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BLACKROCK NEW YORK MUNICIPAL BOND TRUST

Form 3

February 10, 2009

FORM 3

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

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement BLACKROCK NEW YORK MUNICIPAL BOND **BANK OF AMERICA CORP** (Month/Day/Year) TRUST [BQH] /DE/ 01/30/2009 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) **BANK OF AMERICA** (Check all applicable) CORPORATE CENTER, 100 N TRYON STREET Director __X__ 10% Owner (Street) Officer Other 6. Individual or Joint/Group (give title below) (specify below) Filing(Check Applicable Line) Form filed by One Reporting Person CHARLOTTE, NCÂ 28255 _X_ Form filed by More than One Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities 4. Nature of Indirect Beneficial 1. Title of Security Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) **Auction Rate Preferred** 93 (1) Ι By Subsidiary Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a

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

currently valid OMB control number.

1. Title of Derivative Security
(Instr. 4)

2. Date Exercisable and Expiration Date Expiration Date (Month/Day/Year)

2. Date Exercisable and Expiration Date (Month/Day/Year)

3. Title and Amount of Exercise Underlying Ownership or Exercise Form of (Instr. 5)

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		(Instr. 4)		Price of	Derivative
Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address		Relationships			
1	Director	10% Owner	Officer	Other	
BANK OF AMERICA CORP /DE/ BANK OF AMERICA CORPORATE CENTER 100 N TRYON STREET CHARLOTTE, NC 28255	Â	ÂX	Â	Â	
MERRILL LYNCH, PIERCE, FENNER & SMITH INC. 4 WORLD FINANCIAL CENTER NORTH TOWER NEW YORK, NY 10080	Â	ÂX	Â	Â	
Signatures					
/s/ Debra I. Cho, Senior Vice President, Bank of America Corporation					
**Signature of Reporting Person				Date	
/s/ Pia Thompson, Assistant Secretary, Merrill Lynch, Pierc Smith, Inc.	Pia Thompson, Assistant Secretary, Merrill Lynch, Pierce, Fenner & hith, Inc.				

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 5(b)(v).

**Signature of Reporting Person

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

The Auction Rate Preferred Shares ("Shares") reported in Table 1 represent 93 Shares beneficially owned by Merrill Lynch, Pierce,

Date

(1) Fenner & Smith, Inc. ("MLPFS"). MLPFS is an indirect, wholly owned subsidiary of Bank of America Corporation ("Bank of America").

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Remarks:

The Shares reported herein represent Bank of America's combined holdings in multiple series of auct securities of the issuer, which are treated herein as one class of securities in accordance with th Securities-Global Exemptive Relief no-action letter issued by the Securities and Exchange Commission. 2008. Â Bank of America undertakes to provide upon request by the SEC, the issuer or a secur complete information regarding the number of equity securities of the issuer purchased or sold at Â date of all transactions in such securities that occurred after Bank of America became a 10% ov this filing.

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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