Edgar Filing:	NUVEEN I	NSURED	MUNICIPAL	OPPORTUN	ITY FUND	INC - Fo	orm 4

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NUVEEN INSURED MUNICIPAL OPPORTUNITY FUND INC												
Form 4												
December 0												
FORM	14 UNITED	статрс	SECU	DITIES A	ND FY	СНА	NCF	COMMISSION	r	PPROVAL		
	UNITED	SIAILS		shington,			INGE (OMB Number:	3235-0287		
Check th										January 31,		
if no lon subject t		STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							Expires: Estimated	2005 average		
Section	16.	SECURITIES								urs per		
Form 4 o Form 5	Filed pur	suant to S	Section 1	response	. 0.5							
obligatio	ons Section 17(•	f 1935 or Sectio	n			
may con <i>See</i> Instr	unue.			vestment	•	-	•					
1(b).												
(Print or Type	Responses)											
(Time of Type	(csponses)											
	Address of Reporting		2. Issue	r Name and	I Ticker or	Tradi	ng	5. Relationship of	Reporting Person(s) to			
BANK OF	AMERICA COR	P /DE/	Symbol					Issuer				
	NUVEEN INSURED MUNICIPAL OPPORTUNITY FUND INC [NIO] (Check								ck all applicable)			
(INC	[NIO]			~ ~		
(Last)	(First) (N	Middle)		3. Date of Earliest Transaction				Director _X 10% Owner Officer (give title Other (specify				
BANK OF AMERICA 12/01/2009						below)	below)					
CORPORATE CENTER, 100 N												
TRYON ST	ſ											
	(Street) 4. If Amendment, Date Original 6. Individual or Jo						bint/Group Filing(Check					
Filed(Month/Day/Year) Applicable Line) Form filed by O							ne Reporting Person					
CHARLOT	TE, NC 28255							_X_ Form filed by				
		(Zin)						Person				
(City)	· · ·	(Zip)		le I - Non-I			-	uired, Disposed o		ally Owned		
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deem Execution		3. Transactio	4. Securi		-	5. Amount of Securities	6. Ownership	7. Nature of Indirect		
(Instr. 3)	(Wohn Day Tear)	any	Date, II	Code	(Instr. 3,			Beneficially	Form: Direct	Beneficial		
		(Month/D	ay/Year)	(Instr. 8)				Owned Following	(D) or Indirect (I)	Ownership (Instr. 4)		
						()		Reported	(Instr. 4)	(11150.4)		
						(A) or		Transaction(s)				
a				Code V	Amount	(D)	Price	(Instr. 3 and 4)		-		
Common Stock	12/01/2009	12/01/20	009	Р	45	А	\$ 13.39	45	Ι	By		
										Subsidiary		
Common Stock	12/01/2009	12/01/20	009	S	45	D	\$ 13.36	0	I	By		
Stock							15.30			Subsidiary		

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

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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. Transactiv Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Unde Secur	int of rlying	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

Reporting Owner Name / Address							
	Director	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							
Signatures							
Bank of America Corporation, By:/s/Debra I. Cho, Title: Senior Vice President							
**Signature of Reporting Person							
Merrill Lynch, Pierce, Fenner & Smith Incorporated, By:/s/Robert M. Shine, Title: Attorney-In-Fact							
**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.