#### FORM 4

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

OMB APPRO	OVAL				
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).

#### 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 * CODINA ARMANDO M				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) 05/31/2006							Officer (g	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 PersonForm filed by More than One Reporting Person				
(City	<i>i</i> )	(State)	(Zip)			Ta	ble I -	Non-Deri	vative	Securi	ties Acquir	ed, Dispos	ed of, or Be	neficially Owi	ied	
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year		1	Date (Month/Day/Year)	2A. Deemed Execution Day any (Month/Day/		, if (		(	4. Securities A (A) or Dispose (Instr. 3, 4 and		d of (D) B 5) R	eneficially	Amount of Securities neficially Owned Following ported Transaction(s)		Ownership of Form:	7. Nature of Indirect Beneficial Ownership
			(Month/Day/ Y		Coo		le V	Amoun	(A) (D)	or	(msu. 3 anu 4)		0	r Indirect (In	nstr. 4)	
			Table II - D					contai form d	ned ir display	n this f ys a cu of, or B	orm are no irrently va	ot require llid OMB o	n of inforr d to respo control nui	nd unless th		74 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if	4. Transac Code	tion	5. Num of Deriv Secu Acqu (A) o Dispo of (D (Instr	mber and Expiration Date (Month/Day/Year) of Un Securities quired ) or sposed		7. Title am of Underly Securities (Instr. 3 an	ving		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exercisab		oiration te	Title	Amount or Number of Shares				
ML Stock Units (1)	<u>(2)</u>	05/31/2006		A		86		(1)		(1)	Common Stock	n 86	\$ 71.91	1,019 (3)	D	

#### **Reporting Owners**

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

### **Signatures**

Armando M. Codina (by Michael A. LaMaina, as agent)	06/02/2006
**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
- (3) This total also reflects the reinvestment of dividend equivalents into ML Stock Units pursuant to the terms of the Fee Deferral Plan. This transaction is exempt from reporting pursuant to Rule 16a-3 and/or 16a-11.

#### 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.