PIMCO Floating Rate Strategy Fund Form 4 October 09, 2009

October 09, 2	2009											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION										OMB APPROVAL		
Washington, D.C. 20549										3235-	0287	
Check thi if no long subject to Section 1 Form 4 or Form 5 obligatior	6. Filed purs	CHANGES IN BENEFICIAL OW SECURITIES ection 16(a) of the Securities Exchange					ge Act of 1934,	Estimated burden ho response.	ted average hours per			
may conti <i>See</i> Instru 1(b).	inue. Section 17(2 action			ility Holc vestment	•	· ·	•	of 1935 or Section 40	on			
(Print or Type R	Responses)											
			2. Issuer Name <b>and</b> Ticker or Trading Symbol PIMCO Floating Rate Strategy Fund [PFN]					5. Relationship of Reporting Person(s) to Issuer				
	(Check all applicable)											
(M				3. Date of Earliest Transaction (Month/Day/Year) 10/05/2009				Director     X10% Owner       Officer (give title     Other (specify below)				
	TE CENTER, 100		10/03/20	009								
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person							
CHARLOTTE, NC 28255X_Form filed by M Person					More than One	Reporting						
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Ac	quired, Disposed o	of, or Benefici	ally Owned	1	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deema Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	4. Securities Acquired r(A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price			SecuritiesOBeneficiallyFOwned(i)FollowingIii	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Ownership	l	
Common Stock	10/05/2009			Р	12	A	\$ 9.87	12	I	By Subsidia	ury	
Common Stock	10/05/2009			S	12	D	\$ 9.35	0	I	By Subsidia	ary	

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 are not required to respond unless the form displays a currently valid OMB control number.

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 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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amou Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>		Relationsh			
		10% Owner	Officer	Other	
BANK OF AMERICA CORP /DE/ BANK OF AMERICA CORPORATE CENTER 100 N TRYON ST CHARLOTTE, NC 28255		Х			
MERRILL LYNCH, PIERCE, FENNER & SMITH INC. 4 WORLD FINANCIAL CENTER NORTH TOWER NEW YORK, NY 10080		Х			
Signatures					
Bank of America Corporation, By:/s/Angelina L. Richardson, Vice President					
<u>**</u> Signature of Reporting Person					
Merrill Lynch, Pierce, Fenner & Smith Incorporated, By:/s/Adam Strouse, Attorney-In-Fact					
<u>**</u> 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).

## **Remarks:**

The transactions reported on this Form 4 were effected by Merrill Lynch, Pierce, Fenner & Smith Incorporated, an indirect, where the second se

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.