Edgar Filing: KUIOKA ALTON T - Form 4

VILLOVA ALTON T

KUIOKA A	LTON T										
Form 4											
February 07,	, 2005										
FORM	14									OMB APPROVAL	
	UNITE	Washington, D.C. 20549							OMB Number:	3235-0287	
Check th		X								January 31,	
if no long subject to	EMENT O	F CHANGES IN BENEFICIAL OWNERSHIP OF						Expires:	2005		
	Section 16. SECURITIES							Estimated a burden hou			
Form 4 o	r							response	0.5		
Form 5	Filed p	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,									
obligation may cont		7(a) of the	Public Ut	tility Hold	ling Com	pany	Act of	f 1935 or Section	n		
See Instru		30(h)) of the In	vestment	Company	y Act	of 194	40			
1(b).											
(Print or Type I	Responses)										
1 Name and A	ddress of Reportin	ng Person *	2 Iagua	2. Issuer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to			
1. Name and Address of Reporting Person <u>*</u> KUIOKA ALTON T					TICKEI UL	Taum	g	Issuer			
REIORALIONI			Symbol				വ്വ				
			BANK OF HAWAII CORP [BOH]				(Check all applicable)				
(Last)	(First)	(Middle)		f Earliest Tr	ansaction						
	000			(Month/Day/Year)				Director 10% Owner X Officer (give title Other (specify			
P.O. BOX 2900 02/0			02/04/2	2/04/2005				below) below)			
								Vi	ce Chairman		
(Street)			4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
				led(Month/Day/Year)				Applicable Line)			
								X Form filed by C			
HONOLUL	U, HI 96846							Person	Iore than One Re	eporting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	orivativo S	Socuri	ties Aco	uired, Disposed of	f or Bonoficial	ly Owned	
1 7:41 f	2 T						-			-	
1.Title of Security	2. Transaction D (Month/Day/Yes		on Date, if	3. Transactic	4. Securit			5. Amount of Securities	6. Ownership Form: Direct		
Security (Month/Day/Year) Executiv (Instr. 3) any			Sh Dute, h	on Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Beneficially	(D) or	Beneficial	
`		•	Day/Year)					Owned	Indirect (I)	Ownership	
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
						or		(Instr. 3 and 4)			
G				Code V	Amount	(D)	Price	(
Common	02/04/2005			М	25,000	А	\$	162,975	D		
Stock							18.8				
Common	02/04/2005			C	25 000	D	¢ 40	127.075	D		
Stock	02/04/2005			S	25,000	D	\$ 49	137,975	D		

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

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 control number.

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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. Transactio Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Ame Underlying Secu (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Ai or Ni of
Employee Stock Option(Right to buy)	\$ 18.8	02/04/2005		М	25,000	03/22/2002(1)	03/21/2011	Common Stock	2

Reporting Owners

Reporting Owner Name / Addre	SS	Relationships						
	Director	10% Owner	Officer	Other				
KUIOKA ALTON T P.O. BOX 2900 HONOLULU, HI 96846 Signatures			Vice Chairman					
ALTON KUIOKA	02/07/2005							

Signature of **Reporting Person 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) 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.