FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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* FLYGAR BRENT T						2. Issuer Name and Ticker or Trading Symbol BANK OF HAWAII CORP [BOH]										eck all app Direc Office	tor er (give title		10% Ov Other (s	/ner
(Last) (First) (Middle) 130 MERCHANT STREET						3. Date of Earliest Transaction (Month/Day/Year) 08/01/2019										below	Sr VP &	Con	below) troller	
(Street) HONOLULU HI 96813					- 4. II	4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S		(Zip)																	
		Tab	le I - Nor	n-Deriv	ative	Se	curiti	es A	cqı	uired,	Disp	osed	of, or E	Bene	ficiall	y Owne	d			
1. Title of Security (Instr. 3) 2. Trans Date (Month/					ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		<i>'</i>	Transaction Di Code (Instr. 5)		Dispose	ecurities Acquired (A) or oosed Of (D) (Instr. 3, 4 a			5. Amount of Securities Beneficially Owned Followin		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										Code	v	Amount	(A (D	or	Price	Transa	Transaction(s) (Instr. 3 and 4)			Instr. 4)
Common Stock 08/01/						2019				D		1,31	1	D	\$0.00	2	2,870		D	
Common Stock																	162		I	By 401(k) olan
		Т	able II -									sed of onverti				Owned		,	,	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		Transaction Code (Instr.		vative urities uired or osed)) r. 3, 4	Ex	Date Exe piration I onth/Day	Date	Amount		of es ing ve Se	curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Da: Ex	ite ercisable		piration te	Title	or Nu of	ımber					
Employee Stock Option (right to	\$47.72								02	2/28/2013	01	/20/2022	Commo Stock	n (833		833		D	

Explanation of Responses:

Remarks:

Reporting person ceased to be an officer as of August 1, 2019.

/s/ Sharlene Bliss for FLYGAR

08/07/2019 BRENT T by Power of

Date

<u>Attorney</u>

** Signature of Reporting Person

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 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.

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.