Hawaiian Telcom Holdco, Inc.

Form 4

November 21, 2014

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

OMB APPROVAL

OMB 3235-0287 Number:

January 31, Expires: 2005

Estimated average burden hours per response... 0.5

if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** Form 4 or Form 5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person * Twin Haven Capital Partners, L.L.C.			2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer			
			Hawaiian Telcom Holdco, Inc. [HCOM]	(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)	DirectorX 10% Owner Officer (give title Other (specify			
33 RIVERSIDE AVENUE, 3RD		JE, 3RD	11/19/2014	below) below)			
FLOOR,							
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
WESTPORT	T. CT 06880		Filed(Month/Day/Year)	Applicable Line) Form filed by One Reporting Person _X_ Form filed by More than One Reporting			
	•			Person			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities A	cauired, Disposed of, or Beneficially Owne			

Table I - Non-Derivative S	Securities Acquired.	Disposed of, or	Beneficially Owned
Table I Tion Delivative	securines ricquireu,	Disposed of, of	Denencially Owned

				, . ,		•
			ionor Disposed of (D)	Securities	6. Ownership	7. Nature of Indirect
	any (Month/Day/Year)	Code (Instr. 8)		Owned	Direct (D)	Beneficial Ownership (Instr. 4)
			(A) or	Reported Transaction(s) (Instr. 3 and 4)	(I) (Instr. 4)	(IIIsu: +)
		Code V	Amount (D) Pric	, (
						Coo
11/19/2014		P	4,781 A \$ 26.16	100,000	I	See footnotes (1) (2)
				1,457,000	I	See footnotes (2) (3)
	(Month/Day/Year)	any (Month/Day/Year)	(Month/Day/Year) Execution Date, if any Code (Month/Day/Year) (Instr. 8) Code V	(Month/Day/Year) Execution Date, if any Code (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8) (A) or Code V Amount (D) Price	(Month/Day/Year) Execution Date, if any (Month/Day/Year) (Code (Instr. 3, 4 and 5) (Instr. 8) Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) 11/19/2014 P 4,781 A \$ 100,000	(Month/Day/Year) Execution Date, if any (Month/Day/Year) (Instr. 8) Code (Instr. 3, 4 and 5) (Instr. 8) Beneficially (Month/Day/Year) Owned Direct (D) Following or Indirect (I) Transaction(s) (Instr. 3 and 4) (Instr. 3 and 4) 11/19/2014 P 4,781 A \$ 100,000 I

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

Edgar Filing: Hawaiian Telcom Holdco, Inc. - Form 4

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 control number.

SEC 1474 (9-02)

> 9. Nu Deriv Secu Bene Own Follo Repo Trans (Insti

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

 Title of 	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transact	ionNumber	Expiration D	ate	Amou	ınt of	Derivative	
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Secur	ities	(Instr. 5)	i
	Derivative				Securities			(Instr.	3 and 4)		
	Security				Acquired			`			1
	,				(A) or						1
					Disposed						,
					of (D)						
					(Instr. 3,						
					4, and 5)						
					.,						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships					
Reporting Owner Funite / Funitess	Director	10% Owner	Officer	Other			
Twin Haven Capital Partners, L.L.C. 33 RIVERSIDE AVENUE, 3RD FLOOR WESTPORT, CT 06880		X					
Twin Haven Special Opportunities Fund IV, L.P. C/O TWIN HAVEN CAPITAL PARTNERS, L.L.C. 33 RIVERSIDE AVE., 3RD FLOOR WESTPORT, CT 06880		X					
Twin Haven Special Opportunities Partners IV, LLC C/O TWIN HAVEN CAPITAL PARTNERS, L.L.C. 33 RIVERSIDE AVENUE, 3RD FLOOR WESTPORT, CT 06880		X					
Mellinger Paul C/O TWIN HAVEN CAPITAL PARTNERS, L.L.C. 33 RIVERSIDE AVENUE, 3RD FLOOR WESTPORT, CT 06880		X					
Webster Robert C/O TWIN HAVEN CAPITAL PARTNERS, L.L.C. 33 RIVERSIDE AVENUE, 3RD FLOOR WESTPORT, CT 06880		X					

2 Reporting Owners

Signatures

TWIN HAVEN CAPITAL PARTNERS, L.L.C.; By: /s/ Paul Mellinger, Managing Member

11/21/2014

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) See Exhibit 99.1; Note 1.
- (2) See Exhibit 99.1: Note 2.
- (3) See Exhibit 99.1; Note 3.

Remarks:

Exhibit List:

Exhibit 99.1 - Explanation of Responses

Exhibit 99.2 - Joint Filers' Names and Addresses

Exhibit 99.3 - Joint Filers' Signatures

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Signatures 3