

BANK OF AMERICA NA  
 Form 3  
 March 19, 2018

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

OMB Number: 3235-0104  
 Expires: January 31, 2005  
 Estimated average burden hours per response... 0.5

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

|                                                         |         |                                      |                                                                                  |                                                      |
|---------------------------------------------------------|---------|--------------------------------------|----------------------------------------------------------------------------------|------------------------------------------------------|
| 1. Name and Address of Reporting Person *               |         | 2. Date of Event Requiring Statement | 3. Issuer Name <b>and</b> Ticker or Trading Symbol                               |                                                      |
| Â BANK OF AMERICA CORP /DE/                             |         | (Month/Day/Year)<br>03/09/2018       | DREYFUS STRATEGIC MUNICIPALS INC [LEO]                                           |                                                      |
| (Last)                                                  | (First) | (Middle)                             | 4. Relationship of Reporting Person(s) to Issuer                                 | 5. If Amendment, Date Original Filed(Month/Day/Year) |
| BANK OF AMERICA<br>CORPORATE CENTER,Â 100<br>N TRYON ST |         |                                      | (Check all applicable)                                                           |                                                      |
| (Street)                                                |         |                                      | ___ Director                                                                     | <input checked="" type="checkbox"/> 10% Owner        |
| CHARLOTTE,Â NCÂ 28255                                   |         |                                      | ___ Officer                                                                      | ___ Other                                            |
| (City)                                                  | (State) | (Zip)                                | (give title below) (specify below)                                               |                                                      |
|                                                         |         |                                      | 6. Individual or Joint/Group Filing(Check Applicable Line)                       |                                                      |
|                                                         |         |                                      | ___ Form filed by One Reporting Person                                           |                                                      |
|                                                         |         |                                      | <input checked="" type="checkbox"/> Form filed by More than One Reporting Person |                                                      |

**Table I - Non-Derivative Securities Beneficially Owned**

| 1. Title of Security<br>(Instr. 4)    | 2. Amount of Securities Beneficially Owned<br>(Instr. 4) | 3. Ownership Form:<br>Direct (D)<br>or Indirect (I)<br>(Instr. 5) | 4. Nature of Indirect Beneficial Ownership<br>(Instr. 5) |
|---------------------------------------|----------------------------------------------------------|-------------------------------------------------------------------|----------------------------------------------------------|
| Auction Rate Preferred <sup>(1)</sup> | 564                                                      | I                                                                 | By Subsidiary                                            |

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

SEC 1473 (7-02)

**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 control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

| 1. Title of Derivative Security<br>(Instr. 4) | 2. Date Exercisable and Expiration Date<br>(Month/Day/Year) | 3. Title and Amount of Securities Underlying Derivative Security | 4. Conversion or Exercise | 5. Ownership Form of | 6. Nature of Indirect Beneficial Ownership<br>(Instr. 5) |
|-----------------------------------------------|-------------------------------------------------------------|------------------------------------------------------------------|---------------------------|----------------------|----------------------------------------------------------|
|-----------------------------------------------|-------------------------------------------------------------|------------------------------------------------------------------|---------------------------|----------------------|----------------------------------------------------------|

Edgar Filing: BANK OF AMERICA NA - Form 3

| Date Exercisable | Expiration Date | (Instr. 4)<br>Title | Amount or Number of Shares | Price of Derivative Security | Derivative Security: Direct (D) or Indirect (I)<br>(Instr. 5) |
|------------------|-----------------|---------------------|----------------------------|------------------------------|---------------------------------------------------------------|
|------------------|-----------------|---------------------|----------------------------|------------------------------|---------------------------------------------------------------|

## Reporting Owners

| Reporting Owner Name / Address                                                                         | Relationships |           |         |       |
|--------------------------------------------------------------------------------------------------------|---------------|-----------|---------|-------|
|                                                                                                        | Director      | 10% Owner | Officer | Other |
| BANK OF AMERICA CORP /DE/<br>BANK OF AMERICA CORPORATE CENTER<br>100 N TRYON ST<br>CHARLOTTE, NC 28255 | Â             | Â X       | Â       | Â     |
| BANK OF AMERICA NA<br>100 N. TRYON STREET<br>CHARLOTTE, NC 28255                                       | Â             | Â X       | Â       | Â     |
| Blue Ridge Investments, L.L.C.<br>214 NORTH TRYON STREET<br>CHARLOTTE, NC 28255                        | Â             | Â X       | Â       | Â     |

## Signatures

|                                                    |            |
|----------------------------------------------------|------------|
| /s/ Ronnie Ojera (Bank of America Corporation)     | 03/19/2018 |
| __Signature of Reporting Person                    | Date       |
| /s/ Ronnie Ojera (Bank of America, NA)             | 03/19/2018 |
| __Signature of Reporting Person                    | Date       |
| /s/ Mary Kressler (Blue Ridge Investments, L.L.C.) | 03/19/2018 |
| __Signature of Reporting Person                    | Date       |

## Explanation of Responses:

\* If the form is filed by more than one reporting person, see Instruction 5(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 Auction Rate Preferred Shares ("Shares") reported in Table I represent shares beneficially owned by Bank of America N.A.

(1) ("BANA") and Blue Ridge Investors, L.L.C. ("Blue Ridge"). BANA and Blue Ridge are wholly owned subsidiaries of Bank of America Corporation.

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.