

<p><b>Form 5500</b></p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p><b>Annual Return/Report of Employee Benefit Plan</b></p> <p>This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).</p> <p>▶ <b>Complete all entries in accordance with the instructions to the Form 5500.</b></p>	<p>OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: 24pt; font-weight: bold;">2022</p> <hr/> <p><b>This Form is Open to Public Inspection</b></p>
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<b>Part I</b>	<b>Annual Report Identification Information</b>
For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2022</u> and ending <u>12/31/2022</u>	
<b>A</b> This return/report is for:	<input type="checkbox"/> a multiemployer plan <input type="checkbox"/> a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) <input checked="" type="checkbox"/> a single-employer plan <input type="checkbox"/> a DFE (specify) ____
<b>B</b> This return/report is:	<input type="checkbox"/> the first return/report <input type="checkbox"/> the final return/report <input checked="" type="checkbox"/> an amended return/report <input type="checkbox"/> a short plan year return/report (less than 12 months)
<b>C</b> If the plan is a collectively-bargained plan, check here. . . . .	▶ <input type="checkbox"/>
<b>D</b> Check box if filing under:	<input checked="" type="checkbox"/> Form 5558 <input type="checkbox"/> automatic extension <input type="checkbox"/> the DFVC program <input type="checkbox"/> special extension (enter description)
<b>E</b> If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . .	▶ <input type="checkbox"/>

<b>Part II</b>	<b>Basic Plan Information</b> —enter all requested information
<p><b>1a</b> Name of plan <u>BLACKROCK RETIREMENT SAVINGS PLAN</u></p> <p><b>2a</b> Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>BLACKROCK, INC.</u></p> <p><u>50 HUDSON YARDS</u> <u>NEW YORK, NY 10001</u></p>	<p><b>1b</b> Three-digit plan number (PN) ▶ <u>001</u></p> <p><b>1c</b> Effective date of plan <u>10/01/2006</u></p> <p><b>2b</b> Employer Identification Number (EIN) <u>32-0174431</u></p> <p><b>2c</b> Plan Sponsor's telephone number <u>212-810-5300</u></p> <p><b>2d</b> Business code (see instructions) <u>523900</u></p>

**Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.**

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

<b>SIGN HERE</b>	Filed with authorized/valid electronic signature.	11/08/2023	DANIEL DUNAY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
<b>SIGN HERE</b>	Filed with authorized/valid electronic signature.	11/08/2023	DANIEL DUNAY
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
<b>SIGN HERE</b>	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2022)  
v. 220413

<b>3a</b> Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor  BLACKROCK, INC. RETIREMENT COMMITTEE  50 HUDSON YARDS NEW YORK, NY 10001	<b>3b</b> Administrator's EIN 32-0174431  <b>3c</b> Administrator's telephone number 212-810-5300
<b>4</b> If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN  <b>4d</b> PN
<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b> 12998
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).  <b>a(1)</b> Total number of active participants at the beginning of the plan year ..... <b>a(2)</b> Total number of active participants at the end of the plan year .....  <b>b</b> Retired or separated participants receiving benefits ..... <b>c</b> Other retired or separated participants entitled to future benefits..... <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> ..... <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. .... <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....  <b>g</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....  <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<b>6a(1)</b> 8679 <b>6a(2)</b> 9268  <b>6b</b> 333 <b>6c</b> 4512 <b>6d</b> 14113 <b>6e</b> 33 <b>6f</b> 14146  <b>6g</b> 14033  <b>6h</b> 393
<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....	<b>7</b>
<b>8a</b> If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2F 2G 2J 2K 2S 2T  <b>b</b> If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	

<b>9a</b> Plan funding arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	<b>9b</b> Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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**10** Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

<b>a Pension Schedules</b> (1) <input checked="" type="checkbox"/> <b>R</b> (Retirement Plan Information)  (2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary  (3) <input type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	<b>b General Schedules</b> (1) <input checked="" type="checkbox"/> <b>H</b> (Financial Information) (2) <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan) (3) <input type="checkbox"/> <b>A</b> (Insurance Information) (4) <input checked="" type="checkbox"/> <b>C</b> (Service Provider Information) (5) <input checked="" type="checkbox"/> <b>D</b> (DFE/Participating Plan Information) (6) <input type="checkbox"/> <b>G</b> (Financial Transaction Schedules)
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**Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)**

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**11a** If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) .....  Yes  No

If "Yes" is checked, complete lines 11b and 11c.

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**11b** Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) .....  Yes  No

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**11c** Enter the Receipt Confirmation Code for the 2022 Form M-1 annual report. If the plan was not required to file the 2022 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code \_\_\_\_\_

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<b>SCHEDULE C</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Service Provider Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2022</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

<b>A</b> Name of plan <u>BLACKROCK RETIREMENT SAVINGS PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>001</u>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <u>BLACKROCK, INC.</u>	<b>D</b> Employer Identification Number (EIN) <u>32-0174431</u>	

**Part I Service Provider Information (see instructions)**

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

**1 Information on Persons Receiving Only Eligible Indirect Compensation**

**a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).....  Yes  No

**b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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**(b)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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**2. Information on Other Service Providers Receiving Direct or Indirect Compensation.** Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

JENNISON ASSOCIATES

466 LEXINGTON AVE  
NEW YORK, NY 10017

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
50 70	CONSULTANT	412888	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

MERRILL LYNCH, PIERCE, FENNER AND S

13-5674085

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 52 59 60 62 63 71 72	RECORDKEEPER	12328	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

**Part I Service Provider Information (continued)**

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

<b>(a)</b> Enter service provider name as it appears on line 2	<b>(b)</b> Service Codes (see instructions)	<b>(c)</b> Enter amount of indirect compensation
<b>(d)</b> Enter name and EIN (address) of source of indirect compensation	<b>(e)</b> Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
<b>(a)</b> Enter service provider name as it appears on line 2	<b>(b)</b> Service Codes (see instructions)	<b>(c)</b> Enter amount of indirect compensation
<b>(d)</b> Enter name and EIN (address) of source of indirect compensation	<b>(e)</b> Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
<b>(a)</b> Enter service provider name as it appears on line 2	<b>(b)</b> Service Codes (see instructions)	<b>(c)</b> Enter amount of indirect compensation
<b>(d)</b> Enter name and EIN (address) of source of indirect compensation	<b>(e)</b> Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

**Part II Service Providers Who Fail or Refuse to Provide Information**

**4** Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

<b>(a)</b> Enter name and EIN or address of service provider (see instructions)	<b>(b)</b> Nature of Service Code(s)	<b>(c)</b> Describe the information that the service provider failed or refused to provide

<b>(a)</b> Enter name and EIN or address of service provider (see instructions)	<b>(b)</b> Nature of Service Code(s)	<b>(c)</b> Describe the information that the service provider failed or refused to provide

