### Edgar Filing: BANK OF HAWAII CORP - Form 4

BANK OF H Form 4 March 04, 20	IAWAII CORI	Р									
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FORM	<b>14</b> UNITE	D STATES		RITIES A shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check this box				0 /					Expires:	January 31,	
if no longer subject to Section 16. Form 4 or		EMENT O	T OF CHANGES IN BENEFICIAL OWNE SECURITIES						Expired: 200 Estimated average burden hours per response 0		
Form 5 obligation may cont <i>See</i> Instru 1(b).	inue. Section 1	7(a) of the	Public U		ling Con	npan	y Act of	e Act of 1934, 1935 or Section 0	1		
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> Crofts Sharon M			2. Issuer Name <b>and</b> Ticker or Trading Symbol BANK OF HAWAII CORP [BOH]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of	of Earliest Transaction				(Check all applicable)			
130 MERCHANT STREET			(Month/Day/Year) 03/02/2015					Director 10% Owner X Officer (give title Other (specify below) below) VICE CHAIRMAN			
Filed(				If Amendment, Date Original led(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> <li> Form filed by More than One Reporting</li> </ul>			
HONOLUL	U, HI 96813							Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	ecurity (Month/Day/Year) Execution Date, if		3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or			d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect Beneficial		
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	03/02/2015			F	619	D	\$ 61.29	30,376	D		
Common Stock	03/02/2015			М	1,755	А	<u>(1)</u>	32,131	D		
Common Stock	03/02/2015			D	1,755	D	\$ 61.29	30,376	D		
Common Stock								2,157	Ι	Owned by spouse	

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

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Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

# 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. Transactic Code (Instr. 8)	5. Number prof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	of Derivative Date Securities (Month/Day/Year) Acquired (A) or Disposed of (D) (Instr. 3, 4,		7. Title and Amou Underlying Securit (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Num of Shar
Restricted Stock Units	<u>(1)</u>	03/02/2015		М	1,755	03/02/2015 <u>(2)</u>	01/31/2017(2)	Common Stock	1,7

# **Reporting Owners**

Reporting Owner Name / Addres	Relationships						
	Director	10% Owner	Officer	Other			
Crofts Sharon M 130 MERCHANT STREET HONOLULU, HI 96813			VICE CHAIRMAN				
Signatures							
SHARON	02/04/2015						

CROFTS 03/04/2015

Date

## **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) Each restricted stock unit was the economic equivalent of one share of BOH common stock. The reporting person settled the restricted stock unit for cash.
- (2) Restricted stock units issued 1-24-2014 vests in one-third blocks on 3-2-2015, 1-29-2016 and 1-31-2017, respectively, and settled in cash provided service and performance criteria are met.

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.

\*\*Signature of

Reporting Person