### Edgar Filing: WO ROBERT W JR - Form 4

WO ROBER											
October 18, FORM	лл								PPROVAL		
	UNITED	STATES		RITIES A shington			E COMMISSIO	N OMB Number:	3235-0287		
Check th if no lon subject t Section Form 4 of Form 5 obligation may con <i>See</i> Instr 1(b).	section 17(	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES       January 3 200         Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, ction 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940       State of 1934									
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> WO ROBERT W JR			Symbol	er Name <b>an</b> OF HAV		or Trading ORP [BOH]	5. Relationship of Reporting Person(s) to Issuer				
(Last) (First) (Middle) P.O. BOX 1417			3. Date of Earliest Transaction (Month/Day/Year) 10/14/2005				(Check all applicable) <u>X</u> Director Officer (give title <u>10%</u> Owner below) <u>Director</u> (specify below)				
HONOLUI		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivativ	e Securities A	Acquired, Disposed	of, or Beneficia	illy Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	Disposed (Instr. 3,	(A) or d of (D) 4 and 5) (A) or	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Reminder: Rej	port on a separate line	e for each cla	ass of sec	urities bene	Pers infor requ	ons who res mation con ired to resp ays a curre	or indirectly. spond to the colle tained in this form ond unless the fo ntly valid OMB co	n are not rm	SEC 1474 (9-02)		

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exercisable and	7. Title and Amount of	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onNumber	Expiration Date	Underlying Securities	Derivative
Security	or Exercise		any	Code	of	(Month/Day/Year)	(Instr. 3 and 4)	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	•		(Instr. 5)

#### Edgar Filing: WO ROBERT W JR - Form 4

	Derivative Security				Secu Acqu (A) o Disp of (E (Inst 4, an	or osed D) r. 3,					
			Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Direc. Deferred Comp Plan - BOHC Fund	\$ 0 <u>(1)</u>	10/14/2005	А		69		<u>(2)</u>	<u>(2)</u>	Common Stock	69	\$ 48.186

### **Reporting Owners**

Reporting Owner Name / Addre	Relationships								
1.0.0	Director	10% Owner	Officer	Other					
WO ROBERT W JR									
P.O. BOX 1417	Х								
HONOLULU, HI 96806									
Signatures									
ROBERT WO, JR.	10/18/2005								

<u>\*\*</u>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) Investment election by reporting person to acquire stock under the Director's 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 restated January 1, 1996 and amended September 1, 1996. Distributions to be made at termination of service as a Director.

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.