## FORM 4

(Print or Type Responses)

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

OMB APPROVAL						
OMB Number:	3235-0287					
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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

1. Name and Address of Reporting Person* BANK OF AMERICA CORP /DE/				2. Issuer Name <b>and</b> Ticker or Trading Symbol BLACKROCK MUNIHOLDINGS NEW JERSEY QUALITY FUND, INC. [MUJ]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) DirectorX10% Owner Officer (give title below) Other (specify below)					
BANK OF AMERICA CORPORATE CENTER, 100 N. TRYON STREET				3. Date of Earliest Transaction (Month/Day/Year) 08/31/2010											
(Street) CHARLOTTE, NC 28255				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing/Check Applicable Line) Form filed by One Reporting Person X. 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		2. Transaction Date (Month/Day/Yea	2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
					Code	V	Amount	(A) or (D)	Price				or Indirect (I) (Instr. 4)		
Common Stock 08/31/2010			08/31/2010			P		2,200	A	\$ 15.57	2,200			I	By Subsidiary
Common Stock 08/31/2009		08/31/2009			S		1,700	1 )	\$ 15.51	500			By Subsidiary		
Common Stock			08/31/2009			S		400	D	\$ 15.52	100				By Subsidiary
Common Stock 08/31/2009			08/31/2009			S		100	D	\$ 15.53	0			I	By Subsidiary
Reminder: Report or	n a separate line	e for each class of se	curities beneficiall	y owned dire	ectly or in	directly.									
							form	are not		to respo	collection of information of unless the form			SE	C 1474 (9-02)
			Table	e II - Deriva (e.g., pt		rities Acqı warrants,					vned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, is any (Month/Day/Year	Code Der Sec (A) (D)		rivative curities Acquired ) or Disposed of		6. Date Exercisable and Expiration Date (Month/Day/Year)		Unde (Instr	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		9. Number of Derivative Securities Beneficially Owned Following Reported	Ownershi Form of Derivativ Security:	)) ` ´ ´
				Code	V	(A)	(D)	Date Exercisabl	Expirati e Date	on Title	Amount or Number of Shares		Transaction(s (Instr. 4)		

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
BANK OF AMERICA CORP /DE/ BANK OF AMERICA CORPORATE CENTER 100 N. TRYON STREET CHARLOTTE, NC 28255		X				
MERRILL LYNCH, PIERCE, FENNER & SMITH INC. 4 WORLD FINANCIAL CENTER NORTH TOWER NEW YORK, NY 10080		X				

### **Signatures**

Bank of America Corporation, By: /s/ Beth Dorfman, Authorized Signatory	03/18/2011
**Signature of Reporting Person	Date
Merrill Lynch, Pierce, Fenner & Smith Incorporated, By: /s/ Lawrence Emerson, Title: Attorney-In-Fact	03/18/2011
**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).

#### Remarks:

The transactions reported on this Form 4 were effected by Merrill Lynch, Pierce, Fenner & Smith Incorporated, an indirect, wholly owned subsidiary of Bank of America Corporation.

Disgorgement of profits, if applicable, based on transactions reported above is being made by the Reporting Persons to the Issuer.

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.