FORM 4

(Print or Type Responses)

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

OMB APPROVAL						
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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 and Ticker or Trading Symbol NUVEEN NEW YORK QUALITY INCOME MUNICIPAL FUND INC [NUN]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X_10% 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) 10/04/2010												
(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 Acquired, Disposed of, or Beneficially Owned												
(Instr. 3)		2. Transaction Date (Month/Day/Yea	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		or	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	e V	/ Ar	mount	(A) or (D)	Price					(Instr. 4)	
Common Stock			10/04/2010			P		13	3,669	A S	\$ 15.02	13,669				By Subsidiary
Common Stock			10/04/2010			S		13	3,669		\$ 14.95	0				By Subsidiary
Common Stock			12/15/2010			P		25	5	Λ	\$ 13.49	25				By Subsidiary
Common Stock			12/15/2010			S		25	5	D I	\$ 13.78	0				By Subsidiary
Reminder: Report or	a separate line	e for each class of se	curities beneficially	y owned dire	ctly or in	directly.	for	m are	not re		o resp	collection of information			SEG	C 1474 (9-02)
			Table	: II - Derivat						or Benefic e securitio		wned				
1. Title of Derivative Security (Instr. 3) 2. Conversi or Exerc Price of Derivativ Security		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, it any (Month/Day/Year	4. Transac Code (Instr. 8)	Code (Instr. 8) Deriva Securit (A) or (D)		vative arities Acquired (or Disposed of r. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Ti Undo (Inst	tle and Amount of erlying Securities r. 3 and 4)	Derivative Security (Instr. 5) Derivative Sec Security Sec Security Sec Security Sec Security Securit	Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect	
				Code	V	(A)	(D)	Date Exer	e rcisable	Expiration Date	Title	of Shares		Transaction(s (Instr. 4)	(I) (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.