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)															
1. Name and Address of Reporting Person* BANK OF AMERICA CORP/DE/				Issuer Name and Ticker or Trading Symbol PIMCO Income Strategy Fund II [PFN]							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) 06/21/2011							Officer (give title b	elow)	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)	(S	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.	(Instr. 8)		4. Securities Acquired or Disposed of (D) (Instr. 3, 4 and 5)		red (A)	5. Amount of Securiti Following Reported 7 (Instr. 3 and 4)	ties Beneficially Owned Transaction(s)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
				(**************************************			ode	V	Amount	(A) or (D)	Price				or Indirect (Instr. 4) (I) (Instr. 4)	
Common Stock			06/21/2011]	P		500	A	\$ 10.66	500			I	By Subsidiary
Common Stock			06/21/2011			:	S		500	11)	\$ 10.66	0			I	By Subsidiary
Common Stock			06/22/2011			1	P		500	Δ	\$ 10.66	500			I	By Subsidiary
Common Stock			06/22/2011			•	S		500	1)	\$ 10.66	0			I	By Subsidiary
Reminder: Report or	n a separate lin	e for each class of se	curities beneficiall	v owned d	irectly or	indirectly	7.									
f				,			P	orm		equired	to respo	collection of information of unless the form			SE	C 1474 (9-02)
			Table						isposed of, , convertib			vned				
1. Title of Derivative Security (Instr. 3)	Conversion Date or Exercise (Month/Day/Year)		3A. Deemed Execution Date, is any (Month/Day/Year	4. Transaction 5 Code (Instr. 8) S		Derivativ Securities (A) or Dis (D)	i. Number of Derivative Securities Acquired A) or Disposed of		6. Date Exercisable and Expiration Date (Month/Day/Year)		Unde	tle and Amount of orlying Securities : 3 and 4)	(Instr. 5) Beneficia Owned Following	Derivative Securities Beneficially Owned Following	Ownershi Form of Derivative Security: Direct (D	
				Code	V	(A)	(D)		Date Exercisable	Expirati Date	on Title	Amount or Number of Shares		Reported Transaction(s (Instr. 4)	or Indirection (I) (Instr. 4)	t

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/ 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).

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.