SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

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* 2. Date of Event Shigemura Dean Y Konth/Day/Year)				ment	3. Issuer Name and Ticker or Trading Symbol BANK OF HAWAII CORP [BOH]					
(Last) 130 MERCH2 (Street) HONOLULU (City)	(First) ANT STREET HI (State)	(Middle) 96813 (Zip)	8/01/2014	4.	(Check all app Direct X Office below	or r (give title	10% Owne Other (spe below)	er (Mor 08/ ecify 6. Ir	hth/Day/Year) 06/2014 dividual or Joir licable Line) Form filed b Person	Date of Original Filed nt/Group Filing (Check ny One Reporting ny More than One Person
		<u>יייייי</u> ד ד	able I - Nor	n-Derivati	ve Securiti	es Beneficially	y Owned			
1. Title of Security (Instr. 4)					. Amount of So eneficially Ov	vned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)	
Common Stock					37,0	27(1)	D			
		(e.ç				Beneficially C s, convertible		s)		
			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securi Underlying Derivative Securi 4)			4. Conversion or	Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Exercise Price of Derivative Security	Direct (D) or Indirect (I) (Instr. 5)	

Explanation of Responses:

1. Reporting person is amending his Form 3 to reflect an overstatement of 14,799 shares. He directly owns 22,228 shares.

DEAN SHIGEMURA

** Signature of Reporting Person Date

01/06/2015

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.