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).

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 * Knox Kathleen A.				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 N TRYON STREET				3. Date of Earliest Transaction (Month/Day/Year) 10/17/2019						X Officer (give title below) Other (specify below) President, Private Bank					
CHARL	OTTE, NC	(Street) 28255		4. If	Amendmen	t, Date O	riginal	Filed(Month	h/Day/Year)		X_ Form fil	ed by One Repo	Group Filing orting Person One Reporting		ble Line)
(City	<i>'</i>)	(State)	(Zip)		1	Γable I - 1	Non-E	Derivative S	Securities	Acquir	red, Disp	osed of, or I	Beneficially	Owned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Yea	r) any	tion Date, if	emed 3. Transaction Code (JDay/Year)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Ownership Form: Direct (D)	Beneficial Ownership		
						Code	V	Amount	(A) or (D)	Price			or Indirect (I) (Instr. 4)	(Instr. 4)	
Common	Stock		10/17/2019			S		40,000	D	\$ 30.23	43,744	1		D	
Common	Stock		10/17/2019			I		3,577.19	93 D	\$ 30.26	0 (1)			I	401(k) Plan
			101 Cacii Ciass 01 s	ecurities	beneficially	owned dia	ectly	or indirectly	y.						
				II - Deriv	vative Secur	ities Acq	Pe cc th	ersons whontained in e form dis	no respo n this fo splays a	rm are curren neficiall	not requ tly valid	OMB conf	ormation spond unle rol numbe	ess	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transact	Table ion 3A. Deer Executio any	II - Deriv (e.g., ned n Date, if	•	ities Acquerants,	Pecchinired, option 6. an (Notice es es ed es ed es ed es ed ed es es	ersons whontained in e form dis	no respo n this fo splays a of, or Ber tible secu cisable on Date	rm are curren neficially rities) 7. Tit Amore Unde Secure	not requitly valid y Owned the and unt of erlying	ired to res	spond unle	of 10. Owners Form o y Derivat Securit Direct o or India	11. Natu of Indire f Benefici ownersl y: (Instr. 4

Reporting Owners

Ī	D (O N /	Relationships					
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
	Knox Kathleen A. 100 N TRYON STREET CHARLOTTE, NC 28255			President, Private Bank			

Signatures

Kathleen A. Knox/Amanda D. Daniel POA	10/18/2019
-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) Prior to the disposition, share equivalents attributed to the reporting person's 401(k) balance increased 54.1307 shares due to dividend reinvestments and changes in the Net Asset Value (NAV) of the issuer's stock fund.

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.