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

| OIVID AFFROY          | AL        |
|-----------------------|-----------|
| OMB Number:           | 3235-0287 |
| Estimated average bur | den       |
| hours per response    | 0.5       |

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

| 1. Name and Address of Reporting Person * TAYLOR R EUGENE                               |                                                           |                                      |                                         | 2. Issuer Name and Ticker or Trading Symbol<br>BANK OF AMERICA CORP /DE/ [BAC]                                                    |                                   |                                                                                    |                                                                                     |                                                                                                      | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)Director 10% Owner                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                          |                                 |                                                                                            |                                                                                       |                                                            |
|-----------------------------------------------------------------------------------------|-----------------------------------------------------------|--------------------------------------|-----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|--------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|------------------------------------------------------------|
| (Last) (First) (Middle) 100 NORTH TRYON STREET, NC1-007-23-02 (Street)  CHARLOTTE 28255 |                                                           |                                      |                                         | Date of Earliest Transaction (Month/Day/Year)     02/14/2006      H Amendment, Date Original Filed(Month/Day/Year)     02/16/2006 |                                   |                                                                                    |                                                                                     | X                                                                                                    | X Officer (give title below) Other (specify below)  Pres Glbl Bus and Fin Svs  6. Individual or Joint/Group Filing(Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                                 |                                                                                            |                                                                                       |                                                            |
|                                                                                         |                                                           |                                      |                                         |                                                                                                                                   |                                   |                                                                                    |                                                                                     | _X_ F                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                          |                                 |                                                                                            |                                                                                       |                                                            |
| (City)                                                                                  |                                                           | (State)                              | (Zip)                                   |                                                                                                                                   |                                   | Table I                                                                            | - Non-Deriv                                                                         | ative Securities                                                                                     | s Acquired,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Disposed                 | of, or Benef                    | icially Owne                                                                               | d                                                                                     |                                                            |
| 1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year                    |                                                           |                                      | Execution Date, if C                    |                                                                                                                                   | f Code<br>(Instr. 8               | 3. Transaction Code (A) or Disposed o (Instr. 8) (Instr. 3, 4 and 5)               |                                                                                     | of (D) Owned Followi<br>Transaction(s)                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | · .                      |                                 | Ownership of Form:                                                                         | eneficial                                                                             |                                                            |
|                                                                                         |                                                           |                                      |                                         |                                                                                                                                   | r)<br>Code                        | e V Ar                                                                             | (A) or (D)                                                                          | Price                                                                                                | r. 3 and 4)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | . 4)                     |                                 |                                                                                            | Ownership<br>Instr. 4)                                                                |                                                            |
| Reminder: Re                                                                            |                                                           |                                      |                                         |                                                                                                                                   |                                   |                                                                                    | in this fo                                                                          | who respond<br>orm are not re<br>tly valid OMB                                                       | quired to r                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | espond ι                 |                                 |                                                                                            |                                                                                       | 74 (9-02)                                                  |
| Reminder: Re                                                                            |                                                           |                                      |                                         |                                                                                                                                   |                                   |                                                                                    | Persons                                                                             | who respond                                                                                          | to the col                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | lection of               | t intormati                     | on contain                                                                                 | ia SEC 14                                                                             | 74 (9-02)                                                  |
|                                                                                         | 2.<br>Conversion<br>or Exercise                           | 3. Transaction Date (Month/Day/Year) | 3A. Deemed<br>Execution Date, if        | (e.g., puts<br>4.                                                                                                                 | 5. Notion of I                    | varrants,<br>Jumber                                                                | in this for a currentired, Disposoptions, con                                       | orm are not re tly valid OMB  ed of, or Benef vertible securion reisable and Date                    | equired to rescriptions of the control of the contr | respond umber. ed        | 8. Price of                     |                                                                                            | lys                                                                                   | 11. Natu                                                   |
| 1. Title of<br>Derivative                                                               | 2.<br>Conversion                                          | Date                                 | 3A. Deemed<br>Execution Date, if        | 4.<br>Transact                                                                                                                    | 5. Notion of I Second or I of (   | Number Derivative urities quired (A) Disposed D) tr. 3, 4,                         | in this for a current sired, Disposoptions, con 6. Date Exe Expiration I (Month/Day | orm are not re tly valid OMB  ed of, or Benef vertible securion reisable and Date                    | control nucleically Own ties)  7. Title and of Underlyis                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | respond umber. ed Amount | 8. Price of Derivative          | 9. Number of Derivative Securities Beneficially Owned Following Reported Transactions      | f 10.<br>Ownership<br>Form of<br>Derivative<br>Security:<br>Direct (D)<br>or Indirect | 11. Natu<br>of Indire<br>Benefici<br>Ownersh<br>(Instr. 4) |
| Title of     Derivative     Security                                                    | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative | Date                                 | 3A. Deemed<br>Execution Date, if<br>any | 4.<br>Transact                                                                                                                    | 5. No of I<br>Sec<br>Or I<br>of ( | varrants,<br>Jumber<br>Derivative<br>urities<br>uuired (A)<br>Disposed<br>D)<br>5) | in this for a current sired, Disposoptions, con 6. Date Exe Expiration I (Month/Day | orm are not rettly valid OMB sed of, or Benef vertible securit reisable and Date //Year)  Expiration | ricially Own<br>ficially Own<br>ficially Own<br>ficially Own<br>7. Title and<br>of Underlying<br>Securities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | respond umber. ed Amount | 8. Price of Derivative Security | 9. Number of<br>Derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported | f 10.<br>Ownership<br>Form of<br>Derivative<br>Security:<br>Direct (D)<br>or Indirect | 11. Natu<br>of Indire<br>Benefici<br>Ownersl<br>(Instr. 4) |

|                                                                               | Relationships |              |                           |       |  |  |
|-------------------------------------------------------------------------------|---------------|--------------|---------------------------|-------|--|--|
| Reporting Owner Name / Address                                                | Director      | 10%<br>Owner | Officer                   | Other |  |  |
| TAYLOR R EUGENE<br>100 NORTH TRYON STREET<br>NC1-007-23-02<br>CHARLOTTE 28255 |               |              | Pres Glbl Bus and Fin Svs |       |  |  |

## **Signatures**

| R. Eugene Taylor/Roger C. McClary POA | 02/17/2006 |
|---------------------------------------|------------|
| 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).
- (1) These restricted stock units, which are exempt under Rule 16b-3(d), vest on the third anniversary of the grant date.
- The \$34.44 unit price reported on the Form 4 filed to report the disposition of restricted stock units on February 14, 2006 was incorrect. The correct unit price is \$44.16.

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.    |  |
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| 1 octional persons who are to respond to the concedent of information contained in this form are not required to respond unless the form displays a currently valid ONID illumber. |  |
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