| SEC | Form | 4 |
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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| | | Table I - Non | -Derivative Securities Acquired, Disposed of, or Benefic | cially Owned | | | | |
|--------------------------------------|--------------|---------------|--|--|--|--|--|--|
| (City) | (State) | (Zip) | | | | | | |
| (Street) CHARLOTTE | NC | 28255 | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| 100 NORTH TRYON STREET | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 04/24/2024 | Officer (give title Other (specify below) below) | | | | |
| 1. Name and Addres <u>ALMEIDA JO</u> | | son* | 2. Issuer Name and Ticker or Trading Symbol <u>BANK OF AMERICA CORP /DE/</u> [BAC] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
| 10b5-1(c). See Ins | truction 10. | | | | | | | |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | Execution Date, Transaction D | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership | |
|---------------------------------|--|-------------------------------|-------------------------|--|--------|---------------|--|---|-------------------------|------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common | 04/24/2024 | | A ⁽¹⁾ | | 7,045 | A | \$ <mark>0</mark> | 20,935 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transac Code (Ir 8) | | Derivative | | Expiration Date (Month/Day/Year) | | nd 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported | Ownership Form: Direct (D) | Beneficial Ownership |
|--|---|---|---------------------------------|---|------------|-----|-------------------------------------|--------------------|---|-------------------------------------|--------------------------------------|--|----------------------------------|-------------------------|
| | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |

Explanation of Responses:

1. Shares represent payment of annual compensation for services as a director under the Bank of America Corporation Equity Plan in transactions exempt under Rule 16b-3.

Jose E. Almeida / Michael P. Lapp 04/26/2024 POA

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.