

INSTRUCTIONS FOR COMPLETING THIS FORM

The purpose of this form is to indicate to BlackRock how you would like to claim your portion of your spouse's BlackRock IRA after they have passed away. You may use this form to transfer the account into your name, redeem the shares, or to rollover the assets to your IRA at other institution.

If you have any questions about how to invest your proceeds with BlackRock, you should speak with your financial advisor. You may also speak with a BlackRock representative for any information on our products or on how to complete this transfer / redemption request.

The following instructions will help you complete this form, however if you have any questions we encourage you to call us for assistance **1-800-441-7762**.

Important Notes Regarding this Form:

- ▶ As a spouse you have the option to either transfer this into an IRA account in your name or setup an Inherited IRA as a non-spouse and be subject to the Inherited IRA rules.
- ▶ Any distribution from an IRA is a tax reportable taxable event.
- ▶ BlackRock does not provide tax advice; if you have any questions about the tax consequences of distributions, we recommend that you speak with your financial advisor or tax professional prior to submitting this form to BlackRock.
- ▶ Redemption requests in excess of \$100,000 or being sent to new bank instructions may require a medallion guarantee stamp.
- ▶ If you would like to setup a Required Minimum Distribution "RMD", please complete and include our IRA Systematic Distribution Request Form.

Additional Documentation

Certain requests may require additional documentation to complete, including but not limited to:

- ▶ **Power of Attorney** – a recently dated copy of the power of attorney document; if adding the POA to the account, the BlackRock Power of Attorney Form must also be provided.
- ▶ **Estates** – document naming the executor/executrix, administrator, etc. of the estate of the deceased shareholder
- ▶ **2019:** PA and Puerto Rico also require an Affidavit of Domicile and/or Inheritance Tax Waiver.

Sections that are required on this application:

- ▶ **Sections 1,3,4,5,6, and 8 are required** in order for you to process a transfer of the account into your name, redeem the shares, or to rollover the assets to your IRA at other institution.
- ▶ **Section 4** is required so that we know how you would like to receive your portion.
- ▶ **Section 5** is required to distribute any outstanding Required Minimum Distributions "RMD" that were not redeem prior to decedents passing.
- ▶ **Section 6** is required to provide us with your Federal and or State Tax Withholding elections for distributions.
- ▶ **Section 8 (Signatures and Authorization)** is required to be signed by the named beneficiary or persons authorized if the named beneficiary is deceased.

Do I need to include a copy of a death certificate?

We would require a copy of the death certificate for each shareholder that has passed, unless you:

- ▶ are providing a document naming the executors/ executrix / administrator of the estate and have your signature medallion guaranteed

What if the deceased has uncashed checks from BlackRock Funds?

Please contact us at 1-800-441-7762 and a member of our service team can assist with your options.



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.

Use this form after the IRA owner has passed away to indicate to BlackRock how you would like to receive your portion of your spouse's BlackRock IRA. You may use this form to transfer the account into your name, redeem the shares, or to rollover the assets to an IRA in your name at other institution.

Be sure to use the right application! Business / Institutional clients, SIMPLE IRAs, Non-retirement, and BlackRock CollegeAdvantage® 529 accounts have their own applications.

- ▶ All information provided on each person listed on the account will be verified as required by the USA PATRIOT Act.

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 IRA owner who has passed:

_____ Full name of deceased account owner

_____ Date of death (mm/dd/yyyy)

_____ Social Security Number

_____ BlackRock account number

_____ BlackRock account number

Please check off the current account type(s):

- Traditional IRA** **Rollover IRA** **Roth IRA** **SEP IRA** **SIMPLE IRA**

2. Additional Documents Included

Please check off all additional documents you have included with this form:

- Death certificate Affidavit of Domicile Inheritance Tax Waiver IRA Systematic Distribution Request Form
- Reference number(s) _____ for any documents already received by BlackRock.

3. Spousal Beneficiary Information

We will need your full name (first, middle initial and last - exactly as it will be or is registered on the account), address, date of birth, and Social Security number. You must include a physical address here.

_____ Full name of IRA Beneficiary

_____ Street #

_____ Street name

_____ Social Security number

_____ City

_____ State

_____ ZIP Code

_____ Date of birth (mm/dd/yyyy)

_____ Contact telephone number

- Check here to use this as the address for mailings

4. Beneficiary Claim Election

Complete this section to inform us of how you would like to receive your assets from the original IRA account. Please carefully read all the options below before making a selection.

