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	onses)															
1. Name and Address of Reporting Person * BANK OF AMERICA CORP /DE/				2. Issuer Name and Ticker or Trading Symbol REAVES UTILITY INCOME FUND [UTG]							5. Relationship of R	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director X 10% Owner				
BANK OF AMERICA CORPORATE CENTER, 100 N. TRYON STREET			3. Date of Earliest Transaction (Month/Day/Year) 01/21/2011							Officer (give title b	pelow)	Other (specify below)			
(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)				Table I - Non-Derivative Securities Acquired, 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)		if Code (Instr.			4. Securities Acquired (A or Disposed of (D) (Instr. 3, 4 and 5)			Following Reported Transaction(s) (Instr. 3 and 4)			Ownership	Beneficial	
					Co	de	V	Amount	(A) or (D)	Price				or Indirect (Instr. 4) (Instr. 4)		
Common Stock			01/21/2011			F	•		350	A	\$ 21.9	350			1	By Subsidiary
Common Stock			01/21/2011			F	,		551	Δ	\$ 21.91	901		1	By Subsidiary	
Common Stock			01/21/2010			S	\$		551	D	\$ 21.62	350			1	By Subsidiary
Common Stock 01/21/2010		01/21/2010			S	\$		350	1)	\$ 21.91	0			1	By Subsidiary	
Reminder: Report or	n a separate lin	e for each class of se	curities beneficiall	y owned di	rectly or	indirectly										
							fo	rm a	are not r		to resp	collection of inform oond unless the form			SEG	C 1474 (9-02)
			Table	e II - Deriv (e.g., j						or Benefi le securit		Owned				
1. Title of Derivative Security (Instr. 3)	2. 3. Transaction Or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year)		3A. Deemed Execution Date, is any (Month/Day/Year	4. Transaction 5. Code Do (Instr. 8) Se (A		Derivative Securities A) or Dis D)	Number of erivative ecurities Acquired A) or Disposed of		6. Date Exercisable and Expiration Date (Month/Day/Year)		Uno	itle and Amount of lerlying Securities tr. 3 and 4)	Derivative Security (Instr. 5) Derivative Securities Beneficial Owned Following	Derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D)	(Instr. 4)
				Code	v	(A)	(D)		ate xercisable	Expirati Date	Titl	Amount or Number of Shares		Reported Transaction(s (Instr. 4)	or Indirect (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	05/03/2011
**Signature of Reporting Person	Date
Merrill Lynch, Pierce, Fenner & Smith Incorporated, By: /s/ Lawrence Emerson, Title: Attorney-In-Fact	05/03/2011
**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.