<b>(a)</b> Enter name and EIN or address of service provider (see instructions)	<b>(b)</b> Nature of Service Code(s)	<b>(c)</b> Describe the information that the service provider failed or refused to provide

<b>(a)</b> Enter name and EIN or address of service provider (see instructions)	<b>(b)</b> Nature of Service Code(s)	<b>(c)</b> Describe the information that the service provider failed or refused to provide

<b>(a)</b> Enter name and EIN or address of service provider (see instructions)	<b>(b)</b> Nature of Service Code(s)	<b>(c)</b> Describe the information that the service provider failed or refused to provide

<b>(a)</b> Enter name and EIN or address of service provider (see instructions)	<b>(b)</b> Nature of Service Code(s)	<b>(c)</b> Describe the information that the service provider failed or refused to provide

**Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)**  
(complete as many entries as needed)

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<p style="text-align: center;"><b>SCHEDULE D</b> <b>(Form 5500)</b></p> <p style="font-size: small; text-align: center;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="font-size: small; text-align: center;">Department of Labor Employee Benefits Security Administration</p>	<p><b>DFE/Participating Plan Information</b></p> <p>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p>▶ <b>File as an attachment to Form 5500.</b></p>	<p style="font-size: x-small;">OMB No. 1210-0110</p> <hr/> <p style="font-size: large; font-weight: bold;">2022</p> <hr/> <p style="font-size: small; font-weight: bold;">This Form is Open to Public Inspection.</p>
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

<b>A</b> Name of plan <u>BLACKROCK RETIREMENT SAVINGS PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶ <u>001</u>
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<b>C</b> Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>BLACKROCK, INC.</u>	<b>D</b> Employer Identification Number (EIN) <u>32-0174431</u>
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**Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**  
(Complete as many entries as needed to report all interests in DFEs)

**a** Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK ACTIVE STOCK FUND CLASS F

**b** Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.

<b>c</b> EIN-PN <u>84-1634920-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>261749587</u>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK EMERGING MARKETS INDEX FU

**b** Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.

<b>c</b> EIN-PN <u>45-4544245-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>80775341</u>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK EQUITY DIVIDEND FUND F

**b** Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.

<b>c</b> EIN-PN <u>45-4639950-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>208159524</u>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK GLOBAL ALLOCATION COLLECT

**b** Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.

<b>c</b> EIN-PN <u>46-2224552-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>200464294</u>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2025 CLASS

**b** Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.

<b>c</b> EIN-PN <u>20-5114920-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>58798871</u>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2030 CLASS

**b** Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.

<b>c</b> EIN-PN <u>71-0986424-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>126047833</u>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2035 CLASS

**b** Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.

<b>c</b> EIN-PN <u>20-5114956-001</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>173434324</u>
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<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <a href="#">BLACKROCK LIFEPATH INDEX 2040 CLASS</a>		
<b>b</b> Name of sponsor of entity listed in (a): <a href="#">BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</a>		
<b>c</b> EIN-PN <a href="#">71-0986419-001</a>	<b>d</b> Entity code <a href="#">C</a>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <a href="#">192625295</a>

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <a href="#">BLACKROCK LIFEPATH INDEX 2045 CLASS</a>		
<b>b</b> Name of sponsor of entity listed in (a): <a href="#">BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</a>		
<b>c</b> EIN-PN <a href="#">20-5115008-001</a>	<b>d</b> Entity code <a href="#">C</a>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <a href="#">203943135</a>

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <a href="#">BLACKROCK LIFEPATH INDEX 2050 CLASS</a>		
<b>b</b> Name of sponsor of entity listed in (a): <a href="#">BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</a>		
<b>c</b> EIN-PN <a href="#">26-0896020-001</a>	<b>d</b> Entity code <a href="#">C</a>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <a href="#">204954790</a>

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <a href="#">BLACKROCK LIFEPATH INDEX 2055 CLASS</a>		
<b>b</b> Name of sponsor of entity listed in (a): <a href="#">BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</a>		
<b>c</b> EIN-PN <a href="#">27-2470604-001</a>	<b>d</b> Entity code <a href="#">C</a>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <a href="#">196966142</a>

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <a href="#">BLACKROCK LIFEPATH INDEX 2060 CLASS</a>		
<b>b</b> Name of sponsor of entity listed in (a): <a href="#">BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</a>		
<b>c</b> EIN-PN <a href="#">47-1878775-001</a>	<b>d</b> Entity code <a href="#">C</a>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <a href="#">127629965</a>

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <a href="#">BLACKROCK LIFEPATH INDEX 2065 CLASS</a>		
<b>b</b> Name of sponsor of entity listed in (a): <a href="#">BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</a>		
<b>c</b> EIN-PN <a href="#">84-1770109-001</a>	<b>d</b> Entity code <a href="#">C</a>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <a href="#">15575642</a>

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <a href="#">BLACKROCK LIFEPATH INDEX RETIREMENT</a>		
<b>b</b> Name of sponsor of entity listed in (a): <a href="#">BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</a>		
<b>c</b> EIN-PN <a href="#">71-0986421-001</a>	<b>d</b> Entity code <a href="#">C</a>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <a href="#">35947846</a>

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <a href="#">BLACKROCK MSCI ACWI EX US CLASS F</a>		
<b>b</b> Name of sponsor of entity listed in (a): <a href="#">BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</a>		
<b>c</b> EIN-PN <a href="#">27-4955447-001</a>	<b>d</b> Entity code <a href="#">C</a>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <a href="#">97184160</a>

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <a href="#">BLACKROCK RUSSELL 1000 FUND CLASS F</a>		
<b>b</b> Name of sponsor of entity listed in (a): <a href="#">BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</a>		
<b>c</b> EIN-PN <a href="#">94-3357216-001</a>	<b>d</b> Entity code <a href="#">C</a>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <a href="#">338368695</a>

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <a href="#">BLACKROCK RUSSELL 2000 ALPHA TILTS</a>		
<b>b</b> Name of sponsor of entity listed in (a): <a href="#">BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</a>		
<b>c</b> EIN-PN <a href="#">47-2641596-001</a>	<b>d</b> Entity code <a href="#">C</a>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <a href="#">155481529</a>

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK SHORT-TERM INVESTMENT FUN		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 16-1673805-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 158719538

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK STRATEGIC INCOME OPPORTUN		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 46-4973704-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 29021202

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK TOTAL RETURN BOND F		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 47-1222253-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 48900898

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK US DEBT INDEX FUND CLASS		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 94-3291425-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 30194060

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK US TIPS FUND CLASS F		
<b>b</b> Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
<b>c</b> EIN-PN 36-4495972-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 32777996

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)



