FORM 4

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

(Print or Type Respo	nses)														
Name and Address of Reporting Person* BANK OF AMERICA CORP /DE/				2. Issuer Name and Ticker or Trading Symbol NUVEEN NEW JERSEY DIVIDEND ADVANTAGE MUNICIPAL FUND [NXJ]						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) 07/29/2010											
(Street)				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				
CHARLOTTE, NC 28255 (City) (State) (Zip)				Table L. Non-Derivative Securities Again						ired, Disposed of, or Beneficially Owned					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Yea	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A)			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			07/29/2010			P		515	A	\$ 13.95	515			I	By Subsidiary
Common Stock 07/29		07/29/2010			P		485	A	\$ 14	1,000			I	By Subsidiary	
Common Stock			07/29/2010			S		1,000	D	\$ 13.95	0			I	By Subsidiary
Common Stock			12/15/2010			P		250	A	\$ 12.75	250			I	By Subsidiary
Common Stock			12/15/2010			S		250	D	\$ 12.5	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			•							
							form		equired 1	to respo	collection of inform and unless the form			SE	C 1474 (9-02)
			Table			rities Acquir warrants, op					wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	rsion Date (Month/Day/Year) of titive	3A. Deemed Execution Date, i any (Month/Day/Year	if Code De (Instr. 8) See (A (D) or Disposed of		and Expiration Date U		Unde	e and Amount of lying Securities 3 and 4) 8. Price of Derivativ Security (Instr. 5)		Derivative Securities Beneficially Owned Following	Ownershi Form of Derivative Security: Direct (D)) [
				Code	v	(A) (D		Date Exercisable	Expiration Date	on Title	Amount or Number of Shares		Reported Transaction((Instr. 4)	or Indirection (I) (Instr. 4)	t
Danautina	0														

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	03/21/2011
**Signature of Reporting Person	Date
Merrill Lynch, Pierce, Fenner & Smith Incorporated, By: /s/ Lawrence Emerson, Title: Attorney-In-Fact	03/21/2011
**Signature of Reporting Person	Date

Explanation of Responses:

- \star 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.