FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	OMB APPROVAL		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028	

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

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

Name and Address of Reporting Person* Hulst Michelle				2. Issuer Name and Ticker or Trading Symbol BANK OF HAWAII CORP [BOH]									ck all app	,						
(Last)	(Fi	rst) (ľ				3. Date of Earliest Transaction (Month/Day/Year) 04/26/2024								Office below	er (give title		Other (s below)	specify		
130 MERCHANT STREET				4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street)													X	X Form filed by One Reporting Person						
HONOL	ULU H	9	6813												Form Perso	rm filed by More than One Repor rson			orting	
(City)	(S	rate) (2	Zip)		Rul	Rule 10b5-1(c) Transaction Indication														
					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intersatisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								nded to							
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date			Execution D			Date,	Code (Instr.				A) or 3, 4 and	Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	nount (A) or (D)		Price	Transaction(s) (Instr. 3 and 4)				(msu. 4)	
Common	Stock			04/26/2	2024				Α		1,109	A	. ;	\$58.63	8.63 5,695		D			
	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)	ivative Conversion Date curity or Exercise (Month/Day/Year) Execution Date, if any		4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo of (D (Instr	of Expirat (Month) Securities Acquired A) or Disposed		Date Exercisable and piration Date onth/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (In	Price of erivative ecurity astr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y O F D oi (!)	0. Ownership orm: Direct (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V		(A)	(D)			Expiration Date	Title	Amo or Num of Shar							

Explanation of Responses:

Remarks:

/s/ Katherine Lamb for **HULST MICHELLE by**

04/30/2024

Power of Attorney

** 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.