

## Contribution Slip

▶ **Regular mail:**  
BlackRock 529  
P.O. Box 9783  
Providence, RI 02940

▶ **Overnight mail:**  
BlackRock 529  
4400 Computer Drive  
Westborough, MA 01581

Please complete & include this slip along with your check (payable to “BlackRock 529”) to contribute to your 529.

\_\_\_\_\_ Full name of Account Owner      \_\_\_\_\_ Beneficiary name      \_\_\_\_\_ Account number

- Use the allocation currently on my account (if none on file, we will divide it equally)
- Allocate my contribution amount equally between all open Investment Options (must meet minimum of \$25 per Investment Option). If no allocation is selected, we will use this method to allocate the contribution.

**OR:** Complete the section below to tell us how you wish to allocate this contribution.

Investment Option Name	Class			Contribution Amount	
	A	C	I		
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	or _____ %
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	or _____ %
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	or _____ %
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	or _____ %
	<b>Total =</b>			\$ _____	= <u>100%</u>

- Please use this allocation for all future contributions.

Questions? Call **866-529-8582** Monday through Friday 8:00AM - 6:00PM ET or online at [blackrock.com/collegeadvantage](http://blackrock.com/collegeadvantage).

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