

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

OMB APPROVAL				
OMB Number:	3235-0104			
Estimated average burden				
nours per respons	se 0.5			

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 * KRAWCHECK SALLIE 2. Date of Even Statement (Mor 08/04/2009)			3. Issuer Name and Ticker or Trading Symbol BANK OF AMERICA CORP /DE/ [BAC]				
(Last) (First) (Middle) 100 NORTH TRYON STREET	_		4. Relationship of Issuer (Check	f Reporting Person	Filed(Mon 08/07/2	endment, Date Original h/Day/Year) 009	
(Street) CHARLOTTE, NC 28255					6. Individ Applicable I Mt _X_ Form fi	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					
1. Title of Security (Instr. 4)		Beneficially Owned		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock		705 (1)		I	By Spouse		
Reminder: Report on a separate line for each class Persons who respor unless the form disp Table II - Derivativ	nd to the collecti plays a currently	on of informati valid OMB con	on contained in t strol number.		·		
1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date Month/Day/Year)	ate Exercisable Expiration Date 3. Title and A Securities Un		4. Conversion or Exercise Price of Derivative	5. Ownership Form of O	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Expira Exercisable Date	Title Amou	ant or Number of	Security	(D) or Indirect (I) (Instr. 5)		
Reporting Owners	·						

	Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other
KRAWCHECK SALLIE 100 NORTH TRYON STREET CHARLOTTE, NC 28255			Pres, Glbl Wealth and Inv Mgmt	

Signatures

Sallie Krawcheck/Roger C. McClary POA	07/15/2010
**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 shares were omitted from the reporting person's Form 3, and were also omitted from three Forms 4 filed by the reporting person after her original Form 3.

Remarks:

krawcheck.TXT

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.