800	A	\$63	3.3	3,797	D					
		Та					ies Acqui varrants,							d		-			
1. Title of Derivative							6. Date Exercisable and Expiration Date			7. Title and Amount of		8. Price of Derivative	9. Number derivative		rship	11. Nature			

Date

Exercisable

(Month/Day/Year)

**Explanation of Responses:** 

or Exercise Price of Derivative

Security

Security (Instr. 3)

/s/ Jenai S. Wall

Title

Expiration

Date

Securities

Derivative

Underlying

Security (Instr. 3 and 4)

Amount Number

Shares

05/21/2021

\*\* Signature of Reporting Person

Security (Instr. 5)

Securities

Following Reported

Transaction(s) (Instr. 4)

Owned

Beneficially

Beneficial

Ownership (Instr. 4)

Form: Direct (D)

or Indirect (I) (Instr. 4)

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

if any (Month/Day/Year)

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

(Month/Dav/Year)

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

Code

Code (Instr.

8)

Derivative

Securities Acquired

(A) or Disposed

of (D) (Instr. 3, 4 and 5)

(A) (D)

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.