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

OMB APPROVA	۱L
OMB Number:	3235-0287
Estimated average burden	hours
per response	0.5

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)															
1. Name and Address of Reporting Person * BANK OF AMERICA CORP /DE/				2. Issuer Name and Ticker or Trading Symbol BLACKROCK MUNIHOLDINGS QUALITY FUND II,							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
BAINK OF AMERICA CONT /BE/				INC. [MUE]							Director Officer (give title b	elow)	X 10% C	wner specify below)		
(Last) (First) (Middle) BANK OF AMERICA CORPORATE CENTER, 100 N. TRYON STREET				3. Date of Earliest Transaction (Month/Day/Year) 06/17/2011												
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							Form filed by One Re	6. Individual or Joint/Group Filing(Check Applicable Line)Form filed by One Reporting Person				
CHARLOTTE, NC 28255										_X_Form filed by More than One Reporting Person						
(City)	(City) (State) (Zip)			Table I - Non-Derivative Securities Acqui							red, Disposed of, or Beneficially Owned					
(Instr. 3)		2. Transaction Date (Month/Day/Yea	2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		4. Securities Acquire or Disposed of (D) (Instr. 3, 4 and 5)		ed (A)	5. Amount of Securiti Following Reported T (Instr. 3 and 4)	ies Beneficially Owned Transaction(s)			7. Nature of Indirect Beneficial Ownership		
					Cod	e 1			(A) or (D)	Price			or Indirect (I)			
Common Stock	ommon Stock 06/17/2011		06/17/2011			P			500	A 5	§ 13.24	500			By Subsidiary	
Common Stock 06/17/2011		06/17/2011			P			500	A 5	§ 13.25	1,000				By Subsidiary	
Common Stock 06/17/2011		06/17/2011			S			1,000	D S	§ 13.25	)				By Subsidiary	
Reminder: Report or	n a separate line	e for each class of sec	curities beneficiall	y owned dire	ectly or in	directly.						ollection of informa			SE	C 1474 (9-02)
										equirea t ntrol num		and unless the form	i dispiays a	currently		
			Table	e II - Deriva (e.g., p						or Benefic		vned				
1. Title of Derivative Security (Instr. 3)		ion Date (Month/Day/Year)	3A. Deemed Execution Date, i any (Month/Day/Year	r) Code (Instr. 8) So (A		Number of Derivative ecurities Acquired A) or Disposed of D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date		ion Date	Unde	le and Amount of rlying Securities . 3 and 4)	Derivative Security (Instr. 5) B	9. Number of Derivative Securities Beneficially Owned Following	Ownershi Form of Derivative Security: Direct (D	Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)		ate xercisable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction( (Instr. 4)	or Indirection (I) (Instr. 4)	t
Reporting	Owners	l .														

	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/ Gary Whitman, Authorized Signatory		07/11/2011
**Signature of Reporting Person		Date
Merrill Lynch, Pierce, Fenner & Smith Incorporated, By: Lawrence Emerson, Title: Attorney-In-Fact		07/11/2011
**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).

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.