<p align="center"><b>SCHEDULE H</b> <b>(Form 5500)</b></p> <p align="center">Department of the Treasury Internal Revenue Service</p> <hr/> <p align="center">Department of Labor Employee Benefits Security Administration</p> <hr/> <p align="center">Pension Benefit Guaranty Corporation</p>	<p><b>Financial Information</b></p> <p>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).</p> <p>► <b>File as an attachment to Form 5500.</b></p>	<p>OMB No. 1210-0110</p> <hr/> <p><b>2022</b></p> <hr/> <p><b>This Form is Open to Public Inspection</b></p>
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For calendar plan year 2022 or fiscal plan year beginning **01/01/2022** and ending **12/31/2022**

<p><b>A</b> Name of plan <b>BLACKROCK RETIREMENT SAVINGS PLAN</b></p>	<p><b>B</b> Three-digit plan number (PN) ►</p>	<p><b>001</b></p>
<p><b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>BLACKROCK, INC.</b></p>	<p><b>D</b> Employer Identification Number (EIN) <b>32-0174431</b></p>	

**Part I Asset and Liability Statement**

**1** Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
<b>a</b> Total noninterest-bearing cash.....	<b>1a</b>	1519913	85
<b>b</b> Receivables (less allowance for doubtful accounts):			
<b>(1)</b> Employer contributions.....	<b>1b(1)</b>	66799426	42937174
<b>(2)</b> Participant contributions.....	<b>1b(2)</b>		0
<b>(3)</b> Other.....	<b>1b(3)</b>	0	0
<b>c</b> General investments:			
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit).....	<b>1c(1)</b>	18995	26380
<b>(2)</b> U.S. Government securities.....	<b>1c(2)</b>	0	0
<b>(3)</b> Corporate debt instruments (other than employer securities):			
<b>(A)</b> Preferred.....	<b>1c(3)(A)</b>	0	0
<b>(B)</b> All other.....	<b>1c(3)(B)</b>	0	0
<b>(4)</b> Corporate stocks (other than employer securities):			
<b>(A)</b> Preferred.....	<b>1c(4)(A)</b>	0	0
<b>(B)</b> Common.....	<b>1c(4)(B)</b>	192581560	119162746
<b>(5)</b> Partnership/joint venture interests.....	<b>1c(5)</b>	0	0
<b>(6)</b> Real estate (other than employer real property).....	<b>1c(6)</b>	0	0
<b>(7)</b> Loans (other than to participants).....	<b>1c(7)</b>	0	0
<b>(8)</b> Participant loans.....	<b>1c(8)</b>	17101702	17696059
<b>(9)</b> Value of interest in common/collective trusts.....	<b>1c(9)</b>	3321818077	2977720667
<b>(10)</b> Value of interest in pooled separate accounts.....	<b>1c(10)</b>		
<b>(11)</b> Value of interest in master trust investment accounts.....	<b>1c(11)</b>		
<b>(12)</b> Value of interest in 103-12 investment entities.....	<b>1c(12)</b>		
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds).....	<b>1c(13)</b>	138290375	91109670
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts).....	<b>1c(14)</b>		
<b>(15)</b> Other.....	<b>1c(15)</b>	62592420	58499749

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	95761898	71193486
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	3896484366	3378346016

**Liabilities**

g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	0

**Net Assets**

l Net assets (subtract line 1k from line 1f).....	1l	3896484366	3378346016
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**Part II Income and Expense Statement**

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

**Income**

		(a) Amount	(b) Total
<b>a Contributions:</b>			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	82163075	
(B) Participants.....	2a(1)(B)	153435729	
(C) Others (including rollovers).....	2a(1)(C)	23323143	
(2) Noncash contributions.....	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)		258921947
<b>b Earnings on investments:</b>			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	7385	
(B) U.S. Government securities.....	2b(1)(B)	0	
(C) Corporate debt instruments.....	2b(1)(C)	0	
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)	663176	
(F) Other.....	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		670561
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock.....	2b(2)(B)	2209574	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	11650411	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		13859985
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	10493975	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	10898294	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		-404319
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	-34405479	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		-34405479

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts .....	2b(6)		-541425248
(7) Net investment gain (loss) from pooled separate accounts .....	2b(7)		-71758711
(8) Net investment gain (loss) from master trust investment accounts .....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) .....	2b(10)		-31218777
<b>c</b> Other income .....	2c		0
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	2d		-405760041
<b>Expenses</b>			
<b>e</b> Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers .....	2e(1)	129075015	
(2) To insurance carriers for the provision of benefits .....	2e(2)		
(3) Other .....	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		129075015
<b>f</b> Corrective distributions (see instructions) .....	2f		22500
<b>g</b> Certain deemed distributions of participant loans (see instructions) .....	2g		802954
<b>h</b> Interest expense .....	2h		0
<b>i</b> Administrative expenses: (1) Professional fees .....	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees .....	2i(3)		
(4) Other .....	2i(4)	424829	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		424829
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	2j		130325298
<b>Net Income and Reconciliation</b>			
<b>k</b> Net income (loss). Subtract line 2j from line 2d.....	2k		-536085339
<b>l</b> Transfers of assets:			
(1) To this plan .....	2l(1)		17946989
(2) From this plan.....	2l(2)		0

**Part III Accountant's Opinion**

**3** Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

**a** The attached opinion of an independent qualified public accountant for this plan is (see instructions):

- (1)  Unmodified (2)  Qualified (3)  Disclaimer (4)  Adverse

**b** Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

- (1)  DOL Regulation 2520.103-8 (2)  DOL Regulation 2520.103-12(d) (3)  neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

**c** Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **DELOITTE & TOUCHE LLP**

(2) EIN: **13-3891517**

**d** The opinion of an independent qualified public accountant is **not attached** because:

- (1)  This form is filed for a CCT, PSA, or MTIA. (2)  It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

**Part IV Compliance Questions**

**4** CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

**a** Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.) .....

	Yes	No	Amount
<b>4a</b>		X	

		Yes	No	Amount
<b>b</b> Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....	<b>4b</b>		X	
<b>c</b> Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.) .....	<b>4c</b>		X	
<b>d</b> Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....	<b>4d</b>		X	
<b>e</b> Was this plan covered by a fidelity bond?.....	<b>4e</b>	X		25000000
<b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? .....	<b>4f</b>		X	
<b>g</b> Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?.....	<b>4g</b>		X	
<b>h</b> Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?.....	<b>4h</b>		X	
<b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.).....	<b>4i</b>	X		
<b>j</b> Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.).....	<b>4j</b>		X	
<b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?.....	<b>4k</b>		X	
<b>l</b> Has the plan failed to provide any benefit when due under the plan?.....	<b>4l</b>		X	
<b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....	<b>4m</b>		X	
<b>n</b> If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.....	<b>4n</b>			

**5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?.....  Yes  No  
 If "Yes," enter the amount of any plan assets that reverted to the employer this year \_\_\_\_\_.

