BANK OF HAWAII CORP

Form 4

March 31, 2015

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

5 D L (* L* CD (* D () (

January 31, 2005

0.5

Estimated average burden hours per

OMB APPROVAL

response...

Section 16. Form 4 or Form 5 obligations may continue.

See Instruction

Check this box

if no longer

subject to

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1 Name and Address of Departing D

| TAKAKI DONALD M Symb | | | | | | | 5. Relationship of Reporting Person(s) to Issuer | | |
|----------------------|---------------------|--------------------------------|-------------------------|---------------------------|-----------|---|--|---------------------|------------------------|
| | | BANK OF HAWAII CORP [BOH] | | | | (Check all applicable) | | | |
| (Last) | (First) (1 | | f Earliest Ti | ransaction | | | X Director | 100% | Owner |
| P.O. BOX 2 | • | (Month/Day/Year) 03/30/2015 | | | | Officer (give below) | | er (specify | |
| | | | nendment, Date Original | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| | | | Filed(Month/Day/Year) | | | | | | |
| HONOLUL | LU, HI 96846 | | | | | | | More than One Re | |
| (City) | (State) | (Zip) Tab | le I - Non-I | Derivative | Secur | rities Acq | uired, Disposed o | f, or Beneficial | ly Owned |
| 1.Title of | 2. Transaction Date | | 3. | 4. Securi | | • | 5. Amount of | 6. Ownership | |
| Security (Instr. 3) | (Month/Day/Year) | Execution Date, if any | Transaction Code | on(A) or D: (Instr. 3, | | ` ′ | Securities Beneficially | Form: Direct (D) or | Indirect Beneficial |
| (IIIsti. 3) | | (Month/Day/Year) | (Instr. 8) | (msu. 3, | 4 and | 3) | Owned | Indirect (I) | Ownership |
| | | • | ` , | | | | Following | (Instr. 4) | (Instr. 4) |
| | | | | | (A) | | Reported Transaction(s) | | |
| | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | |
| Common Stock | 03/30/2015 | | M | 2,057 | A | \$ 47.35 | 49,863 | D | |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

Edgar Filing: BANK OF HAWAII CORP - Form 4

| 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) | 4. Transactic Code (Instr. 8) | 5. Number on f Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---|--|---|-------|--|--------------------|---|--|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| Director Stock Option | \$ 47.35 | 03/30/2015 | | M | | 2,057 | 04/29/2006 | 04/29/2015 | Common Stock | 2,057 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|---------------|--|--|--|--|
| Troporting O William Community | Director | 10% Owner | Officer Other | | | | |
| TAKAKI DONALD M P.O. BOX 2900 HONOLULU, HI 96846 | X | | | | | | |

Signatures

DONALD
TAKAKI

**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).

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.

Reporting Owners 2