STEWART BRIAN D

Form 3

February	13	2003	2
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	UNITED STATES SECURITIES AND EXCHANGE COMMISSION					
	TEMENT OF BENEFICIAL OWNERSHIP OF Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the				OMD Normalism	
SECURITIES Filed pursuant to Public Utility					OMB Number: 3235-0104 Expires: December 31,	
					2001 Estimated average burden	
	y Act of 1935 or Section 30(f)	of the	Investment Company Act		hours per response 0.5	
Name and Address of Reportin Stewart, Brian	ng Person*	2. Date of Event Requiring Statement (Month/Day/Year)	4. Issuer Name and Ticker or Trading Symbol MuniHoldings New York Insured Fund MHN		6. If Amendment, Date of Original (Month/Day/Year)	
(Last) (First)	(Middle)	December 04, 2002	_	1	()	7. Individual or Joint/Group
c/o Fund Asset Management P.O. Box 9011				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		Filing (Check Applicable Line) X Individual Filing Joint/Group Filing
(Street)		(voluntary)	(Спеск ан аррисаоте)			
Princeton, NJ 08543-9011			Director 10% Owner			
(City) (State)	(Zip)		Othe	omitte	<u>X</u>	
			_	cer/Other eription Secretary to	the Issuer	
Table I - Non-Do	erivative Securitie	es Beneficially Owned				
1. Title of Security (Instr. 4)		2. Amount of Securities Beneficially Owned (Instr. 4)		3. Ownership Form : (D) Direct (I) Indirect (Instr. 5)	4. Nature o (Instr. 5)	f Beneficial Ownership
Common			0.00	D		

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Form 3 (continued)

	ities Beneficially Owned (e.g., ions, convertible securities)				
1. Title of Derivative Security (Instr. 4)	Date Exercisable(DE) and Expiration Date(ED) 3. Title and Amount of of Underlying Security (Instr. 4) Instr. 4)		4. Conversion or Exercise Price	5. Ownership Form (D) Direct or (I) Indirect (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)

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Explanation of Responses :		•	

** 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.

** Signature of Reporting Person

Date

Catherine A. Johnston, Power of Attorney Brian Stewart

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