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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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*			2. Issuer Name and Ticker or Trading Symbol <u>Matson, Inc.</u> [MATX]								Relationshi eck all app	ip of Reporting Person(s) to Is plicable)		suer			
<u>Wall Jenai S</u>												X Direc	ctor		10% Ov	wner	
(Last) 1411 SA	(Fir ND ISLAN	rst) (1 ID PARKWAY	Viddle)		3. Date of Earliest Transaction (Month/Day/Year) 08/12/2021								Offic belov	er (give title v)		Other (below)	specify
(Street)				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
HONOL	ULU HI	. o	6819										X Form	n filed by On	e Reporti	ing Pers	on
														Form filed by More than One Re Person		One Rep	porting
(City)	(St	ate) (2	Zip)														
		Table	I - Non	n-Deriva	tive S	Secu	rities Acq	Juired	, Dis	posed of	, or Be	neficia	lly Own	ed			
1. Title of Security (Instr. 3) Date (Month/Day			y/Year) if any		eemed	3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		d (A) or	5. Am	ount of	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
		,		Date	-	Execu if any	ution Date,	Transa Code (Disposed O			Secur Benefi Owne	ties cially d Following	Form: D (D) or In	Direct ndirect r. 4)	of Indirect Beneficial Ownership
				Date	-	Execu if any	ution Date,	Transa Code (Disposed O			Securi Benefi Owner Repor Transa	ties cially d Following	Form: D (D) or In	Direct ndirect r. 4)	of Indirect Beneficial
Common	ı Stock			Date	//Year)	Execu if any	ution Date,	Transa Code (8)	Instr.	Disposed O 5)	f (D) (Inst	r. 3, 4 and	Securi Benefi Owner Repor Transa (Instr.	ties cially d Following ted action(s)	Form: D (D) or In	Direct ndirect r. 4)	of Indirect Beneficial Ownership
	ı Stock		ble II - I	Date (Month/Day 08/12/24 Derivati	//Year) 021 ve Se	Execu if any (Mont	ution Date, th/Day/Year) ties Acqu	Transa Code (8) Code P ired,	Instr. V Disp	Disposed O 5) Amount	f (D) (Inst (A) or (D) A or Ben	Price \$75.10 Priciall	Securi Benefi Owner Repor Transa (Instr. 58	ties cially d Following ted action(s) 3 and 4) 9,797	Form: D (D) or In (I) (Instr	Direct ndirect r. 4)	of Indirect Beneficial Ownership

						Disposed of (D) (Instr. 3, 4 and 5)				3 and 4)		Reported Transaction(s) (Instr. 4)	saction(s)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			
Evn	lanatio	n of Pesnons	061											 -

Explanation of Responses:

/s/ Jenai S. Wall

08/12/2021 Date

** Signature of Reporting Person

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

* 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).

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.