## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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 Ty	pe Response	s)														
Name and Address of Reporting Person *			2. Issuer Name and Ticker or Trading Symbol 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			3. Date of Earliest Transaction (Month/Day/Year) 09/30/2010								X Officer (give title below) Other (specify below) Pres, Cnsmr& Smll Bus Bkg					
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line)  _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person					
	OTTE, NC	28255									-	rorm med e	y wore than or	ic Reporting 1 crsc	11	
(City	y)	(State)	(Zip)			T	able I -	Non-Deri	vative S	Securiti	es Acquir	red, Dispose	d of, or Bei	neficially Owi	ied	
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		,	(Instr. 8	(	4. Securities Ad (A) or Disposed (Instr. 3, 4 and		1 of (D) 5)	Beneficially Reported Tr	. Amount of Securities Beneficially Owned Following Reported Transaction(s) Instr. 3 and 4)		Ownership orm: Direct (D)	Beneficial Ownership		
							Code	. v	Amount	(A) or (D)	r Price			(		(Instr. 4)
Commor	Stock		09/30/2010				М	9	9,387	A	\$ 0 (1)	83,782		I	)	
Commor	Stock		09/30/2010				D	!	9,387	D	\$ 13.1	74,395		I	)	
Commor	Stock											17,756		I		By Spouse
Commor	Stock											5,132.13		I		Thrift Trust
Reminder:	Report on a s	separate line for eac	ch class of securitie	Derivativ	e Se	curiti	es Acqu	Person contai form of	ns who ned in lisplays	this fo s a cui	orm are normare normalized	alid OMB c	d to respo	nd unless th		474 (9-02)
	I .	I		(e.g., puts	, cal	T .	ŕ	•					l	1	. 1	1
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, i ) any (Month/Day/Yea	Code		of Der Sect Acq (A) Disj of (I	posed D) tr. 3, 4,	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)			9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	(Instr. 4)
				Code	V	(A)	(D)	Date Exercisal		viration e	Title	Amount or Number of Shares				
Stock	\$ 0 <u>(1)</u>	09/30/2010		М			9,387	(2)		<u>(2)</u>	Commo	1938/	\$ 0 (1)	253,453	D	

Other

## Signatures

Price Joe L

Reporting Owner Name / Address

100 NORTH TRYON STREET

CHARLOTTE, NC 28255

Joe L. Price/Roger C. McClary POA	10/01

10/01/2010

10%

Owner

Director

Relationships

Pres, Cnsmr& Smll Bus Bkg

Officer

**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) Each Stock Unit is the economic equivalent of one share of Bank of America common stock.
  - The Stock Units were awarded on November 30, 2009 and December 31, 2009 pursuant to a Stock Unit Award Agreement which is exempt under Rule 16b-3(d). These units vested
- (2) upon grant and are payable solely in cash as follows: in 36 monthly installments beginning January 2011, provided that payments would be accelerated by twelve months upon repayment of our TARP financing. As a result of our repayment of all TARP financing in December 2009, the payment schedule was accelerated to 36 monthly installments

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.