**5b** If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

**5c** Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) .....  Yes  No  Not determined  
 If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year \_\_\_\_\_.

<b>SCHEDULE R</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Retirement Plan Information</b>  This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2022</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

<b>A</b> Name of plan <u>BLACKROCK RETIREMENT SAVINGS PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>001</u>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <u>BLACKROCK, INC.</u>	<b>D</b> Employer Identification Number (EIN) <u>32-0174431</u>	

<b>Part I</b>	<b>Distributions</b>
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**All references to distributions relate only to payments of benefits during the plan year.**

**1** Total value of distributions paid in property other than in cash or the forms of property specified in the instructions..... 

1	0
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**2** Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):  
EIN(s): 94-1687665

**Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.**

**3** Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year..... 

3	
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<b>Part II</b>	<b>Funding Information</b> (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
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**4** Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? .....  Yes  No  N/A  
**If the plan is a defined benefit plan, go to line 8.**

**5** If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_  
**If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.**

<b>6 a</b> Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....	<b>6a</b>	
<b>b</b> Enter the amount contributed by the employer to the plan for this plan year.....	<b>6b</b>	
<b>c</b> Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	<b>6c</b>	

**If you completed line 6c, skip lines 8 and 9.**

**7** Will the minimum funding amount reported on line 6c be met by the funding deadline? .....  Yes  No  N/A

**8** If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? .....  Yes  No  N/A

<b>Part III</b>	<b>Amendments</b>
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**9** If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....  Increase  Decrease  Both  No

<b>Part IV</b>	<b>ESOPs</b> (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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**10** Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....  Yes  No

**11 a** Does the ESOP hold any preferred stock?.....  Yes  No

**b** If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.).....  Yes  No

**12** Does the ESOP hold any stock that is not readily tradable on an established securities market?.....  Yes  No

**Part V Additional Information for Multiemployer Defined Benefit Pension Plans**

**13** Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. Complete as many entries as needed to report all applicable employers.

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box  and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box  and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box  and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box  and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box  and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box  and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**14** Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

<b>a</b> The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: <input type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment).....	<b>14a</b>	
<b>b</b> The plan year immediately preceding the current plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment) .....	<b>14b</b>	
<b>c</b> The second preceding plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	<b>14c</b>	

**15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

<b>a</b> The corresponding number for the plan year immediately preceding the current plan year.....	<b>15a</b>	
<b>b</b> The corresponding number for the second preceding plan year.....	<b>15b</b>	

**16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

<b>a</b> Enter the number of employers who withdrew during the preceding plan year .....	<b>16a</b>	
<b>b</b> If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....	<b>16b</b>	

**17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment .....

**Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans**

**18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment .....

**19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

**a** Enter the percentage of plan assets held as:  
 Stock: \_\_\_\_\_% Investment-Grade Debt: \_\_\_\_\_% High-Yield Debt: \_\_\_\_\_% Real Estate: \_\_\_\_\_% Other: \_\_\_\_\_%

**b** Provide the average duration of the combined investment-grade and high-yield debt:  
 0-3 years  3-6 years  6-9 years  9-12 years  12-15 years  15-18 years  18-21 years  21 years or more

**c** What duration measure was used to calculate line 19(b)?  
 Effective duration  Macaulay duration  Modified duration  Other (specify): \_\_\_\_\_

**20 PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

**a** Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero?  Yes  No

**b** If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

Yes.

No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

No. Other. Provide explanation \_\_\_\_\_

# BlackRock Retirement Savings Plan

Employer ID No: 32-0174431  
Plan Number: 001

Financial Statements as of December 31, 2022 and 2021,  
and for the Year Ended December 31, 2022,

Supplemental Schedule as of December 31, 2022, and  
Independent Auditor's Report

# BLACKROCK RETIREMENT SAVINGS PLAN

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NOTE: All other supplemental schedules required by 29 CFR 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.



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## INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator of  
The BlackRock Retirement Savings Plan

### Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of the BlackRock Retirement Savings Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2022 and 2021, and the related statement of changes in net assets available for benefits for the year ended December 31, 2022, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2022 and 2021, and for the year ended December 31, 2022, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

### Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section:

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

## **Basis for Opinion**

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

## **Responsibilities of Management for the Financial Statements**

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

## **Auditor's Responsibilities for the Audit of the Financial Statements**

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

#### **Other Matter — Supplemental Schedules Required by ERISA**

The supplemental schedule of assets (held at end of year) as of December 31, 2022 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or is derived from the certified investment information, is presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedule related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

*Deloitte & Touche LLP*

October 13, 2023

## BLACKROCK RETIREMENT SAVINGS PLAN

### STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS AS OF DECEMBER 31, 2022 AND 2021

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	2022	2021
ASSETS:		
Non-interest-bearing cash	\$ 85	\$ 1,519,913
Participant-directed investments, at fair value (See Note 7)	3,317,686,318	3,811,044,330
Receivables:		
Notes receivable from participants	17,924,628	17,314,554
Employer contributions receivable	42,937,174	66,799,426
Accrued investment income	26,380	18,995
Total receivables	<u>60,888,182</u>	<u>84,132,975</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 3,378,574,585</u>	<u>\$ 3,896,697,218</u>

See accompanying notes to financial statements.

## BLACKROCK RETIREMENT SAVINGS PLAN

### STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEAR ENDED DECEMBER 31, 2022

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CONTRIBUTIONS:	
Participant contributions	\$ 153,435,729
Employer contributions	82,163,075
Participant rollover contributions	<u>23,323,143</u>
Total contributions	258,921,947
INVESTMENT INCOME (LOSS):	
Net appreciation (depreciation) in fair value of investments	(679,212,535)
Interest and dividends	<u>13,867,370</u>
Net investment income (loss)	(665,345,165)
Interest income on notes receivable from participants	663,176
DEDUCTION -	
Benefits and withdrawals paid to participants	<u>130,309,580</u>
NET INCREASE (DECREASE) IN NET ASSETS	(536,069,622)
TRANSFER IN FROM QUALIFIED PLAN	17,946,989
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	<u>3,896,697,218</u>
End of year	<u>\$ 3,378,574,585</u>

See accompanying notes to financial statements.

# BLACKROCK RETIREMENT SAVINGS PLAN

## NOTES TO FINANCIAL STATEMENTS

AS OF DECEMBER 31, 2022 AND 2021, AND FOR THE YEAR ENDED DECEMBER 31, 2022

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### 1. DESCRIPTION OF THE PLAN

The following description of the BlackRock Retirement Savings Plan (the “Plan”), sponsored by BlackRock, Inc. (the “Company”, “BlackRock” or “Employer”), is provided for general information purposes only. Participants should refer to the official Plan document for more complete information.

