

Use this form to request a **one-time distribution** from your Traditional, SEP, SIMPLE, Rollover, Inherited, or Roth IRA at BlackRock.

- ▶ This form can also be used for a removal of excess contribution, transfer due to divorce, or to request a rollover to another Financial Institution.
- ▶ For Required Minimum Distributions or other systematic withdrawals use our **IRA Systematic Distribution Request Form**.
- ▶ **Transfer of Assets or Direct Rollover Requests:** To request a transfer of assets or direct rollover between custodians, use our **Transfer of Assets / Direct Rollover Form** and talk with your current custodian.
- ▶ Redemption requests in excess of \$100,000 for Investor Shares require a Medallion Guarantee Stamp.

Mail 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

 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 request the redemption from:

Full name of IRA owner

Contact telephone number

Social Security Number

BlackRock account number(s)

Reference number (if applicable)

2a. Distribution Election

To help ensure your distribution is processed correctly and is reported to the IRS properly, please complete this section to tell us more about the type of distribution.

- Normal Distribution from Traditional, Rollover, SEP, or SIMPLE IRA** – You are over the age of 59 ½
- Roth IRA Distributions:** You are over 59 ½ and this Distribution satisfies the 5-year holding period requirement (If “No”, then please check the applicable box below. These distributions will be considered premature if they are not due to disability.)
- Early (Premature) Distribution** – You are under the age of 59 ½ (including distributions due to medical expenses, health insurance premiums, higher education expenses, first time homebuyer expenses, or other reasons).
- Inherited IRA Distribution**
- Permanent Disability** – You certify that you are disabled within the meaning of 72(m)(7) of the Internal Revenue Code (An individual shall be considered disabled if he/she is unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or to be of long-continued and indefinite duration).
- Removal of excess contribution(s)** – Complete section 2b in its entirety.
- Direct Rollover to a qualified retirement plan, 401(k), TSP, 403(b), etc.** – You are certifying that the receiving custodian will accept the IRA assets issued. **(A Medallion Signature Guarantee may be required.)**
- Qualified Reservist Distribution.**
- Transfer Incident due to divorce or legal separation** – Additional documentation or Medallion Signature Guarantee stamp may be required.

2b. Return of Excess Contribution(s)

Amount of Excess: \$ _____

Tax year in which the excess contribution was made: _____

Date deposited: _____
Date (mm/dd/yyyy)

Multiple deposits between: _____ and _____
Date (mm/dd/yyyy) Date (mm/dd/yyyy)

- ▶ Earnings will be removed with the excess contribution if corrected before your federal income tax-return due date (including extensions), pursuant to Internal Revenue Code Section 408(d)(4) and Internal Revenue Service ("IRS") Publication 590. You may be subject to an IRS penalty of 6% for each year the excess remains in the account. In addition, the IRS may impose a 10% early distribution penalty on the earnings, if you are under age 59½.
- ▶ You will receive IRS Form 1099-R for the year in which the excess distribution takes place (not for the year in which the excess contribution was made). Consult IRS Publication 590 for more information pertaining to excess contributions. If you are subject to a federal penalty tax due to an excess contribution, you must file IRS Form 5329.
- ▶ For the purpose of the excess contribution, we will calculate the net income attributable ("NIA") to the contribution using the method provided in the IRS Final Regulations for Earnings Calculation for Returned or Re-characterized Contributions. This method calculates the NIA based on the actual earnings and losses of the IRA during the time it held the excess contribution. Please note that a negative NIA is permitted and, if applicable, will be deducted from the amount of the excess contribution.
- ▶ **Re-designating an excess contribution to a later tax year.** Please consult a tax advisor to review your specific situation and to determine your best course of action. If you should decide to carry over the excess contribution to a later year, DO NOT RETURN THIS FORM.

A) The excess is being corrected before your federal income tax-filing deadline (including extensions):

- Remove excess plus/minus net income attributable. Distribute according to instructions in **Section 2c.**
- Remove excess plus/minus net income attributable. Re-deposit as a current year contribution (not to exceed annual IRA contribution limit).

B) The excess is being corrected after your federal income tax-filing deadline (including extensions). Earnings on the excess will remain in the account.

- Remove excess and distribute according to instructions in **Section 2c.**
- Remove excess and re-deposit as a current year contribution (not to exceed annual IRA contribution limit)

2c. Distribution Amount and Allocation

Please check the appropriate box or box(es) and complete any required field(s). If you would like to close one or more of the funds within your account, please indicate "100%" in the amount field. Due to market fluctuations, attempting to estimate the redemption amount may cause a delay in processing or leave a remainder in the fund.

Total Distribution of ALL funds in the account(s) referenced above.
(NOTE: The annual \$15 IRA maintenance fee will be assessed on any total distribution.)

Partial Distribution of \$ _____ from the fund(s) indicated below.

Please distribute evenly across all funds.

Fund Name	Share Class				Distribution Amount	
	A	C	K*	Inst*		
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	or _____ %
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	or _____ %
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	or _____ %
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	or _____ %

Total Amount to invest: \$ _____ = 100 %
(Must include an estimated amount)

3. Fees, Sales Charges, and Tax Withholding Election (REQUIRED)

Distributions from IRAs and qualified retirement plans that are not eligible for rollover are subject to federal income tax withholding and may be subject to state withholding. You may affirmatively elect additional withholding or opt to NOT have withholding applied to your distributions. Federal tax withholding is required for accounts with a foreign address. Please consult a tax professional or your state's tax authority for additional information on your state requirements.