- I would like to treat this IRA as my own.
 - Please invest proceeds into my **existing** BlackRock IRA account: _____
 - Please invest proceeds into a new account, I have attached a **BlackRock IRA Account Application**.
- Please invest proceeds into a new account, I have attached a **BlackRock Inherited IRA Account Application**.
- Please process **total distribution** of the account and send me the proceeds.
- Please process a Direct Rollover to my IRA or Qualified Plan at another institution. **(Complete section 7b.)**

5. Required Minimum Distribution

Complete this section if account type is either Traditional, SEP, or Simple IRA and the deceased owner of the IRA was subject to Required Minimum Distributions “RMD”.

- Please **distribute** any outstanding **RMD** amounts due to the deceased owner in the year of their death to me.
- The deceased account owner has met their **RMD**. I do not need to take their **RMD**.

Please check the appropriate boxes and complete any required field. If you would like to fully redeem one or more of the fund positions, please indicate “100%” in the amount field. Due to market fluctuations, attempting to estimate a total redemption amount may cause a delay in processing or leave a remainder in the fund.

Now, please tell us how you wish to have your investment **allocated**:

- Please allocate **RMD** evenly across all fund positions.

Fund Name	Share Class				Amount Per Fund	
	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 _____ %
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____	or _____ %
Total Amount to Redeem:					\$ _____	or <u>100%</u>

6. Fees, Sales Charges, Tax Withholding Election (REQUIRED)

Please indicate if you would like the proceeds of the redemption to be gross or net of any fees or sales charges:

Gross

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

Net

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”.

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:

I elect **NOT** to withhold state income Tax
 I elect to take _____% **in addition** to the Mandatory Withholding

For Voluntary States Only:

Withholding \$ _____ or _____% state income tax

7a. Delivery Instructions (Medallion signature guarantee may be required)

Please check the appropriate box to tell us where to send your distribution.

- Send the proceeds by check to my address of record by: Regular Mail **OR** Overnight (\$15 fee)
- Send the proceeds of the distribution to bank instructions: ACH Wire (\$7.50 per fund) **(Proceed to section 7c)**
- Send the proceeds by CHECK to another Financial Institution **(Proceed to Section 7b)**

Please note: If you do not select an option, your distribution will be mailed in the form of a check to your address of record listed in **section 3**. If you are planning to redeem via Federal Wire, please contact your bank to confirm whether or not they assess a fee upon receipt of the funds.

8. Signature, Taxpayer Identification Certification 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 authorizing the transfer and/or redemption described above.
- ▶ There are no known disputes as to the persons entitled to a distribution under the non-probate transfer, or the amounts to be distributed to each person, and there are no known claims affecting the distribution requested.

Tax Certification - Under penalties of perjury, I/we certify that:

- ▶ The number shown on this form is the correct taxpayer identification number, and
- ▶ The investor is not subject to backup withholding because the investor: (a) is exempt from backup withholding, or (b) has not been notified by the Internal Revenue Service (IRS) that the Investor is subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified the investor that they are no longer subject to backup withholding, and
- ▶ The applicant is a U.S. person (including a U.S. resident alien) or
- ▶ Alternatively, under penalties of perjury, the applicant certifies that they are subject to withholding. If so, check here:
- ▶ The FATCA code(s) entered on this form (if any) indicating the investor is exempt from FATCA reporting is correct. CODE: _____

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

If your signature requires a medallion signature guarantee or notary stamp, it can be placed anywhere near the signature or in the box provided. Please refer to the instructions for this form or call our team with any questions prior to submitting this form.



Signature of beneficiary/guardian/Power of Attorney/ etc.

Title / Capacity (if any)

Date (mm/dd/yyyy)


*Place any notary seal or
Medallion Signature Guarantee
stamp here*

For Notary Public:

State of _____ County of _____

On this _____ day of _____, 20____, before me, the undersigned Notary Public, _____, personally appeared and proved through satisfactory evidence of Identification to be the person whose name is signed above and acknowledged by:

Signature of Notary Public

 **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.

Not FDIC Insured | May Lose Value | No Bank Guarantee

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