

PRE-AUTHORIZED CASH CONTRIBUTION ("PACC") ENROLLMENT/MODIFICATION/ CANCELLATION FORM

You may use this form to request, modify or cancel automatic purchases from your bank account into your investment account in an iShares Exchange Traded Fund ("ETF").

Please use blue or black ink and print neatly.

Questions?

Call us toll-free at **1-866-iShares** (1-866-474-2737) or visit us online at ishares.ca.

Send this application, along with a voided cheque or personalized deposit slip, to:

State Street Trust Company Canada
Attention: iShares Funds
30 Adelaide Street East
Toronto ON M5C 3G6
Tel: 1-877-537-3406
Fax: 1-416-681-6971
Email: iSharesPACC@statestreet.com

How To Use This Form

This Pre-Authorized Cash Contribution form ("PACC Form") must be submitted and verified by the participant of CDS Clearing and Depository Services Inc. ("CDS Participant") through which Units are held. It is mandatory to complete all fields. It is mandatory for the Unitholder to complete Sections 1-4 and the CDS participant to complete section 5.

1. Complete Section 1, by providing account details your Broker/CDS Participant will use to locate your account.
2. Complete Section 2, by providing direction(s) on which iShares ETF(s) you wish to purchase on a recurring and pre-determined basis. You can find the current list of PACC eligible iShares Funds in the resource library on www.blackrock.com/ca. **NOTE:** Only funds listed on page 2 are PACC eligible.
3. Complete Section 3, by providing your banking details for the Pre-Authorized Debit ("PAD") together with a voided cheque or personalized deposit slip in order to enroll in the PACC Plan.
4. The Unitholder must sign Section 4 and send this PACC Form to the Broker/CDS Participant for completion of Section 5. Unitholders must not complete Section 5.

Note: A Unitholder participating in the PACC Plan may not participate in the Systematic Withdrawal Plan for the same Fund.

A completed PACC Form must be received from the CDS Participant through which Units are held, by State Street Trust Company Canada (the "Plan Agent"), at the address set forth at the top of this PACC Form no later than the "Cut-Off" of 5:00 p.m. (Toronto time) at least ten (10) Business Days before the last Business Day of a month ("Contribution Date") to enable a beneficial owner of Units ("Unitholder") to be enrolled in the PACC Plan and to invest in additional whole Units of the ETF(s), on the Contribution Date to which such record date relates. The funds will be debited from the PACC Plan Participant's designated account five (5) Business Days before the last Business Day of a month ("Debit Date"). PACC instructions received after the Cut-Off will not be effective in respect of that Contribution Date but effective for the next Contribution Date.

The Unitholder may revoke the authorization at any time, subject to providing sufficient notice to the Plan Agent prior to the Cut-Off. For more information on the right to cancel this authorization, contact the Financial Institution named above or visit www.payments.ca.

List of Funds Eligible for Pre-Authorized Cash Contribution Plan

Symbol	Fund Name
CBH	iShares 1-10 Year Laddered Corporate Bond Index ETF
CBO	iShares 1-5 Year Laddered Corporate Bond Index ETF
CDZ	iShares S&P/TSX Canadian Dividend Aristocrats Index ETF
CEW	iShares Equal Weight Banc & Lifeco ETF
CGL	iShares Gold Bullion ETF (CAD-Hedged)
CGL.C	iShares Gold Bullion ETF
CGR	iShares Global Real Estate Index ETF
CHB	iShares U.S. High Yield Fixed Income Index ETF (CAD-Hedged)
CIE	iShares International Fundamental Index ETF
CIF	iShares Global Infrastructure Index ETF
CJP	iShares Japan Fundamental Index ETF (CAD-Hedged)
CLF	iShares 1-5 Year Laddered Government Bond Index ETF
CLG	iShares 1-10 Year Laddered Government Bond Index ETF
CLU	iShares US Fundamental Index ETF – CAD Hedged
CLU.C	iShares US Fundamental Index ETF
CMR	iShares Premium Money Market ETF
COW	iShares Global Agriculture Index ETF
CPD	iShares S&P/TSX Canadian Preferred Share Index ETF
CRQ	iShares Canadian Fundamental Index ETF

Symbol	Fund Name
CSD	iShares Short Duration High Income ETF (CAD-Hedged)
CUD	iShares US Dividend Growers Index ETF (CAD-Hedged)
CVD	iShares Convertible Bond Index ETF
CWO	iShares Emerging Markets Fundamental Index ETF
CWW	iShares Global Water Index ETF
CYH	iShares Global Monthly Dividend Index ETF (CAD-Hedged)
FIE	iShares Canadian Financial Monthly Income ETF
GBAL	iShares ESG Balanced ETF Portfolio
GCNS	iShares ESG Conservative Balanced ETF Portfolio
GEQT	iShares ESG Equity ETF Portfolio
GGRO	iShares ESG Growth ETF Portfolio
SVR	iShares Silver Bullion ETF (CAD-Hedged)
SVR.C	iShares Silver Bullion ETF
XBAL	iShares Core Balanced ETF Portfolio
XCNS	iShares Core Conservative Balanced ETF Portfolio
XEQT	iShares Core Equity ETF Portfolio
XGRO	iShares Core Growth ETF Portfolio
XINC	iShares Core Income Balanced ETF Portfolio
XQB	iShares Core High Quality Canadian Bond Index ETF

1. Unitholder Information

Unitholders please complete the below in order for brokers/CDS Participants use.

