FORM 5

Form 4 Transactions

Reported

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 3 Holdings Reported

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

	OMB APPROVAL						
C	OMB Number:	3235-0362					
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lh	iours per response	1.0					

ANNUAL 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 * RYAN THOMAS M			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) X Director 10% Owner			
(Last) CVS CORPORATION	(First) ON, ONE CV		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2004					Officer (give title below)	Other (specify be	elow)	
WOONSOCKET, R	(Street) I 02895	4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Reporting (check applicable line) _X_ Form Filed by One Reporting Person Form Filed by More than One Reporting Person				
(City)	(State)	(Zip)	Ta	ble I - Non-Der	ivative Se	curities	Acqui	ired, Disposed of, or Beneficially C	wned		
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execution Date, if	3. Transaction Code (Instr. 8)	(A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)	Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4) Ownership of Form: Direct (D) or Indirect (I)			
Common Stock		04/01/2004		<u>J⁽¹⁾</u>	124	A	\$ (1)	3,260 (2)	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form $\,$ SEC 2270 (9-02) are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	Conversion	Execution Date, if	Code (Instr. 8)	5. Numl of Deriv Secur Acqu (A) o Dispo of (D (Instr 4, and	vative rities ired or osed o)	6. Date Exer and Expirati (Month/Day	on Date	7. Title and of Underlyin Securities (Instr. 3 and	ng	Derivative Security (Instr. 5)	of Derivative Securities Beneficially Owned at End of Issuer's	Derivative	Beneficial
				(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Phantom Stock	\$ 0					<u>(4)</u>	<u>(4)</u>	Common Stock			4,729.91 (2) (3)	D	
Director Stock Unit Plan	\$ 0					<u>(6)</u>	(6)	Common Stock			22,178.87 (2) (5)	D	

Reporting Owners

Panarting Owner Name /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
RYAN THOMAS M CVS CORPORATION ONE CVS DRIVE WOONSOCKET, RI 02895	X						

Signatures

Thomas M. Ryan/Roger C. McClary POA

02/09/2005

**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) 124 shares were not included in the reporting person's Form 3 filed on April 1, 2004 reporting his initial holdings.
- (2) The securities included in this report and future reports reflect the Company's 2 for 1 stock split on August 27, 2004.
- (3) Includes 92.50 phantom stock units acquired in 2004 with reinvested dividend equivalents under the Bank of America Directors' Stock Plan.
- (4) Phantom stock units may be settled in cash upon death or termination of service as a director.
- (5) Includes 432.91 units acquired in 2004 with reinvested dividend equivalents under the Fleet Directors Deferred Compensation and S tock Unit Plan, which may be settled in stock upon death or termination of service as a director.
- (6) Director deferral plan units may be settled in stock upon death or termination of service as a director.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.