

▶ **BlackRock**

100 Bellevue Parkway, 4th Floor
Wilmington, DE 19809
Attn: Client Service Center

▶ **To place an order:**

Tel: 800-441-7450
Fax: 508-599-1899
Email: ops-callcenter@blackrock.com

Salesperson:

Account No:

US Entity Non-US Entity (appropriate IRS Form W-8 required)

Important Notice — Compliance With the US Patriot Act

To help the government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify and record information that identifies each registered owner of an account. What this means to you: Corporate applicants must provide a corporate resolution that grants the undersigned the full right, power and authority to execute this Account Application. You may provide copies of the signed corporate resolution or a Secretary's Certificate setting forth the corporate resolution. For Financial Intermediaries — Certification with respect to

your anti-money laundering policies, customer identification procedures and your evaluation of the underlying client must be provided. BlackRock will deliver to you a form of the certification upon receipt of this application. All other applicants must provide with this application at least one of the following documents (or equivalent documents) as applicable: Certified Articles of Incorporation; Partnership Agreement; Trust Instrument (e.g. Declaration of Trust); or government-issued business license.

1. Account Registration and Documentation

Account Name

(a) Account Address (no PO Boxes)

(b) City

State

Zip Code

(c) Type of Entity/Date and Jurisdiction of Formation

(d) Tax ID/SSAN (Enter All Hyphens)

Ticker Symbol

Duplicate Statements Requested (Please Attach the List of Address(es) for Additional Statements)

Type of Documentation Provided

2. Government Entity and Government Plan Investor Certifications

Indicate whether the undersigned is a government entity. Yes No

If yes, please provide the name of the government entity, and the jurisdiction (e.g., City, County, State):

Indicate below whether the investor is making this investment as part of a government entity's retirement plan: Yes No

If yes, please provide the name of the government entity, the plan or program, and the jurisdiction (e.g., City, County, State):

3. Client Contact Information

Name		Title	
Address			
City		State	Zip Code
Phone No.		Fax No.	
Email			

4. Investments

Fund Name	Share Class	Fund Number (If Known)
Fund Name	Share Class	Fund Number (If Known)
Fund Name	Share Class	Fund Number (If Known)
Fund Name	Share Class	Fund Number (If Known)
Fund Name	Share Class	Fund Number (If Known)
Fund Name	Share Class	Fund Number (If Known)

5. Primary Redemption Wire Instructions

Bank Name
Bank Account Number
Account Name
Bank ABA No.
OBI

6. Second Redemption Wire Instructions

Bank Name

Bank Account Number

Account Name

Bank ABA No.

OBI

7. Dividend Redemption Wire Instructions

Dividends:

Cash

Reinvest (If reinvest, no wire instruction are necessary)

Bank Name

Bank Account Number

Account Name

Bank ABA No.

OBI

8. Authorized Trader(s)

1.

Phone No.

Email

2.

Phone No.

Email

3.

Phone No.

Email

4.

Phone No.

Email

9. Signature Authorization

By the execution of this Account Application, the undersigned represents and warrants that it has full right, power and authority to make the investment(s) applied for pursuant to this Application and is acting for itself or in some fiduciary capacity in making such investment, and that the individual(s) signing on behalf of the undersigned represent and warrant that they are fully authorized to sign the Application and to purchase and redeem Fund Shares on behalf of the undersigned. The undersigned affirms that it has received and reviewed a current Fund Prospectus.

I certify under penalties of perjury that: (1) I am/we are a US person(s) (including a US resident alien) and the Taxpayer Identification Number provided is correct; and (2) I am/we are not subject to backup withholding because (a) I am/we are exempt from backup withholding; or (b) I/we have not been notified by the Internal Revenue Service (IRS) that I am/we are subject to backup for failure to report all dividend and interest income; or (c) I/we have been notified by the IRS that I am/we are no longer subject to backup withholding. (Cross out item 2 if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.)

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

Signature

Signature

Signature

Name (Print)

Name (Print)

Name (Print)

Title

Title

Title

Date

Date

Date

To the extent permitted by applicable law, the Fund reserves the right to (i) place limits on transactions in any account until the identity of the Investor is verified; (ii) to refuse an investment, or (iii) to involuntarily redeem an Investor's shares and close an account in the event that the Fund is unable to verify an Investor's identity.

Wire Instructions for Purchases

Below are the wire instructions for all purchase orders taken by the Delaware Call Center:

Bank Name: Bank of New York Mellon
ABA: 011 001 234
Credit: 0000735361
BNY Mellon Investment Servicing (US) Inc.
as Agent for BlackRock Liquidity Funds
Further Credit: Beneficiary Name
Beneficiary Fund/Account Number
Amount: \$ (Dollars)