FORM 4

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

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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

(Print or Ty	pe Response	3)												
1. Name and Address of Reporting Person * CRIBIORE ALBERTO				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) 01/31/2006					Office	r (give title below)Oth	er (specify below		
(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 Person Form filed by More than One Reporting Person					
(City) (State) (Zip)			(Zip)	Table I - Non-Derivative Securities Acqui					ired, Disposed of, or Beneficially Owned					
(Instr. 3)		Date (Month/Day/Year) E	2A. Deemed Execution Date, any (Month/Day/Ye		Coc (Ins	ransaction le tr. 8)	(A) or Dispose		Beneficial	of Securities by Owned Following Fransaction(s)		Ownership of Form:	7. Nature of Indirect Beneficial Ownership	
				(Working De	iyi i cui		ode V) or D) Price	(msir. 5 u	ia 1)	o (nstr. 4)
Reminder:	Report on a s	separate fine for ea	on class of securities				Pers		•		ion of infor			74 (9-02)
Reminder:	Report on a s	separate fine for ca	Table II - I	Derivative	Securi	ties A	Perso conta form	ined in this displays a sposed of, or	form are currently Beneficial	not requivalid OMI		nd unless th		74 (9-02)
1. Title of	2. Conversion	3. Transaction	Table II - I	Derivative e.g., puts, of 4. Transaci Code	Securicalls, we see that the securical securic	ties A	Persucontal form cquired, Dit its, options, and Exp (Month/	ined in this displays a	form are currently Beneficial securities)	not requivalid OMI y Owned and Amour rlying es	red to response control nu	nd unless th	To 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II - 1 (a) 3A. Deemed Execution Date, ic) any	Derivative e.g., puts, of 4. Transaci Code	Securi calls, w 5. tion No of) Do Se Ad (A Di of (II 4,	umber erivati curiti cquire o or spose (D) nstr. 3	Persucontal form cquired, District, options, 6. Date I and Exp (Month/ we see the district of the district o	displays a sposed of, or convertible Exercisable ration Date	Beneficially securities) 7. Title of Unde Securitie (Instr. 3	not requivalid OMI y Owned and Amour rlying es	t 8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownershi

Reporting Owners

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

Signatures

Alberto Cribiore (by Michael A. LaMaina, as agent)	02/02/2006
**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.