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. Name and Address of Reporting Person* TANABE BARBARA J | | | | | 2. Issuer Name and Ticker or Trading Symbol BANK OF HAWAII CORP [BOH] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | |
|--|--|--|---|---------------------------------|--|------|--|---|----------------|---|--|---|---|--|--|---|--|
| (Last) | , | , | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 09/15/2005 | | | | | | | | cer (give title | Other | Other (specify below) | | |
| 3625 WOODLAWN TERRACE PLACE | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) | ULU H | I 9 | 96822 | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (S | tate) (| Zip) | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day) | | | | | Execution Date, | | | , Transaction Dispos Code (Instr. and 5) | | | curities Acquired (A osed Of (D) (Instr. 3, i) | | 4 Secu Bend Own | rities F ficially (ed I | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | Code | v | Amou | unt (A) or (D) | | Repo | orted saction(s) r. 3 and 4) | (msu. 4) | (msu. 4) | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, 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) | 4. Transac Code (In 8) | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 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 (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code | v | (A) | (D) | Date Exercisable | | iration e | Title | Amoun or Numbe of Shares | | | | | |
| Direc. Deferred Comp Plan - BOHC Fund | \$0.00 ⁽¹⁾ | 09/15/2005 | | A | | 7 | | (2) | | (2) | Common Stock | 7 | \$49.97 | 3,768 | D | | |

Explanation of Responses:

- 1. Investment election by reporting person to acquire stock under the Director's Deferred Compensation Plan at a price equal to the price of derivative security set forth in column 8 (1 for 1).
- 2. Investment election by reporting person to acquire Bank of Hawaii Corporation stock under the Directors' Deferred Compensation Plan restated January 1, 1996 and amended September 1, 1996. Distributions to be made at termination of service as a Director.

BARBARA TANABE 09/19/2005

** 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 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.