**General** — The Plan is a defined contribution plan established on October 1, 2006. The BlackRock Retirement Committee controls and manages the operation and administration of the Plan. Effective September 22, 2006, Bank of America, N.A. serves as the trustee (the “Trustee”) of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (“ERISA”).

**Eligibility for Employee Contributions** — Employees of the Company or any of its participating employers (as defined by the Plan) in the United States are eligible to participate in the Plan at commencement of employment. Each participant may elect to make contributions to the Plan on a pre-tax basis and on a Roth 401(k) basis through payroll deductions from 1% to 50% of such participant’s eligible compensation (as defined by the Plan document) subject to certain Internal Revenue Code (“IRC”) limitations. Newly eligible employees are automatically enrolled in the Plan at a pre-tax savings rate of 8% following a thirty-day opt-out period. Participants who are age 50 or older can make additional catch-up contributions to the Plan subject to certain IRC limitations. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. In addition, participants can elect to have certain vested non-Roth account balances in the Plan converted into Roth amounts via an in-Plan Roth rollover, which will become part of a participant’s after-tax Roth 401(k) contributions.

**Eligibility for Company Contributions** — The Company matches 50% of the first 8% of each participant’s eligible compensation contributed to the Plan, up to a maximum of \$5,000 annually. In addition, the Company makes an annual Company retirement contribution ranging from 3% to 5% of eligible compensation to each participant who has attained one year of service and remains employed by the Company at the end of the Plan year subject to certain IRC limitations. Participants separated from the Company for reason of death, disability, or retirement (as defined by the Plan) are also eligible for the annual Company retirement contribution for the year of separation.

**Participant Accounts** — Individual accounts are maintained for each Plan participant. Each participant’s account is credited with the participant’s contribution, the Company’s matching and retirement contributions, and allocations of Plan earnings, and is charged with withdrawals and an allocation of Plan losses. Allocations are based on participant earnings or account balances correlated to participant investment elections. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

**Vesting** — Participants are always 100% vested in contributions to the Plan made from their eligible compensation and in amounts rolled over from a former qualified retirement plan and, in each case, the earnings thereon. The vesting of contributions transferred from another qualified plan is dependent upon the terms of the transfer as outlined in the terms of the Plan document. Participants become vested in Company matching and retirement contributions and earnings thereon upon completion of three years of

service. Full vesting in Company matching and retirement contributions also occurs upon a participant's death, disability, or attainment of normal retirement age, as defined by the Plan.

**Investment Options** — Participants direct the investment of their contributions and Company matching and retirement contributions into the various investment options offered by the Plan such as mutual funds, collective trusts, as well as common stocks and a collective trust through separately managed accounts. Participants can also invest up to 50% of their Plan account balance in a selection of exchange traded funds (“ETFs”), interest-bearing cash, and mutual funds offered through a self-directed brokerage window. The BlackRock, Inc. common stock and Other common stock are frozen investments. Transfers may be made from these stock investments to other investment options available under the Plan. Once transferred to other investment funds, these amounts may not be reinvested back to these investments.

**Forfeitures** — Participants who terminate employment before they are 100% vested in Company contributions forfeit the nonvested portion of Company contributions allocated to their accounts. During the year ended December 31, 2022, Company contributions were reduced by approximately \$2.2 million of forfeited nonvested amounts. Any forfeited nonvested amounts may be used to reduce future Company contributions. At December 31, 2022 and 2021, approximately \$0.9 million and \$0.7 million of forfeited nonvested amounts remained, respectively.

**Notes Receivable from Participants** — Participants may borrow from their individual accounts the lesser of a maximum of \$50,000 or 50% of their vested account balance. Interest rates on loans are calculated based on the prime rate of interest as published in the *Wall Street Journal* on the last business day of the month prior to the loan request. Interest rates on the loans are fixed. General purpose loans have a maximum term of five years, and principal residence loans have a maximum term of fifteen years. Principal and interest are repaid ratably through payroll deductions. As of December 31, 2022, interest rates range from 3.25% to 8.25% and maturity dates range from 2023 to 2037.

**Payment of Benefits** — Distributions of account balances occur upon a participant's retirement, death, or other termination of employment. A participant or a beneficiary may receive a lump-sum distribution of cash and/or securities or may transfer the balance to an individual retirement account or other employer-sponsored plan. In addition, a distribution option in the form of monthly, quarterly, semi-annual or annual installments is available to participants who have reached age 59½.

The Plan also offers a partial distribution option, which gives participants more flexibility in withdrawing assets from their respective account balance in retirement. The partial distribution option is only available for participants who have reached age 59½ and there is no limit on distribution amounts or frequency.

**In-Service Withdrawals** — In-service withdrawals are permitted as specified in the Plan document. There are two types of in-service withdrawals: hardship and non-hardship. A hardship withdrawal is available under limited circumstances and is paid in cash. For participants under age 59½, a non-hardship withdrawal is only available for amounts attributable to rollover contributions. Upon attainment of age 59½, a participant may request a withdrawal of all or a portion of his/her account generally while maintaining active employment. Participants may also request a qualified birth or adoption withdrawal of up to \$5,000 per birth or adoption within one year of the date of birth or finalization of adoption.

**Transfer In From Qualified Plan** — The Aperio Group LLC Profit Sharing Plan and Trust 401(k) (the “Aperio Plan”) was merged into the Plan effective as of June 21, 2022. In connection with the plan merger, the Aperio Plan completed the transfer of participant account balances of approximately \$17.9 million to the Plan on July 14, 2022. Effective upon the plan merger, the participant accounts in the Aperio Plan became subject to the rules of the Plan document with the exception of certain protected benefits and other provisions as outlined in the Plan document.

## 2. SUMMARY OF ACCOUNTING POLICIES

**Basis of Accounting** — The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America (“GAAP”).

**Uses of Estimates** — The preparation of financial statements in conformity with GAAP requires Plan management to make estimates and assumptions that affect the reported amounts of assets, liabilities, and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates and assumptions.

**Risks and Uncertainties** — The Plan utilizes various investment instruments, including common stock, mutual funds, collective trusts, separately managed accounts, and ETFs. Investment securities, in general, are exposed to various risks, such as interest rate, credit, counterparty, and overall market risks. Market risks may include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of the investment securities will occur in the near term and that such changes could materially affect the value of the participants’ account balances and the amounts reported in the financial statements.

**Investment Valuation** — The Plan’s investments are stated at fair value as determined by Plan management. Fair value of a financial instrument is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

The Plan discloses fair value of financial instruments according to a fair value hierarchy (i.e., Level 1, 2, and 3, as defined). The following provides a description of the three levels of inputs that may be used to measure fair value, the types of Plan investments that fall under each category, and the valuation methodologies used to measure these investments at fair value. There have been no changes in the methodologies used at December 31, 2022 and 2021.

