HEENAN DAVID A Form 4

May 03, 2005

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

3235-0287

Expires:

5. Relationship of Reporting Person(s) to

Issuer

Persons who respond to the collection of

information contained in this form are not

required to respond unless the form

January 31, 2005

0.5

Estimated average burden hours per

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OMB APPROVAL

if no longer subject to Section 16. Form 4 or Form 5 obligations

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

2. Issuer Name and Ticker or Trading

BANK OF HAWAII CORP (BOH)

may continue. 30(h) of the Investment Company Act of 1940 See Instruction

Symbol

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

1(b).

(Print or Type Responses)

HEENAN DAVID A

1. Name and Address of Reporting Person *

			BANK OF HAWAII CORP [BOH]			(Check all applicable)					
(Last)	(First)	(Middle)	3. Date of Earliest Transaction								
			`	(Month/Day/Year)				_X_ Director	0% Owner		
900 FORT STREET MALL, SUITE			04/29/20	04/29/2005				Officer (give title Other (specify below)			
1450								,			
	(Street)		4. If Ame	ndment, Da	te Origina	1		6. Individual or	r Joint/Group F	iling(Check	
			Filed(Mon	Filed(Month/Day/Year)				Applicable Line)			
								X Form filed by One Reporting Person			
HONOLUL	LU, HI 96813							Form filed b Person	y More than One	Reporting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	rities A	cquired, Disposed	l of, or Benefic	ially Owned	
1.Title of	2. Transaction Da	te 2A. Dee	med	3.	4. Securi			5. Amount of	6.	7. Nature of	
Security	(Month/Day/Year		on Date, if	* * * * * * * * * * * * * * * * * * * *				Securities	Ownership	Indirect Beneficial Ownership	
(Instr. 3)		any (Month/	Day/Year)	* * * *			Beneficially Owned	Form: Direct (D) or			
		(MOHUI)	Day/ I cai)	(IIIsu. o)	(/ /			Following	Indirect (I)	*	
							Reported	(Instr. 4)	(======================================		
						(A) or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	0.4/20/2005				555	\	Φ.Ω	2.255	ъ		
Stock	04/29/2005			A	555	A	\$0	2,355	D		
										D D 11	
Common								156	T	By David	
Stock								156	I	Allan	
										Heenan, Inc.	
Common								400	.	By Family	
Stock								420	I	Partnership	
										•	

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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. Transaction Code (Instr. 8)	5. Number proof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Director Stock Option	\$ 47.35	04/29/2005		A	2,057	04/29/2006(1)	04/28/2015	Common Stock	2,057

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
HEENAN DAVID A						
900 FORT STREET MALL, SUITE 1450	X					
HONOLULU, HI 96813						

Signatures

DAVID HEENAN 05/03/2005

**Signature of Date
Reporting Person

Explanation of Responses:

- * 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).
- (1) The option vests equally over a three-year period beginning one year after the date of grant.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2