# FORM 5

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

OMB APPROVAL					
OMB Number:	3235-0362				
Estimated average burden					
oure per recoon	1.0				

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 3 Holdings Reported

Form 4 Transactions

Reported

## ANNUAL 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

1. Name and Address of Reporting Person * Bies Susan S.			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) X Director 10% Owner			
(Last) 100 NORTH TRY	(First) ON STREE	(Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2020					Officer (give title below)	Other (specify l	pelow)	
CHARLOTTE, N	(Street) C 28255		4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Reporting (check applicable line)  _X_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person			
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)	(A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		Beneficial Ownership	
Common Stock		11/11/2020		G <sup>(1)</sup>	1,023	D	\$ 0	170,931	D		
Common Stock		12/02/2020		G <sup>(1)</sup>	8,671 D \$ 0			170,931	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	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number	10.	11. Nature	
Derivative	Conversion	Date	Execution Date, if	Transaction	Numb	er	and Expiration	on Date	Amou	int of	Derivative	of	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	rlying	Security	Derivative	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative			Secur	ities	(Instr. 5)	Securities	Derivative	Ownership	
	Derivative				Secur	ities			(Instr	. 3 and		Beneficially	Security:	(Instr. 4)	
	Security				Acqui	ired			4)			Owned at	Direct (D)		
					(A) or	•						End of	or Indirect		
					Dispo	sed						Issuer's	(I)		
					of (D)	)						Fiscal Year	(Instr. 4)		
					(Instr.	3,						(Instr. 4)			
					4, and	l 5)									
										Amount					
							D .	T		or					
								Expiration	Title	Number					
							Exercisable	Date		of					
					(A)	(D)				Shares					

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Bies Susan S. 100 NORTH TRYON STREET CHARLOTTE, NC 28255	X						

#### **Signatures**

Susan S. Bies / Michael P. Lapp POA	02/08/2021
**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) Represents a charitable gift by the reporting person.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.