▶ Federal Tax Withholding

Federal income tax withholding is taken on any distribution, subject to the IRS withholding rules, at the rate of 10% from the gross payment amount even if it is excluded from gross income, unless an election is provided. The withholding procedure may result in excess payments to the IRS. Electing to have no federal taxes withheld from distributions or not having enough federal income tax withheld from distributions may cause you to be responsible for estimated tax. Under the estimated tax rules you may incur penalties if the estimated tax withholding payment is not sufficient. Please complete the section below, your election will remain in effect until the Custodian is notified in writing of a change.

Select one of the following:

- I elect **NOT** to withhold federal income tax Withhold 10% federal income tax Withhold _____% federal income tax
(Must be greater than 10% minimum)

▶ State Withholding

State income tax withholding requirements are determined by the state of your residence, if any. States with mandatory withholding may require state income tax to be withheld if withholding is taken for federal taxes or may mandate a fixed amount regardless of your federal tax election. Voluntary states allow you to determine if you would like state taxes withheld. Certain states are non-participatory and do not require income tax on retirement payments.

For Mandatory States Only:

For Voluntary States Only:

- I elect **NOT** to withhold state income Tax Withholding \$ _____ or _____% state income tax
- I elect to take _____% **in addition** to the Mandatory Withholding

Please indicate if you would like the proceeds of the redemption to be gross or net of fees, sales charges and/or withholding:

- Gross Net

Any fees, sales charges, etc. would be taken out of the *amount* requested (this lowers the amount you receive)

Any fees, sales charges, etc. would be taken from the remainder of the *fund*— (the amount you request is the amount you receive)

Please Note: If you do not make any indication, we will default to "Gross".

4a. Delivery Instructions

Complete the section below to tell us where to send your proceeds. If no option is selected, a check will be sent to your address of record by regular mail. For proper tax reporting, you must sign in **Section 5**.

- Send the distribution via check to my address of record.
 Send proceeds overnight? (\$15 fee) Waive signature for overnight delivery
- Send proceeds to my bank account by: **ACH** (No Fee. Arrives within 48-72 hours.)
 Wire (\$7.50 per fund. Received next business day.)

Complete this section below and **attach a bank statement, voided check, or savings deposit slip (showing the bank account number & registration)**. Your bank may have a different ABA # for wires and may charge you a fee to receive the wire. **(A Medallion Signature Guarantee will be required to send funds to a bank account not already on file.)**

Name of Bank

ABA routing number (9 digits)

Full name of bank account owner

Account number at your bank

Full name of joint bank account owner

- Checking Savings

4b. Alternate Address Information (Medallion Signature Guarantee May Be Required)

Complete this section ONLY if you selected to send the proceeds of your IRA distribution to **your** account at another custodian as a Direct Rollover (be sure to include a reference # or Account #, if applicable) or to distribute in a check to your former spouse (due to divorce).

NOTE: Do not use this form to request a "transfer in kind" (moving shares of a BlackRock fund to another company but remaining in the same BlackRock fund). First move the account into your name, then ask the receiving company how best to process that request.

Direct Rollovers: Type of plan receiving the assets:

- Traditional Roth SEP SIMPLE Inherited IRA Rollover IRA
 401(K) TSP 457 Plan Other: _____

Name of financial institution / brokerage

FBO: Full name of IRA account owner

OR Name of former spouse

Reference Number or Account Number

Street # Street name

City State ZIP Code

Your distribution will be sent via check regular mail to the address above. If you prefer it to be overnighted, check the box below.

- Send proceeds overnight? (\$15 fee) Waive signature for overnight delivery


NOTE: If not already on file with us, the former spouse must provide an **IRS Form W-9** to certify their tax ID in order for us to complete this request.

5. Signature and Authorization

Under penalties of perjury, I hereby attest that the above and the following facts are true and correct.

I acknowledge that:


- ▶ I am authorized to make these elections and that all information provided is true and accurate.
- ▶ That no tax or legal advice has been given to me by the Custodian (BNY Mellon Asset Servicing, Inc.), the Fund, or any agent of either of them, and that all decisions regarding the elections made on this form are my own.
- ▶ The Custodian is authorized to distribute funds from my account in the manner requested. The Fund may conclusively rely on this certification and authorization without further investigation or inquiry.
- ▶ I assume responsibility for any adverse consequences that may arise from the election(s) and agree that the Fund and their agents shall in no way be responsible, and shall be indemnified and held harmless, for any tax, legal or other consequences of the election(s) made on this form.

 _____
Signature of account owner/guardian/power of attorney/ etc.

Title / Capacity (if any)

Date(mm/dd/yyyy)

*Place any notary seal or
Medallion Signature Guarantee
stamphere*

 **Questions?** Call us at **1-800-441-7762** or visit us online at www.blackrock.com.

Not FDIC Insured | May Lose Value | No Bank Guarantee

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Lit. No. IRA-DIST-0919