BlackRock Ir	ic.												
Form 4	• • • •												
February 15,													
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION										-	OMB APPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287				
Check this box if no longer							Expires:	January 31, 2005					
subject to	CHANGES IN BENEFICIAL OW					LOW	NERSHIP OF	Estimated a					
Section 16. SECURITIES								burden hou	irs per				
Form 5	Form 4 or Form 5 Eiled pursuant to Section 16(a) of the Securities Exchange Act of 1024								f = Act of 103/	response	0.5		
	obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section												
<i>See</i> Instruction 1(a) of the Fublic Outry Holding Company Act of 1935 of Section 30(h) of the Investment Company Act of 1940 1(b).													
(Print or Type R	esponses)												
1. Name and Address of Reporting Person [*]				2. Issuer Name and Ticker or Trading					5. Relationship of Reporting Person(s) to				
McCombe N	S	Symbol						Issuer					
		H	BlackRock Inc. [BLK]						(Check all applicable)				
(Last)	(First) (M	iddle) 3	. Date of	Earliest	Tra	nsaction			(enec	(ok un upplicuolo)			
			(Month/Day/Year)						Director 10% Owner				
BLACKROO 52ND STRE	ST (02/13/2017						_X_ Officer (give title Other (specify below) below)					
52ND STRE	EI								Senior I	Managing Dire	ctor		
		4. If Amendment, Date Original						6. Individual or Joint/Group Filing(Check					
Filed(Month/Day/Year)						Applicable Line) _X_ Form filed by One Reporting Person							
NEW YORK, NY 10055									Form filed by More than One Reporting				
		7:)							Person				
(City)	(State) (Zip)	Table	e I - Nor	1-De	rivative S	Securit	ties Ace	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Date	Execution Date, if any		3. 4. Securities , if TransactionAcquired (A) or Code Disposed of (D)					5. Amount of	6. Ownership Form: Direct			
Security (Instr. 3)	(Wonth/Day/Tear)								Securities Beneficially	(D) or	Beneficial		
				(Instr. 8) (Instr. 3, 4 and				and 5) Owned		Indirect (I) (Instr. 4)	Ownership		
									Following Reported		(Instr. 4)		
							(A)		Transaction(s)				
				Code	v	Amount	or (D)	Price	(Instr. 3 and 4)				
Shares Of													
Common				~			_	* 0		_			
Stock (par	02/13/2017			G	V	132	D	\$0	28,995 <u>(1)</u>	D			
Value \$0.01 Per Share)													
r er share)													

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address			Relationships			
1	Director	10% Owner	Officer	Other		
McCombe Mark BLACKROCK, INC. 55 EAST 52ND STREET NEW YORK, NY 10055			Senior Managing Director			
Signatures						
/s/ Daniel R. Waltcher as Attor McCombe	ney-in-Fa	ect for Mark	02/15/2017			

**Signature of Reporting Person

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- Includes Common Stock, Restricted Stock that will vest over a period of 1 to 3 years and Restricted Stock Units that will vest in whole or
 (1) in part only on the satisfaction of one or more previously-disclosed Common Stock price targets. Restricted Stock and Restricted Stock Units are payable solely by delivery of an equal number of shares of Common Stock.

Date

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.