Name of Unitholder

Brokerage Account Number (Last 4 Digits)

Brokerage Account Type (e.g. RRSP, TFSA, Margin, Non-registered, etc.)

2. Investment Directions

Please select one:

☐ CREATE a New Investment ☐ MODIFY an Existing Investment ☐ CANCEL an Existing Investment

Please select the investment frequency:

☐ Monthly ☐ Quarterly* ☐ Annually

*(March, June, September, December)

CAD-Denominated iShares ETFs

	Fund Name	Amount (Minimum: \$50 per Fund Maximum: \$5,000 per Fund)
1	<input type="text"/>	\$ <input type="text"/>
2	<input type="text"/>	\$ <input type="text"/>
3	<input type="text"/>	\$ <input type="text"/>
4	<input type="text"/>	\$ <input type="text"/>
5	<input type="text"/>	\$ <input type="text"/>
6	<input type="text"/>	\$ <input type="text"/>
7	<input type="text"/>	\$ <input type="text"/>
8	<input type="text"/>	\$ <input type="text"/>
9	<input type="text"/>	\$ <input type="text"/>
10	<input type="text"/>	\$ <input type="text"/>
11	<input type="text"/>	\$ <input type="text"/>
12	<input type="text"/>	\$ <input type="text"/>
13	<input type="text"/>	\$ <input type="text"/>
14	<input type="text"/>	\$ <input type="text"/>
15	<input type="text"/>	\$ <input type="text"/>
Total Amount to Invest =		\$ <input type="text"/>

(Must include a total amount)

3. Unitholder's Banking Details for Pre-authorized Debit ("pad")

CAD-Denominated Bank Account

Contributions into CAD-Denominated Funds must be made from a CAD account in Canada)

Name(s) of Bank Account Owner(s) – if more than one owner, please list all

Name of Financial Institution

Branch Address (Street Number, Street Name)

Branch Address (City, Province, Postal Code)

Branch Transit Number

Institution ID Number

Account Number

Please check one:

☐

Chequing

☐

Savings

Attach your voided cheque or personalized deposit slip here:

JANE DOE 123 Name Street Toronto Ontario M7M 6T6		076	
DATE		D D M M Y Y Y Y	
PAY TO THE ORDER OF		\$	
		/100 DOLLARS	
		BANK ACCOUNT	
MEMO		MP	
⑈076⑈ ⑆12345⑆003⑆ 0088888888⑈			
Cheque Serial Number	Branch Transit Number	Institution ID Number	Account Number

4. Signature of Unitholder

By signing this form, the Unitholder authorizes the CDS Participant to instruct the Plan Agent to enroll in the iShares PACC Plan, with respect to the ETF(s) indicated on Section 1 – Investment Directions, on their behalf and authorizes the Plan Agent to debit the above account(s) by the amount(s) indicated, on the Debit Date, and to return any amounts that would result in fractional Units, and therefore not invested. The pre-authorized debit permits a Personal PAD for the purchase of the Units as selected above. The Unitholder agrees that, if in any period, the Plan Agent's attempt to withdraw the authorized amount(s) is unsuccessful, this enrollment may be terminated.

I have certain recourse rights if any debit does not comply with this agreement. For example, I have the right to receive reimbursement for any debit that is not authorized or is not consistent with this PAD Agreement. To obtain more information on my recourse rights, I may contact my financial institution or visit www.cdnpay.ca.

My enrollment and other PACC Plan information will be accessible by BlackRock and its U.S. affiliates and by U.S. affiliates of the Plan Agent for purposes of operating and administering the PACC Plan.

Signature of Unitholder

Date

5. CDS Participant/Broker to Complete

The CDS participant/Broker (NOT the Unitholder) must complete the following section prior to submitting this form to the plan agent. The undersigned CDS Participant hereby confirms as follows:

1. It is holding Units on behalf of one or more Unitholders whose account information appears below;
2. It is completing this PACC Form on behalf of those Unitholders;
3. The information below is accurate;
4. It directs the Plan Agent to enroll the Unitholder in the PACC Plan in accordance with these instructions;
5. It will allot the Units purchased under this PACC to the Unitholder's account accordingly; and,
6. It is a financial entity or securities dealer governed by the Proceeds of Crime (Money Laundering) and Terrorist Financing Act and Regulations made thereunder

Name of CDS Participant

CUID

Unitholder Account Information:

Unitholder Name on Account

Unitholder Account Number and Reference Number (if applicable)

Type of Account:

☐

Registered

☐

Non - Registered

Unitholder Address (Street Number, Street Name)

Unitholder Address (City, Province, Postal Code)

CDS Participant Contact Information:

Name & Title

Phone Number

E-mail Address

Fax Number

Authorized CDS Participant Signature

Date

CDS Participant – Please return the completed PACC Form along with the Unitholder's VOID cheque(s) or personalized deposit slip(s) to the address indicated at the top of the form.

Want to learn more?

iShares.ca | 1-866-iShares (1-866-474-2737)