**Level 1** — Inputs to the valuation methodology are quoted prices available in active markets for identical investments as of the reporting date.

### 1. *BlackRock, Inc. and Other Common Stock*

The Plan holds common stock of publicly-traded companies that are valued at the closing exchange prices in active markets.

### 2. *Mutual Funds*

The Plan invests in publicly registered mutual funds that are valued at the mutual fund's net asset value (“NAV”), which is based on the value of a mutual fund's assets less liabilities and then divided by the number of shares outstanding. The mutual funds’ NAVs are quoted prices in active markets.

### 3. *Separately Managed Account*

The Plan invests in a separately managed account (“SMA”) offered through Jennison Large Cap Growth Fund. The SMA invests primarily in common stocks that are valued at quoted prices in active markets.

### 4. *Self-directed Brokerage Accounts - ETFs, mutual funds, interest-bearing cash*

The ETFs are valued at the closing exchange prices in active markets. Mutual funds are valued at the mutual fund's NAV as previously mentioned. Interest-bearing cash is carried at either cost or amortized cost, which approximates fair value due to its short-term maturities.

**Level 2** — Inputs to the valuation methodology are other than quoted prices in active markets, which are either directly or indirectly observable as of the reporting date, and fair value can be determined through the use of models or other valuation methodologies.

**Level 3** — Inputs to the valuation methodology are unobservable inputs in situations where there is little or no market activity for the asset or liability and the reporting entity makes estimates and assumptions related to the pricing of the asset or liability including assumption regarding risk.

There are no investments in the Plan that are Level 2 or Level 3.

***Investments in Collective Trusts Measured at Fair Value using the Net Asset Value Per Share As A Practical Expedient*** — The Plan invests in collective trusts whose units are investment securities measured at fair value by dividing the respective trust's NAV (based on the value of the trust's assets less liabilities) as a practical expedient on the calculation date by the number of units outstanding on that date. The unit value is not quoted in active public markets.

**Notes Receivable from Participants** — Notes receivable from participants represent participant loans that are recorded at their unpaid principal balance plus any accrued but unpaid interest. Interest income on notes receivable from participants is recorded when it is earned. No allowance for credit losses has been recorded as of December 31, 2022 and 2021. If a participant ceases to make loan repayments and the Plan administrator accounts for the default as a distribution, the participant loan balance is reduced and a benefit payment is recorded. During the year ended December 31, 2022, such distributions were \$802,954. In addition, none of the prior years defaulted loans in the amount of \$228,569 distributed to the respective participants for taxes in the form of deemed distributions resumed payment in 2022. This amount is no longer reported as an asset in the Form 5500.

**Investment Income (loss)** — Interest income is recorded on the accrual basis. Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Dividends and interest received by the Plan are reinvested into the respective funds, with the exception of the dividends paid on the BlackRock and Other common stock investments, which are reinvested into an investment option designated by the participants. Management fees and other operating expenses charged by the mutual funds, collective trusts, SMA and investments in the self-directed brokerage accounts are deducted from income earned on these investments on a daily basis. These costs are borne indirectly by the Plan and are not separately reflected in the financial statements. Consequently, management fees and operating expenses of the funds are reflected as a reduction of investment return for such investments. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

**Administrative Expenses** — Certain administrative expenses of the Plan are paid by the Plan or the Company as provided in the Plan document. The Company pays all recordkeeping and trustee fees associated with the Plan directly as a Company operating expense.

**Payment of Benefits** — Benefit payments to participants are recorded upon distribution. Amounts allocated to accounts of persons who have elected to withdraw from the Plan but have not yet been paid were \$85 and \$1,387,528 at December 31, 2022 and 2021, respectively.

### 3. CERTIFIED INVESTMENT INFORMATION

The following is a summary of the certified investment information regarding the Plan as of December 31, 2022 and 2021, and for the year ended December 31, 2022, included in the Plan's financial statements and supplemental schedule, that was prepared by or derived from information prepared by the Trustee and furnished to the Plan administrator. The Plan administrator has obtained certifications from the Trustee that such information is complete and accurate.

	2022	2021
<b>Statements of Net Assets Available for Benefits:</b>		
Participant-directed investments, at fair value	\$ 3,317,686,318	\$ 3,811,044,330
Accrued investment income	26,380	18,995
Notes receivable from participants	17,924,628	17,314,554

	2022
<b>Statement of Changes in Net Assets Available for Benefits:</b>	
INVESTMENT INCOME (LOSS):	
Net appreciation (depreciation) in fair value of investments	\$ (679,212,535)
Interest and dividends	<u>13,867,370</u>
Net investment income (loss)	<u>\$ (665,345,165)</u>
Interest income on notes receivable from participants	<u>\$ 663,176</u>

All investment balances and information included in Note 7, *Fair Value Disclosures*, and in the supplemental schedule of assets (held at end of year) as of December 31, 2022, excluding the leveling of investments, unfunded commitments and redemption provisions in Note 7, have been certified by the Trustee.

### 4. EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Bank of America, N.A., a subsidiary of Bank of America Corporation, is the Trustee of the Plan. Certain mutual funds, collective trusts and self-directed brokerage accounts offered as investment options under the Plan are managed by the Company. The Plan issues loans to participants, which are secured by the vested balances in the participants' accounts.

Fees paid indirectly by the Plan for investment management services are described in the mutual funds and collective trusts prospectuses, and self-directed brokerage accounts plan documentation of the

designated investment options. In addition, fees are included as a reduction of the return earned on such products.

Certain employees and officers of the Company, who may also be participants in the Plan, perform administrative services to the Plan at no cost to the Plan.

At December 31, 2022 and 2021, the Plan held 100,461 and 104,592 shares of common stock of BlackRock, Inc., the sponsoring employer, with a market value of \$71,193,486 and \$95,761,898, respectively. Cash dividends are not reinvested in BlackRock; they are reinvested at the direction of the participants. No new contributions may be made to these stock investments.

The Plan uses Merrill Lynch, Pierce, Fenner & Smith Incorporated (the "Broker-Dealer"), a registered broker-dealer and a wholly-owned subsidiary of Bank of America Corporation, to provide recordkeeping and administrative services for the Plan. The Broker-Dealer is an affiliate of the Trustee. In order for the Plan to address any concern regarding these relationships to be considered a prohibited transaction under Section 406 of ERISA, all compensation to the Broker-Dealer and the Trustee for their services is paid directly by the Company, with the limited exception of a per-trade fee within the Plan's self-directed brokerage accounts. This per-trade fee is reasonable compensation and not excessive under the circumstances in either amount or frequency and should be considered an exempt party-in interest transaction.

