FORM 4

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

OMB APPROVAL				
OMB Number:	3235-0287			
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nours 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 Ty	pe Response	s)													
1. Name and Address of Reporting Person* ROSSOTTI CHARLES O				2. Issuer Name and Ticker or Trading Symbol MERRILL LYNCH & CO INC [MER]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) C/O MERRILL LYNCH & CO., INC., 4 WORLD FINANCIAL CENTER				3. Date of Earliest Transaction (Month/Day/Year) 01/31/2005						-	Officer (g	give title below)	Oth	er (specify below	v)
(Street) NEW YORK, NY 10080				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City	<i>y</i>)	(State)	(Zip)	Table I - Non-Derivative Securities Acqu					ies Acquir	uired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)			Date (Month/Day/Year) a			Cod (Ins	ransaction e r. 8)	(A) or D	Securities Acquire A) or Disposed of (Instr. 3, 4 and 5)		Beneficially Reported Tra	of Securities Owned Following ransaction(s)		Ownership of Eorm:	Beneficial
				(Month/Da	ay/ Y eai		ode V	Amount	(A) (C)	or	(I)		r Indirect (Ownership Instr. 4)	
Reminder:	Report on a s						conta	ined in	this fo	orm are n	ot require		nd unless tl		474 (9-02)
Reminder:	Report on a s				~		form	ined in display	this fo	orm are n rrently va	ot require alid OMB o		nd unless tl		174 (9-02)
1. Title of	2. Conversion	3. Transaction Date (Month/Day/Year	3A. Deemed Execution Date, in	4. f Transac Code	calls, we see that the second of the second	arran umber	equired, Dits, options, 6. Date and Exp (Month/	ined in display	this for a cu f, or Book the second the sec	orm are narently va	ot require alid OMB of Owned d Amount ying	d to respo control nur 8. Price of	nd unless tl	10. Ownershi Form of Derivative Security: Direct (D) or Indirec	11. Nature of Indirec Beneficia Ownershi (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, in	4. f Transac Code	tion of D Sc A (A D of (I 4,	umber erivati ecuritie cquired o or isposed (D)	contate form equired, Dists, options, 6. Date and Exp (Month/	sposed of converting c	this for a cu f, or Bo ble sec ble ate r)	eneficially curities) 7. Title anof Underly Securities	ot require alid OMB of Owned d Amount ying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownershi Form of Derivative Security: Direct (D' or Indirect)	11. Nature of Indirec Beneficia Ownershi (Instr. 4)

Reporting Owners

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
ROSSOTTI CHARLES O C/O MERRILL LYNCH & CO., INC. 4 WORLD FINANCIAL CENTER NEW YORK, NY 10080	X					

Signatures

Charles O. Rossotti (by Michael A. LaMaina, as agent)	02/01/2005
**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).
- The reporting person participates in the Merrill Lynch & Co., Inc. Fee Deferral Plan for Non-Employee Directors (the "Fee Deferral Plan"), under which these ML Stock Units were (1) credited. Transactions under the Fee Deferral Plan are exempt under Rule 16b-3. The value of each unit is equal to the value of one share of Merrill Lynch & Co., Inc. Common Stock. ML Stock Units are payable in cash at the end of the deferral period as provided in the Fee Deferral Plan.
- (2) 1 for 1

Remarks:

All reported positions have been rounded down to the nearest whole number.

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.