FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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

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 | ess of Reporting Pers | | 2. Issuer Name and Ticker or Trading Symbol BANK OF HAWAII CORP [BOH] | | tionship of Reporting Per all applicable) Director | erson(s) to Issuer | | |
|--------------------------------|--|----------------|--|------------------------|--|-----------------------|--|--|
| (Last) P.O. BOX 2900 | (Last) (First) (Middle) P.O. BOX 2900 | | 3. Date of Earliest Transaction (Month/Day/Year) 01/27/2006 | x | Officer (give title below) Vice Chairm | Other (specify below) | | |
| (Street) HONOLULU (City) | HI (State) | 96846 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indir Line) X | , | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction | | 4. Securities Disposed Of and 5) | | | 5. Amount of Securities Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|-------------|---|--|---------------|---------|--|--|---|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | (1150.4) | (Instr. 4) |
| Common Stock | 01/27/2006 | | М | | 3,400 | A | \$18.8 | 23,933 | D | |
| Common Stock | 01/27/2006 | | S | | 3,300 | D | \$52.5 | 20,633 | D | |
| Common Stock | 01/27/2006 | | S | | 100 | D | \$52.58 | 20,533 | D | |
| Common Stock | 01/30/2006 | | М | | 16,600 | Α | \$18.8 | 37,133 | D | |
| Common Stock | 01/30/2006 | | S | | 16,500 | D | \$52.5 | 20,633 | D | |
| Common Stock | 01/30/2006 | | S | | 100 | D | \$52.58 | 20,533 | D | |

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

| (e.g., puis, cails, warrants, options, convertible securities) | | | | | | | | | | | | | | | |
|--|---|--|---|---|---|-----|---|---|--------------------|---|--|--|--|---|--|
| 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) | Transaction of Code (Instr. Derivative | | | ivative urities urited or posed D) tr. 3, 4 | 6. Date Exer Expiration E (Month/Day/ | ate | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Employee Stock Option(Right to buy) | \$18.8 | 01/27/2006 | | М | | | 3,400 | 03/22/2002 | 03/21/2011 | Common Stock | 3,400 | \$0.00 | 165,600 | D | |
| Employee Stock Option(Right to buy) | \$18.8 | 01/30/2006 | | М | | | 16,600 | 03/22/2002 | 03/21/2011 | Common Stock | 16,600 | \$0.00 | 149,000 | D | |

Explanation of Responses:

NEAL HOCKLANDER

** Signature of Reporting Person Date

01/31/2006

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.