To facilitate this arrangement, the portion of transfer agent fees, service fees, and distributions fees (collectively, "Fund Service Fees") charged by the Broker-Dealer to the mutual funds under contractual agreements, which are allocable to the Plan, are remitted monthly by the Broker-Dealer to the Plan. These amounts are allocated directly to Plan participants monthly based upon participant balances. During the year ended December 31, 2022, the Plan allocated \$54,039 to Plan participants, and there were no amounts unallocated to Plan participants as of December 31, 2022 and December 31, 2021.

## **5. PLAN TERMINATION**

Although it has not expressed any intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. In the event that the Plan is terminated, participants would become 100% vested in their accounts and their accounts will be distributed in accordance with the Plan document.

## **6. FEDERAL INCOME TAX STATUS**

The Internal Revenue Service ("IRS") has determined and informed the Company by a letter dated December 26, 2017, that the Plan and related trust were designed in accordance with the applicable regulations of the IRC. The Plan has been amended since receiving the letter; however, the Plan management believes the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC and the Plan continues to be tax-exempt. Therefore, no provision for income taxes has been recorded in the Plan's financial statements.

The Plan is subject to routine audits by taxing jurisdictions and the Plan could be subject to income tax if certain issues were found by the IRS that could result in the disqualification of the Plan's tax-exempt status.

## 7. FAIR VALUE DISCLOSURES

A summary of investments which are leveled at level 1 as of December 31, 2022 and 2021 is as follows:

	<b>2022</b>	<b>2021</b>
Mutual funds	\$ 91,109,670	\$ 138,290,375
BlackRock, Inc. common stock	71,193,486	95,761,898
The PNC Financial Services Group, Inc. common stock	5,346,841	7,005,762
Separately managed account	113,815,905	185,575,798
Self-directed brokerage accounts	<u>58,499,749</u>	<u>62,592,420</u>
	<u>\$ 339,965,651</u>	<u>\$ 489,226,253</u>

*Transfers Between Levels* - The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation approaches may require the transfer of financial instruments from one fair value level to another.

A summary of the Plan's investments with a reported NAV as a practical expedient (and therefore excluded from the leveling table above) as of December 31, 2022 and 2021 is as follows:

	Fair Value Estimated Using NAV Per Share				
	<u>Fair Value*</u>	<u>Unfunded Commitment</u>	<u>Redemption Frequency</u>	<u>Other Redemption Restrictions</u>	<u>Redemption Notice Period</u>
<b>December 31, 2022</b>					
Collective trusts**:					
Multi-asset	\$ 1,724,128,877	\$ -	Daily	None	None
Equity	1,141,718,836	-	Daily	None	None
Fixed income	<u>111,872,954</u>	-	Daily	None	None
	<u>\$ 2,977,720,667</u>	<u>\$ -</u>			
<b>December 31, 2021</b>					
Collective trusts**:					
Multi-asset	\$ 1,900,261,040	\$ -	Daily	None	None
Equity	1,299,124,110	-	Daily	None	None
Fixed income	<u>122,432,927</u>	-	Daily	None	None
	<u>\$ 3,321,818,077</u>	<u>\$ -</u>			

\* The fair value of the investment has been estimated using the NAV of the investment.

\*\* Generally, there are no restrictions on a participant's ability to redeem their investment in the collective trust at the investment's NAV. However, withdrawals prompted by certain events (e.g., termination of the Plan's contract with the Trustee, changes in laws or regulations) may temporarily restrict a participant's and/or the Plan's ability to redeem the investment at its NAV.

## 8. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

A reconciliation of net assets available for benefits per the financial statements to the Form 5500 as of December 31, 2022 and 2021 are as follows:

	<b>2022</b>	<b>2021</b>
Net assets available for benefits per the financial statements	\$ 3,378,574,585	\$ 3,896,697,218
Less: Deemed distributions	<u>(228,569)</u>	<u>(212,852)</u>
Net assets per Form 5500	<u>\$ 3,378,346,016</u>	<u>\$ 3,896,484,366</u>

For the year ended December 31, 2022, the following is a reconciliation of increase (decrease) in assets per the financial statements to the net income per the Form 5500:

	<b>2022</b>
Increase (decrease) in net assets per the financial statements	\$ (536,069,622)
Less: Increase (decrease) in deemed distributions	<u>15,717</u>
Total net income (loss) per Form 5500	<u>\$ (536,085,339)</u>

## 9. SUBSEQUENT EVENTS

The eFront Financial Solutions Inc. 401(k) Plan (the “eFront Plan”) was merged into the Plan effective as of July 31, 2023. In connection with the plan merger, the eFront Plan completed the transfer of participant account balances of approximately \$6.2 million to the Plan on August 1, 2023. Effective upon the merger, the participant accounts in the eFront Plan became subject to the rules of the Plan subject to the preservation of any protected rights and features under Section 411(d)(6) of the IRC as outlined in the Plan document.

The Company reviewed additional subsequent events occurring through October 13, 2023, the date that these financial statements were available to be issued, noting no additional subsequent events occurred that would require adjustments to or additional disclosures in these financial statements.

