#### Edgar Filing: BLACKROCK MUNIHOLDINGS NEW JERSEY INSURED FUND, INC. - Form 3 BLACKROCK MUNIHOLDINGS NEW JERSEY INSURED FUND, INC. Form 3 November 09, 2007 UNITED STATES SECURITIES AND EXCHANGE COMMISSION **OMB APPROVAL** FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Expires: 2005 **SECURITIES** Estimated average burden hours per Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, response... 0.5 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 MUNIHOLDINGS NEW JERSEY FLYNN JAMES T (Month/Day/Year) **INSURED FUND, INC. [MUJ]** 11/01/2007 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year)

### 40 EAST 52ND STREET

(Street)

## NEW YORK, NYÂ 10022

(City)

1. Title of Security (Instr. 4)

(State) (Zip)

(Instr. 4)

#### Table I - Non-Derivative Securities Beneficially Owned 2. Amount of Securities 3. Beneficially Owned Ownership

\_X\_ Director

Officer

(Check all applicable)

(give title below) (specify below)

Form:

Direct (D) or Indirect (I) (Instr. 5)

SEC 1473 (7-02)

10% Owner

Other

4. Nature of Indirect Beneficial Ownership (Instr. 5)

Reporting Person

Person

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting

\_ Form filed by More than One

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.

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security		4. Conversion or Exercise Price of	5. Ownership Form of	6. Nature of Indirect Beneficial Ownership (Instr. 5)
			(Instr. 4)			Derivative	
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect	
						(II)	

(Instr. 5)

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships				
	Director	10% Owner	Officer	Other	
FLYNN JAMES T 40 EAST 52ND STREET NEW YORK, NY 10022	ÂX	Â	Â	Â	
Signatures					
/s/ Vincent B. Tritto, as Attorney-in-Fact	11/01/2007				
**Signature of Reporting Person	Date				

# **Explanation of Responses:**

## No securities are beneficially owned

- \* 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).

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.