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	e 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* PETERS AULANA L			2. Issuer Name and Ticker or Trading Symbol MERRILL LYNCH & CO INC [MER]					5	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) 10/31/2005						-	Officer (give title below) Other (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 Person Form filed by More than One Reporting Person					
(City	y)	(State)	(Zip)	Table I - Non-Derivativ				ative Securi	urities Acquired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)			Date (Month/Day/Year)		on Date, if			4. Securities Ac (A) or Disposed (Instr. 3, 4 and		ed of (D) Beneficia (S) Reported		nt of Securities Ily Owned Following Transaction(s)		Ownership o Form: B	Beneficial
				(Month/Da	ay/ Y ea	r)	Code	V A	mount (A)	or	(Instr. 3 and 4)			· /	Ownership Instr. 4)
Reminder:	resport on a s							contain	ed in this f	orm are n	ot require		nd unless t		474 (9-02)
Reminder:	report on a s				G			contain form dis	ed in this f splays a cu	orm are n irrently va	ot require alid OMB		nd unless t		1/4 (9-02)
1. Title of			3A. Deemed Execution Date, i	4. Transac Code	tion S A (A	f ecuri cqui A) or bispos f (D)	er ative aties red sed 3,	contain form dis	ed in this factorial sed of, or Boundary sed of, or Boundary servisable ion Date	orm are n irrently va	ot require alid OMB of Owned ad Amount ying	ed to respo	ond unless t mber. 9. Number o	To 10. Ownership Form of Derivative Security: Direct (D) or Indirect	11. Natur of Indirec Beneficia Ownersh (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	Date	3A. Deemed Execution Date, i	4. Transac Code	tion 5 N 0 0 0 0 0 0 0 0 0	f dumb f deriva ecuri cqui A) or dispos f (D)	er (antive tities red seed 3, 5)	contain form distinct, Dispositions, contains,	ed in this to splays a cused of, or Benvertible secretisable ion Date y/Year)	eneficially curities) 7. Title an of Underly Securities (Instr. 3 an	ot require alid OMB of Owned ad Amount ying	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(To 10. Ownership Form of Derivative Security: Direct (D) or Indirect (S) (I)	11. Natur of Indirec Beneficia Ownersh (Instr. 4)

Reporting Owners

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

Signatures

Aulana L. Peters (by Michael A. LaMaina, as agent)	11/01/2005
**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.