\*\*\*\*\*

**SUPPLEMENTAL SCHEDULE**

# BLACKROCK RETIREMENT SAVINGS PLAN

Plan Number: 001

EIN#: 32-0174431

## FORM 5500, SCHEDULE H, Part IV, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) AS OF DECEMBER 31, 2022

(a)	(b) Identify of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest Collateral, and Par or Maturity Value	(d) Cost **	(e) Current Value
*	BlackRock Russell 1000 Fund F	Collective trust	\$ -	\$ 338,368,695
*	BlackRock Active Stock Fund F	Collective trust		261,749,587
*	BlackRock Global Allocation Fund F	Collective trust		200,464,294
*	BlackRock LifePath Index 2045 Fund F	Collective trust		203,943,135
*	BlackRock LifePath Index 2040 Fund F	Collective trust		192,625,295
*	BlackRock LifePath Index 2050 Fund F	Collective trust		204,954,790
	Jennison Large Cap Growth Fund	Separately managed account		
	Adr Novo-Nordisk A S Adr	Common stock	14,315 shares	1,937,392
	Lvmh Moet Hennessy Louis Vuitton Se Eur0.30	Common stock	4,914 shares	3,565,713
	Adyen Nv Eur0.01	Common stock	981 shares	1,348,919
	Spotify Technology S A Com Eur0.025	Common stock	5,297 shares	418,198
	Abbott Lab Com	Common stock	14,239 shares	1,563,300
	Adobe Sys Inc Com	Common stock	8,694 shares	2,925,792
	Airbnb Inc Cl A Com Usd0.0001 Cl A	Common stock	12,837 shares	1,097,564
	Alphabet Inc Cap Stk Usd0.001 Cl C	Common stock	39,420 shares	3,497,737
	Alphabet Inc Capital Stock Usd0.001 Cl A	Common stock	39,740 shares	3,506,260
	Amazon Com Inc Com	Common stock	73,800 shares	6,199,200
	American Tower Corp	Common stock	7,791 shares	1,662,755
	Apple Inc Com Stk	Common stock	65,392 shares	8,496,383
	Atlassian Corp Cl A	Common stock	8,948 shares	1,151,429
	Broadcom Inc Com	Common stock	2,977 shares	1,664,530
	Chipotle Mexican Grill Inc Com Stk	Common stock	1,632 shares	2,264,384
	Costco Wholesale Corp New Com	Common stock	7,495 shares	3,421,468
	CrowdStrike Hldgs Inc Cl A Cl A	Common stock	7,056 shares	742,926
	Danaher Corp Com	Common stock	9,235 shares	2,453,462
	Dexcom Inc Com	Common stock	13,572 shares	1,536,893
	Eli Lilly & Co Com	Common stock	10,781 shares	3,944,121
	Estee Lauder Companies Inc Cl A Usd0.01	Common stock	8,742 shares	2,168,978
	Goldman Sachs Group Inc Com	Common stock	2,622 shares	900,342
	Home Depot Inc Com	Common stock	5,607 shares	1,771,027
	Intuitive Surgical Inc Com New Stk	Common stock	6,497 shares	1,723,979
	Kkr & Co Inc Cl A Cl A	Common stock	11,364 shares	527,517
	Lululemon Athletica Inc Com	Common stock	4,951 shares	1,586,201
	Marriott Intl Inc New Com Stk Cl A	Common stock	5,813 shares	865,498
	Mastercard Inc Cl A	Common stock	9,985 shares	3,472,084
	Mercadolibre Inc Com Stk	Common stock	2,393 shares	2,025,052
	Meta Platforms Inc	Common stock	4,701 shares	565,718
	Microsoft Corp Com	Common stock	33,252 shares	7,974,495
	Netflix Inc Com Stk	Common stock	7,382 shares	2,176,804
	Nike Inc Cl B	Common stock	8,519 shares	996,808
	Northrop Grumman Corp Com	Common stock	1,919 shares	1,047,026
	Nvidia Corp Com	Common stock	26,221 shares	3,831,937
	O Reilly Automotive Inc New Com Usd0.01	Common stock	1,223 shares	1,032,249
	Roblox Corp Com Usd0.0001 Cl A	Common stock	12,977 shares	369,325
	S&P Global Inc Com	Common stock	1,946 shares	651,793
	Salesforce Inc Com Usd0.001	Common stock	15,103 shares	2,002,507
	Schlumberger Ltd Com Com	Common stock	26,616 shares	1,427,549
	Snowflake Inc Cl A Cl A	Common stock	10,051 shares	1,442,721
	T-Mobile Us Inc Com	Common stock	7,789 shares	1,090,460

See accompanying Independent Auditor's Report.

(Continued)

# BLACKROCK RETIREMENT SAVINGS PLAN

Plan Number: 001

EIN#: 32-0174431

## FORM 5500, SCHEDULE H, Part IV, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR) AS OF DECEMBER 31, 2022

(a) (b) Identify of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest Collateral, and Par or Maturity Value	(d) Cost **	(e) Current Value
Tesla Inc Com Usd0.001	Common stock	27,886 shares	\$ 3,400,127
The Trade Desk Inc Com Cl A Com Cl A	Common stock	19,705 shares	883,375
Thermo Fisher Corp	Common stock	1,037 shares	571,066
Tjx Cos Inc Com New	Common stock	21,938 shares	1,746,265
Uber Technologies Inc Com Usd0.00001	Common stock	78,645 shares	1,944,891
Unitedhealth Group Inc Com	Common stock	6,329 shares	3,355,509
Vertex Pharmaceuticals Inc Com	Common stock	5,264 shares	1,520,138
Visa Inc Com Cl A Stk	Common stock	21,244 shares	4,413,653
Dr. Ing. H.C. F. Non-Vtg Prf Npv	Common stock	7,671 shares	775,706
NT Collective Short Term Invt Fd	Collective trust		2,156,679
* BlackRock LifePath 2035 Index	Collective trust		173,434,324
* Blackrock Short-Term Investment Fund	Collective trust		158,719,538
* BlackRock LifePath 2055 Index	Collective trust		196,966,142
* BlackRock Equity Dividend	Collective trust		208,159,524
* BlackRock Russell 2000 Alpha F	Collective trust		155,481,529
* BlackRock LifePath 2030 Index	Collective trust		126,047,833
* BlackRock Emerging Markets Index F	Collective trust		80,775,341
* BlackRock MSCI ACWI EX US CL F	Collective trust		97,184,160
* BlackRock LifePath 2060 Index	Collective trust		127,629,965
American Euro Pacific	Registered investment company		67,771,226
* BlackRock, Inc. common stock	Common stock		71,193,486
* BlackRock LifePath 2025 Index	Collective trust		58,798,871
* BlackRock Total Return Bond Fund	Collective trust		48,900,898
* Self-Directed Brokerage Account	Self-directed brokerage account		58,499,749
* BlackRock LifePath Retirement Index	Collective trust		35,947,846
* BlackRock US TIPS Fund	Collective trust		32,777,996
* BlackRock US Debt Index Fund	Collective trust		30,194,060
* BlackRock Strategic Income Opportunities Fund	Collective trust		29,021,202
Mirova global sustainable equity fund Y	Registered investment company		23,338,444
The PNC Financial Services Group, Inc. Common Stock	Common stock		5,346,841
* BlackRock LifePath 2065 Index	Collective trust		15,575,642
			<u>3,317,686,318</u>
	Participant loans (maturing 2023 to 2037 at interest rate of 3.25% to 8.25%)**		17,696,059
* Notes receivable from participants			<u>17,696,059</u>
<b>TOTAL</b>			<u><u>\$ 3,335,382,377</u></u>

\* Party-in-interest as defined by ERISA

\*\* Cost information is not required for participant-directed investments and is, therefore, not included.

\*\*\* Net of \$228,569 in deemed loan distributions

See accompanying Independent Auditor's Report.

(Concluded)

# BLACKROCK RETIREMENT SAVINGS PLAN

Plan Number: 001

EIN#: 32-0174431

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	Alphabet Inc Capital Stock Usd0.001 Cl A	Common stock	39,740 shares	3,506,260
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	American Tower Corp	Common stock	7,791 shares	1,662,755
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(Continued)

# BLACKROCK RETIREMENT SAVINGS PLAN

Plan Number: 001

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<b>TOTAL</b>			<u><u>\$ 3,335,382,377</u></u>

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