FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

- 1								
	OMB APPROVAL							
	OMB Number: 3235-0							
	Estimated average burden							
	hours per response:	0.5						

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*  Tokioka Dana M  2. Date of Event Requiring Statement (Month/Day/Year) 02/21/2020				nent	3. Issuer Name <b>and</b> Ticker or Trading Symbol BANK OF HAWAII CORP [ BOH ]							
(Last) 130 MERCHA (Street) HONOLULU	Н	(Middle) 96813				tionship of Reporting Perso all applicable) Director Officer (give title below)	on(s) to Issue 10% Owne Other (spe below)	er	(Mon	nth/Day/Year) dividual or Joint icable Line) Form filed b	Ate of Original Filed  //Group Filing (Check  y One Reporting Person  y More than One erson	
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						int of Securities ally Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock						300	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)  2. Date Exercisable a Expiration Date (Month/Day/Year)			ate	3. Title and Amount of Secur Underlying Derivative Secur		ity (Instr. 4) Conve		rcise	5. Ownership Form:	(Instr. 5)		
			Date Exercisable	Expiration Date	n Title	,	Amount or Number of Shares	Price of Deriva	tive	Direct (D) or Indirect (I) (Instr. 5)		

**Explanation of Responses:** 

Remarks:

/s/ Terry Sasamura for TOKIOKA DANA M by Power of Attorney

02/25/2020

\*\* 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.