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

OMB APPROVAL					
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per response	0.5				

subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

### 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

(Print or Type Respo	nses)														
1. Name and Address of Reporting Person * BANK OF AMERICA CORP /DE/				2. Issuer Name and Ticker or Trading Symbol NUVEEN INSURED MUNICIPAL OPPORTUNITY FUND INC [NIO]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner Officer (give title below) Other (specify below)					
(Last) (First) (Middle) BANK OF AMERICA CORPORATE CENTER, 100 N TRYON ST				3. Date of Earliest Transaction (Month/Day/Year) 12/01/2009											
(Street) CHARLOTTE, NC 28255				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person  X_Form filed by More than One Reporting Person					
(City)	(5	State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
(Instr. 3)		2. Transaction Date (Month/Day/Year	2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form:	7. Nature of Indirect Beneficial Ownership	
			(Month/Day/ Ye	ar)	Code V		Amount (A) or (D)		Price					(Instr. 4)	
Common Stock 12/01/200		12/01/2009	12/01/2009		P		45	A	\$ 13.39	45				By Subsidiary	
Common Stock 12/01/2009			12/01/2009	12/01/2009		S		45	D	\$ 13.36	0			1	By Subsidiary
Reminder: Report or	n a separate lin	e for each class of se	curities beneficially	owned directly or	indire		form		required	to respo	collection of information			SEG	C 1474 (9-02)
			Table	II - Derivative Se (e.g., puts, cal							wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	sion Date (Month/Day/Year) if ive	Execution Date, if	Code (Instr. 8) De (A (D		Number of erivative eccurities Acquired (A) or Disposed of (D) nstr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		Unde	tle and Amount of orlying Securities or. 3 and 4)	ring Securities Derivative	9. Number of Derivative Securities Beneficially Owned Following	Ownershi Form of Derivative Security: Direct (D)	
				Code V	(A)	) (D)	١,	Date Exercisable	Expirat Date	Title	Amount or Number of Shares		Reported Transaction(s (Instr. 4)	or Indirect (I) (Instr. 4)	
Reporting	Owners	S													

	Relationships						
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		X					
MERRILL LYNCH, PIERCE, FENNER & SMITH INC. 4 WORLD FINANCIAL CENTER NORTH TOWER NEW YORK, NY 10080		X					

# **Signatures**

Bank of America Corporation, By:/s/Debra I. Cho, Title: Senior Vice President	12/04/2009
**Signature of Reporting Person	Date
Merrill Lynch, Pierce, Fenner & Smith Incorporated, By:/s/Robert M. Shine, Title: Attorney-In-Fact	12/04/2009
**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).

The transactions reported on this Form 4 were effected by Merrill Lynch, Pierce, Fenner & Smith Incorporated, an indirect, wholly owned subsidiary of Bank of America Corporation.

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.