SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Hulst Michelle			. Date of Event Requiring Staten Month/Day/Year 17/19/2019	nent	3. Issuer Name and Ticker or Trading Symbol BANK OF HAWAII CORP [BOH]						
(Last) 130 MERCHA (Street) HONOLULU (City)		(Middle) 96813 (Zip)				tionship of Reporting Perso all applicable) Director Officer (give title below)	n(s) to Issue 10% Owne Other (spe below)	er	(Month/Day/Y 6. Individual o Applicable Lin X Form	ear) r Joint ie) filed b filed b	ate of Original Filed I/Group Filing (Check y One Reporting Person y More than One erson
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4) or Indirect ((Instr. 5)		t (D) (Instr. 5)				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)			2. Date Exercisable and Expiration Date (Month/Day/Year)		d 3. Title and Amount of Securi Underlying Derivative Securi			4. Convers or Exerc	ise Form:	Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Price of Derivativ Security		ect	

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Terry Sasamura for HULST

MICHELLE by Power of

07/23/2019

<u>Attorney</u>

** Signature of Reporting Person Date

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 5 (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.