FORM 4

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

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

(Print or Type Responses)

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

Name and Address of Reporting Person * Montag Thomas K.				2. Issuer Name and Ticker or Trading Symbol BANK OF AMERICA CORP /DE/ [BAC]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) 100 NORTH TRYON STREET				3. Date of Earliest Transaction (Month/Day/Year) 03/01/2017													
((Street)		4. If Ame	dmer	ıt, Da	te Original	Filed	(Month/Da	ny/Yea	nr)		_X_ Form filed	y On	e Reporting Po	erson	Applicable Lin	e)
												Form med (y Mo	ie man One K	eporting Ferson		
	(State)	(Zip)				Table I - N	on-D	erivativ	ve Se	curitie	s Acqui	red, Dispose	d of	, or Benefi	icially Owne	d	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year	ar) any		e, if	(Instr. 8)						wing s)			Ownership Form:	7. Nature of Indirect Beneficial Ownership	
						Code	V	Amou	ınt	(A) or (D)	Price			(I)	(Instr. 4)		
Common Stock						M	82,642 A \$0			1,594,746			D				
Common Stock						F		46,13 (2)	1	D	\$ 25.5	1,548,615				D	
Common Stock		03/01/2017				M		172,5	36	A	\$ 0 (3)	1,721,151			D		
Common Stock		03/01/2017				D		172,5	36	D	\$ 25.5	1,548,615			D		
Common Stock												494,114	,114			I	2016 GRAT
Common Stock												470,724			I	Family Trust	
rt on a separa	ate line for each cl	ass of securities be	eneficially	owne	d dire	[!	Person	ons wh is form	are	not re	quired	to respond					1474 (9-02)
		Table II										Owned					
Conversion		r) any	Code	Transaction Det Code Sec (Instr. 8) Acc or 1 (D) (Instr. 8)		ivative urities juired (A) Disposed of tr. 3, 4,	and	Expirati	iration Date		of Und Securit	erlying			Derivative Securities Beneficially Owned Following Reported Transaction(Owners Form o Derivat Securit Direct (or India (s) (I)	Ownershi (Instr. 4)
			Code	v V	(A)	(D)		e rcisable	Exp Dat	oiration e	Title	or Numbe	er		(Instr. 4)	(Instr. 4	4)
<u>(1)</u>	03/01/2017		М			82,642		(4)		<u>(4)</u>		1 X / 64	12	(1)	0 (2)	D	
<u>(3)</u>	03/01/2017		М			172,536		(6)		<u>(6)</u>			36	(3)	0 (5)	D	
	E, NC 282 E, NC 282 y Ck Ck Ck Ck Ck Ch Conversion Conversion Conversion Conversion Derivative Security (1)	Conversion or Exercise Price of Derivative Security (II) (Street) (Street) E, NC 28255 (State) 9 Ck ck ck ck ck ck ck ck ck ck	TRYON STREET (Street) E, NC 28255 (State) 2. Transaction Date (Month/Day/Year) ck 03/01/2017 ck 03/01/2017 ck 03/01/2017 ck 03/01/2017 ck Table II 2. (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)	Code Code	TRYON STREET (Street) (Street) (Street) (State) (State) (State) (Zip) (Month/Day/Year) 2. Transaction Date (Month/Day/Year) (II) (State) (Zip) (Za. Deemed Execution Data any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (III) (Street) (Street) (A If Amendmer 2A. Deemed Execution Data any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (III) (III) (Street) (Street) (A If Amendmer 2A. Deemed Execution Data any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (III) (III) (III) (Month/Day/Year) (Month/Day/Year) (III) (III) (Month/Day/Year) (Month/Day/Year) (III) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (III) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)	TRYON STREET (Street) (Street) (Street) (Street) (Street) (Street) (A. If Amendment, Da (Street) (A. If Amendment, Da (A. Deemed Execution Date, if any (Month/Day/Year)) (Month/Day/Year) (A. Deemed Execution Date, if any (Month/Day/Year) (A. Deemed Execution Date, if any (Month/Day/Year) (A. Deemed Execution Date, if any (A. Deemed Execution Date, if any (Month/Day/Year) (A. Deemed Execution Date, if any (Month/Day/Year) (A. Deemed Execution Date, if any (Month/Day/Year) (Month/Day/Year)	Code Care Cap Ca	Code V Code Co	Code V Amount Code Code V Amount Code Co	Street S	Code V	A	Code V	Control Cont		A	A

Reporting Owners

	Relationships								
Reporting Owner Name / Address	Director	10% Owner	Officer	Other					
Montag Thomas K. 100 NORTH TRYON STREET CHARLOTTE, NC 28255			Chief Operating Officer						

Signatures

Thomas K. Montag/Natalie A. Hyman POA	03/03/2017	
**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 represents a contingent right to receive one share of Bank of America Corporation common stock.
- (2) Disposition of shares to the issuer to satisfy a tax withholding obligation.
- (3) Each unit is the economic equivalent of one share of Bank of America Corporation common stock.
- (4) On February 15, 2012, the reporting person was granted units that vest subject to the Company's attainment of return on asset performance goals measured each quarter based on a 12-month rolling period. Represents vesting and settlement on March 1, 2017 of units based on the attainment of goals for the four quarters ending December 31, 2016.
- (5) The units have reached the end of the performance period. No units remain outstanding.
- On February 14, 2014, the reporting person was granted units, vesting and payable in cash based on the closing price of Bank of America Corporation common stock on the settlement date,
- (6) subject to the Company's attainment of performance goals. One-half of the units have performance goals based on the Company's three-year average return on assets and one-half of the units have performance goals based on the Company's three-year average growth in adjusted tangible book value, both beginning on January 1, 2014 and ending on December 31, 2016.

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.