Edgar Filing: TAKAKI DONALD M - Form 4

| Form 4 | | | | | | | | | | | |
|---|------------------------|--|--|---|-------|---|--------------|---|---|--|--|
| FORM | 4 UNITED | 2 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | | |
| Check this if no longe subject to Section 16 Form 4 or Form 5 obligations may contin <i>See</i> Instruct 1(b). | Filed pu Section 17 | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 | | | | | | | | Expires: January 31 2005 Estimated average burden hours per response 0.5 | |
| (Print or Type Re | esponses) | | | | | | | | | | |
| | | | 2. Issuer Name and Ticker or Trading Symbol BANK OF HAWAII CORP [BOH] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| P.O. BOX 2900 (Month/D 04/27/2 (Street) 4. If Ame | | | 3. Date of Earliest Transaction (Month/Day/Year) 04/27/2012 | | | | | X_ Director 10% Owner Officer (give title Other (specify below) below) | | | |
| | | | | Amendment, Date Original Month/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | |
| (City) | (State) | (Zip) | | | • • • | | | Person | | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da | . Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year) | | e I - Non-Derivative Securities Acc 3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (A) or Code V Amount (D) Price | | | r) 5) | quired, Disposed o 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | f, or Beneficia 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | • | |
| Common Stock | 04/27/2012 | | | А | 1,063 | А | \$0 | 24,425 | D | | |

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

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of Derivative | 2. Conversion | 3. Transaction Date (Month/Day/Year) | | 4. Transact | 5. iorNum | ber | 6. Date Exerce Expiration D | | 7. Titl Amou | | 8. Price of Derivative | 9. Nu Deriv |
|---------------------------|---|---|-------------------------|--------------------|--|-----|--------------------------------|--------------------|-----------------|---|---------------------------|----------------|
| Security (Instr. 3) | or Exercise Price of Derivative Security | | any (Month/Day/Year) | Code (Instr. 8) | of Deriv Secu Acqu (A) o Dispo of (D (Instr | * | | | Under Securi | Underlying Securi Securities (Instr. (Instr. 3 and 4) | | 2 |
| | | | | Code N | / (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Addre | ess | Relationships | | | | | | | |
|--|------------|---------------|---------------|--|--|--|--|--|--|
| Fo8 o | Director | 10% Owner | Officer Other | | | | | | |
| TAKAKI DONALD M P.O. BOX 2900 HONOLULU, HI 96846 | Х | | | | | | | | |
| Signatures | | | | | | | | | |
| DONALD TAKAKI | 12/06/2012 | | | | | | | | |
| <u>**</u> 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.