


A Systematic Exchange Plan is a convenient way to invest a lump sum in one fund, and then allocate fixed dollar amounts to one or more other funds within your account automatically on a monthly, quarterly, semi-annual or annual basis.

Send this application, along with any other required documents, to:

- ▶ **Regular mail:**
BlackRock Funds
P.O. Box 9819
Providence, RI 02940
- ▶ **Overnight mail:**
BlackRock Funds
4400 Computer Drive
Westborough, MA 01581

Fax: (508) 599-1788

- ▶ **Be sure to use the right form!** BlackRock 529 accounts have their own forms.
- ▶ The minimum exchange per fund (and per draft) is \$50.00.
- ▶ The fund you add this option to should have a minimum balance of \$10,000.00 (lower balances may be allowed).

 **Questions?** Call us at **1-800-441-7762**, Monday through Friday between 8:00 AM and 6:00 PM ET or visit us online at www.blackrock.com.

1. Current Account Information

First, please tell us about the account(s) that you wish to make the change(s) on:

_____ Full name of primary account owner (or trustee, custodian, guardian, etc.)

_____ Contact telephone number

_____ Full name of secondary account owner (or trustee, minor, etc.)

_____ Contact telephone number

OR

_____ Federal tax ID or Social Security number

_____ BlackRock account number(s)

_____ Reference number (if applicable)

2. Systematic Exchange Information

Tell us how you'd like to set up your Systematic Exchange Plan here. You may exchange from one fund into up to four other funds (**minimum of \$50 per fund**). If you do not specify a draft date, we will begin your Systematic Exchange Plan on the **25th** of the month.

Exchange FROM the following Fund:

_____ \$ _____

Please begin on _____
Date(mm/dd/yyyy)

Exchange TO the following Fund(s):	Allocation:	Please exchange:	Please update my existing Automatic Invest Plan on "from" fund as follows:
_____	_____ %	<input type="checkbox"/> Monthly	<input type="checkbox"/> Keep the AIP on the original Fund
_____	_____ %	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Move the AIP to the new fund
_____	_____ %	<input type="checkbox"/> Semi-Annually	<input type="checkbox"/> Stop the AIP
_____	_____ %	<input type="checkbox"/> Annually	
Total allocation =		_____ 100%	

Systematic Exchange # 2

You may add an additional Systematic Exchange from another fund if you would like (the "From Fund" should be different than the one listed above).

Exchange FROM the following Fund:

_____ \$ _____ Please begin on _____
Date(mm/dd/yyyy)

Exchange TO the following Fund(s):	Allocation	Please exchange:	Please update my existing Automatic Invest Plan on "from" fund as follows:
_____	_____ %	<input type="checkbox"/> Monthly	<input type="checkbox"/> Keep the AIP on the original Fund
_____	_____ %	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Move the AIP to the new fund
_____	_____ %	<input type="checkbox"/> Semi-Annually	<input type="checkbox"/> Stop the AIP
_____	_____ %	<input type="checkbox"/> Annually	
Total allocation		100%	

4. Signatures

Each registered shareholder must sign this form to authorize the above changes. If a responsible individual, such as a Power of Attorney, executor, guardian, custodian, etc., is signing on behalf of an account owner, please include their capacity below the signature. If not already on file, we may request documentation of such capacity.

I acknowledge that:

- ▶ I certify that I am authorized to make these elections and that all information provided is true and accurate.
- ▶ I have received and read the current prospectus(es) for all funds in which I am investing.
- ▶ I have the right to cancel any service at any time by writing to BlackRock.



Signature of existing owner / trustee / custodian, etc.



Signature of existing co-owner / trustee / custodian, etc.

Title / Capacity (if any)

Date (mm/dd/yyyy)

Title / Capacity (if any)

Date (mm/dd/yyyy)



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Not FDIC Insured | May Lose Value | No Bank Guarantee

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