► See separate instructions.

Part	Reporting	Issuer				
1 Issue	er's name		2 Issuer's employer identification number (EIN) 38-3645605			
BLACKE	ROCK NEW YORK	MUNICIPAL BOND				
		ditional information	5 Email address of contact			
BlackRo	ock Advisors		mutual funds ff www@blackrock.com			
		P.O. box if mail is not	7 City, town, or post office, state, and ZIP code of contact			
	ancial Center			ification and description	Boston, MA 02111	
8 Date	e of action					
	23, 2020		ment Company			
10 CUS	SIP number	11 Serial number(	s)	12 Ticker symbol	13 Account number(s)	
Soc	o Statomont 1	n/o		POU	2/2	
Part II	e Statement 1 Organizati	n/a onal Action Atta	ch additional	BQH statements if needed S	hee back of form for additional questions.	
each dis	escribe the quantita are or as a percent	tes a non-taxable re tive effect of the orga age of old basis ▶ <u>T</u>	anizational act	ion on the basis of the secu	rity in the hands of a U.S. taxpayer as an adjustment per titutes a non-taxable return of capital will decrease a n-taxable return of capital.	
val ended O	luation dates $\blacktriangleright$ Iss October 23, 2020.	uer's current and ac The non-taxable retu	cumulated eaurn of capital	arnings and profits were c	ulation, such as the market values of securities and the compared to distributions paid during the taxable period distributions paid during the taxable period ended s under IRC Section 316.	
val ended O	luation dates $\blacktriangleright$ Iss October 23, 2020.	uer's current and ac The non-taxable retu	cumulated eaurn of capital	arnings and profits were c represents the amount of	compared to c distributions	

Form 893	37 (12-2	.017)				Page <b>2</b>
Part		Drganizational Action (continued)				
		applicable Internal Revenue Code section(s) and subsection(s) upon which the tax to nue Code Sections 301, 316, 852	reatment	t is based <b>Þ</b>	•	
<b>18</b> C	an any	resulting loss be recognized? ► No				
	,	<u></u>				
<b>19</b> Pi	rovide	any other information necessary to implement the adjustment, such as the reportab	le tax ve	ar 🕨		
		It 1 for the per share amounts and dates of distributions impacted by this organized				
		tional action is reportable with respect to calendar year 2020.				
	Unde belief	r penalties of perjury, I declare that I have examined this return, including accompanying sche it is true, correct, and complete. Declaration of preparer (other than officer) is based on all infor	dules and mation of	statements which prepa	, and to the bes arer has any kno	t of my knowledge and wledge.
Sign		Ronald Fisher				
Here	Signa		12/2/20			
	l		Date 🕨			
_	Print	/our name ► Ronald Fisher	Title 🕨	<u>As</u> sistant	Treasurer	
Paid		Print/Type preparer's name Preparer's signature	Date		Check ✓ if	PTIN
Prepa	arer	Baruch J. Cohen Baruch Q. Cohen	11/3	30/2020	self-employed	
Use C		Firm's name   Deloitte Tax LLP			Firm's EIN ►	86-1065772
	-	Firm's address ► 30 Rockefeller Plaza, New York, NY 10112-0015			Phone no.	212-492-4000

Send Form 8937 (including accompanying statements) to: Department of the Treasury, Internal Revenue Service, Ogden, UT 84201-0054

## STATEMENT 1

## BLACKROCK NEW YORK MUNICIPAL BOND TRUST F.E.I.N. 38-3645605 FOR THE TAXABLE PERIOD ENDED OCTOBER 23, 2020 <u>ATTACHMENT TO FORM 8937</u>

## NON-TAXABLE RETURN OF CAPITAL

Payable Date

Per Share Reduction of Basis in Stock

10/01/2020 10/19/2020 0.008922446 0.020538322