

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

OMB APPR	ROVAL			
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INITIAL STATEMENT OF 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 Responses)										
1. Name and Address of Reporting Person * Thompson Bruce R. 2. Date of Event Statement (Mon 01/12/2010)		nt (Month/I		3. Issuer Name and Ticker or Trading Symbol BANK OF AMERICA CORP /DE/ [BAC]						
100 N. TRYON ST	(Middle)	— 01/12/2	- 01/12/2010		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			Filed(Moi 01/22/2	5. If Amendment, Date Original Filed(Month/Day/Year) 01/22/2010	
(Street) CHARLOTTE, NC 28255						X Officer (give title below) Other (specify below) Chief Financial Officer			6. Individual or Joint/Group Filing(Check Applicable Line) X_Form filed by One Reporting PersonForm filed by More than One Reporting Person	
(City) (State)	(Zip)		Table I - Non-Derivative Securities Beneficially Owned					Owned		
1.Title of Security (Instr. 4)			В	. Amount of Se geneficially Ow (nstr. 4)		1 (3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indir (Instr. 5)	ect Beneficial Ownership	
Common Stock			0	0 (1)			I	Thrift Trust		
unless	s who respo the form dis	nd to the o	collection rrently va	of information	on contain trol numbe	ed in ther.		ot required to re		
1. Title of Derivative Security (Instr. 4) 2. ar (Instr. 4)		2. Date Exer and Expirati (Month/Day/Ye	rcisable ion Date	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)			4. Conversion	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Security	(D) or Indirect (I) (Instr. 5)		
401(k) Restoration Plan BAG Fund Unit (1)	C Stock	(2)	(2)	Common Stock	66.28		\$ 0 (3)	D		
Reporting Owners	3									
Reporting Owner Name /		R	elationship	ps						
Address	10	% -								

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Thompson Bruce R. 100 N. TRYON ST CHARLOTTE, NC 28255			Chief Financial Officer		

Signatures

Bruce R. Thompson / Evelyn King POA	02/12/2015
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).
- (1) These stock fund units ("Units") under the 401(k) Restoration Plan (the "Plan") were inadvertently reported as common stock indirectly held through a Thrift Trust in Table I of the reporting person's original Form 3 and reflected as holdings in Table I of the reporting person's subsequent Forms 4.
- (2) Units are payable in cash following termination of the reporting person's employment with the issuer.
- (3) Units are the economic equivalent of common stock based upon a conversion rate that fluctuates due to changes in the common stock price and the Unit price under the Plan.

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 of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number of the collection of the coll	ber.