SEC Form	4
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FORM 4

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL								
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intended to satisf defense condition See Instruction 1	fy the affirmative ns of Rule 10b5-1(c).							
1. Name and Addres	ss of Reporting Perso	on*	2. Issuer Name and Ticker or Trading Symbol BANK OF HAWAII CORP [BOH]	(Check	ationship of Reporting Person(s) to Issuer < all applicable)			
	<u>1 (()1(</u>			1	Director	10% Owner		
(Last) P.O. BOX 2900	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 09/30/2024		Officer (give title below)	Other (specify below)		
			4. If Amendment, Date of Original Filed (Month/Day/Year)		idual or Joint/Group Filing	(Check Applicable		
(Street)				Line)				
HONOLULU	НІ	96846		1	Form filed by One Repo	rting Person		
					Form filed by More than Person	One Reporting		
(City)	(State)	(Zip)						

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

1. Title of Security (Instr. 3)	Date	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 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. Transa Code (8)		5. Nu of Deriv Secu Acqu (A) o Dispe of (D (Instr and §	rative rities ired r osed	6. Date Exerc Expiration Da (Month/Day/Y	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				
Direc. Deferred Comp / Plan - BOHC Fund	(1)	09/30/2024		A		353		(2)	(2)	Common Stock	353	\$ 63	31,449 ⁽³⁾	D	

Explanation of Responses:

1. Investment election by reporting person to acquire stock under the Directors' 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. Distributions to be made at termination of service as a director or earlier at director's option.

3. Securities reported were acquired with reinvested dividends pursuant to Bank of Hawaii Corporation's Dividend Reinvestment and Stock Purchase Plan.

Remarks:

/s/ Katherine Lamb for WO ROBERT W JR by Power of 10 Attorney

10/01/2024

** 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.