### BLACKROCK CALIFORNIA INSURED MUNICIPAL INCOME TRUST Form 3 February 10, 2009 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB

### 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> UBS AG			2. Date of Event Requiring Statement (Month/Day/Year) 01/31/2009		3. Issuer Name and Ticker or Trading Symbol BLACKROCK CALIFORNIA INSURED MUNICIPAI INCOME TRUST [BCK]				
(Last)	(First)	(Middle)	01/31/2009		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
BAHNHOFS BOX CH-802			(Chec	k all applicable)					
(Street)				Director Officer (give title below		erOther		<ul> <li>6. Individual or Joint/Group</li> <li>Filing(Check Applicable Line)</li> <li>_X_ Form filed by One Reporting</li> </ul>	
ZURICH, V8Â								Person Form filed by More than One Reporting Person	
(City)	(State)	(Zip)		Table I - N	Non-Deriva	ative Securiti	es Be	neficially Owned	
1.Title of Securi (Instr. 4)	ty			2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr	*	
Auction Prefe [092484203]		k (CUSIP I	No[s].	402 <u>(2)</u>		Ι	By s	ubsidiary - see footnote $(1)$	
Reminder: Report owned directly o	-		ch class of secu	urities benefic	ially	SEC 1473 (7-02	.)		
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#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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

3235-0104

January 31,

2005

0.5

Number:

Expires:

response ...

Estimated average burden hours per

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Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)
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# **Reporting Owners**

Reporting Owner Name / Add	ress	Relationships					
1		10% Owner	Officer	Other			
UBS AG BAHNHOFSTRASSE 45 PO BOX CH-8021 ZURICH, V8Â	Â	X	Â	Â			
Signatures							
/s/ Anthony DeFilippis	02/10/2009						
<u>**</u> Signature of Reporting Person	Date						
/s/ Joseph Gallichio	02/10/2009						
<u>**</u> Signature of	Date						

## **Explanation of Responses:**

- \* 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).

This Statement is filed by UBS AG for the benefit and on behalf of UBS Securities LLC and UBS Financial Services Inc., two-wholly owned subsidiaries of UBS AG to which UBS AG has delegated portions of its performance obligations with respect to the Auction Rate

Securities Rights issued by UBS AG to certain clients and pursuant to which the securities reported herein have been purchased from such clients.

(2) Pursuant to the Global Relief Letter referred to below, this filing reports holdings of the Series of Auction Preferred Stock identified in

<sup>(2)</sup> Item 1 of this Table I on an aggregated basis.

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### **Remarks:**

Reporting Person

The Shares reported herein represent UBS AG's combined holdings in multiple series of auction prefa are treated herein as one class of securities in accordance with the Auction Rate Securities --Â Glob Relief Letter") issued by the staff of the Securities and Exchange Commission (SEC) on SeptemberÂ undertakes to provide, upon request by the SEC staff, the issuer, or a security holder of the issue the number of securities identified in Table I purchased and sold at each different price and dateÂ on which beneficial ownership exceeded ten percent and January 31, 2009, as required by the Globa

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.