Muniyield Pennsylvania Insured Fund Form 3 November 09, 2007 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Date

Exercisable

Expiration

Title

Date

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, 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 Person <u>*</u> BURKE DONALD C	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol Muniyield Pennsylvania Insured Fund [MPA]				
(Last) (First) (Middl	e) 11/01/2007	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
40 EAST 52ND STREET				× ×	,	
(Street)		(Check all applicable) 6. Individual or Joint/Gr			lual or Joint/Group	
NEW YORK, NY 10022		Director X Officer (give title below) Presider	10% Ow Other (specify below) nt and CEO	_X_ Form Person	eck Applicable Line) filed by One Reporting filed by More than One Person	
(City) (State) (Zip)	Table I - 1	Non-Derivative Securities Beneficially Owned				
1.Title of Security (Instr. 4)	2. Amount o Beneficially (Instr. 4)	v Owned	Ownership O	Nature of Ind wnership nstr. 5)	irect Beneficial	
Reminder: Report on a separate line owned directly or indirectly.	for each class of securities benefic	cially SE	C 1473 (7-02)			
information or required to re	o respond to the collection of contained in this form are no espond unless the form disp id OMB control number.	t				
Table II - Derivative	Securities Beneficially Owned (e.g., puts, calls, w	varrants, optior	ns, convertible	e securities)	
	Expiration Date Securit	e and Amount of ties Underlying tive Security 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	

Security

Amount or

Number of

Shares

Direct (D)

or Indirect

(Instr. 5)

(I)

OMB 3235-0104 Number: January 31, 2005 Estimated average burden hours per response... 0.5

Reporting Owners

Reporting Owner Name / Address	Relationships				
1	Director	10% Owner	Officer	Other	
BURKE DONALD C 40 EAST 52ND STREET NEW YORK, NY 10022	Â	Â	President and CEO	Â	
Signatures					
/s/ Vincent B. Tritto, as Attorney-in-Fact	11/01/2007				
**Signature of Reporting Person		Da	te		
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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.