## FORM 4

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

OMB APPROVAL

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

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type	e Responses)																		
1. Name and MOYNIH.		Reporting Person* N T					nd Ticker ERICA		٠.					lationship Director		g Person(s) to all applicable			
100 NORT	TH TRYO	(First) N STREET		3. Date of 01/15/2			Transactio	on (Mon	th/Da	ay/Yea	ar)		X	Officer (give		man and CE	er (specify bel	ow)	
		(Street)		4. If Am	endn	nent, l	Date Origi	nal File	d(Mon	th/Day/	Year)		_X_ F	orm filed by	One Reporting I	Filing(Check Person Reporting Person		ine)	
CHARLO'		(State)	(Zip)																
(City)		(State)	(Zip)				Table I	- Non-I	Deriv	ative !	Securitie	es Acqu	ired, l	Disposed	of, or Benef	ficially Own	ed		
1.Title of Sec (Instr. 3)	curity		2. Transaction Date (Month/Day/Year)	2A. De Execution	on E	ate, i	(Instr. 8		(A)	or Di	ties Acquisposed of 4 and 5)	of (D)	Own Tran			d	6. Ownership Form: Direct (D)	of I Ber	Nature ndirect neficial mership
				(			Code	e V	An	nount	(A) or (D)	Price	(				or Indirect (I) (Instr. 4)		str. 4)
Common S	Stock		01/15/2017				M		28	,770	Δ	\$ 0 (1)	1,08	39,480			D		
Common S	Stock		01/15/2017				D		28	,770	D	\$ 23.01	1,06	50,710			D		
Common S	Stock												2,94	15.699			I	40 Pla	1(k) in
Common S	Stock												638				I	Fai Tru	mily ust
Reminder: Re	eport on a sep	parate line for each	class of securities b	eneficial	ly ov	vned	directly or	Pers in th	sons nis fo	rm a		equire	d to r	espond ι		on contain form displ		1474	4 (9-02)
			Table II -				ities Acqu varrants,	ired, D	ispos	ed of,	or Bene	eficially							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		4. 5. Nu of De Code (Instr. 8) 4. 4. 4. 4. 4. 5. Nu of De Secur Acqu or Disof (D			Jumber Derivative urities quired (A) Disposed D) str. 3, 4,	6. Date Expira	5. Date Exercisable and Caxpiration Date Sec Sec Sec Sec Sec Sec Sec Sec Sec Se			7. Titl of Un Secur	7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(	Owners Form o Derivat Security Direct ( or Indir	ship of tive y: (D) rect	11. Natur of Indirec Beneficia Ownershi (Instr. 4)
				Code	V	(A)	(D)	Date Exerci	sable		ration	Title		Amount or Number of Shares		(Instr. 4)	(Instr.	4)	
2016 Cash Settled Restricted Stock Units	(1)	01/15/2017		М			28,770	<u>(2</u>	2)	02/1	15/2017	7 Com Sto	mon ock	28,770	(1)	28,770	D		

# **Reporting Owners**

		R	elationships	
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
MOYNIHAN BRIAN T 100 NORTH TRYON STREET CHARLOTTE, NC 28255	X		Chairman and CEO	

# **Signatures**

Brian T. Moynihan/Natalie A. Hyman POA	01/18/2017
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) Each unit is the economic equivalent of one share of Bank of America Corporation common stock.
- (2) On February 12, 2016, the reporting person was granted units, vesting and payable solely in cash as follows: 1/12th of the stock units vest and become payable on the 15th day of each month during the 12-month period beginning in March 2016 and ending in February 2017.

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.