Edgar Filing: BLACKROCK FLOATING RATE INCOME TRUST - Form 4

BLACKRO Form 4	OCK FLOATING	RATE IN	COME	TRUST							
October 16	, 2013										
FORM		CT A TEC	CECU			VCHANC	E COMMESIO	NT	PPROVAL		
	UNITED	SIAIES		shington			E COMMISSIO	N OMB Number:	3235-0287		
Check					, 2000			Expires:	January 31,		
if no lo subject Section	to SIAIEN 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP (SECURITIES							2005 average urs per		
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940								. 0.5			
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> ROBARDS KAREN P			2. Issuer Name and Ticker or Trading Symbol BLACKROCK FLOATING RATE			Issuer	5. Relationship of Reporting Person(s) to Issuer				
				ME TRUS			(Check all applicable)				
(Mon			(Month/	3. Date of Earliest Transaction Month/Day/Year) 10/15/2013			X_ Director Officer (g below)	Officer (give title Other (specify			
(Street) 4. If An				If Amendment, Date Original led(Month/Day/Year)			Applicable Line)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
NEW YOI	RK, NY 10055						Form filed b Person	y More than One R	eporting		
(City)	(State)	(Zip)	Tab	ole I - Non-I	Derivati	ve Securities	Acquired, Disposed	l of, or Beneficia	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deeme Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8)	Dispos (Instr. 2	ed (A) or ed of (D) 3, 4 and 5) (A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amour	nt (D) Pric	ce				
Reminder: Re	eport on a separate line	e for each cla	ass of sec	urities bene	-						
					info req disp	ormation co uired to res	espond to the coll ntained in this for pond unless the for ently valid OMB c	m are not orm	SEC 1474 (9-02)		

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

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number	6. Date Exercisable and	7. Title and Amount of	8.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transactio	onof Derivative	Expiration Date	Underlying Securities	D
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	 Acquired (A) or Disposed (D) (Instr. 3, and 5) 	d of					
				Code V	7 (A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Performance Rights (1)	<u>(2)</u>	10/15/2013		А	93.27		(3)	(3)	Common Stock	93.27	

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
ROBARDS KAREN P 55 EAST 52ND STREET NEW YORK, NY 10055	Х							
Signatures								
/s/ Eugene Drozdetski as Attorney-in-Fact		10/16	5/2013					
<u>**</u> Signature of Reporting Person		Da	ate					

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).
- (1) The Performance Rights were accrued under the BlackRock Deferred Compensation Plan.
- (2) One Performance Right is convertible into the cash value of one share of BlackRock Floating Rate Income Trust.
- (3) The Performance Rights are to be settled 100% in cash at the deferral period chosen by the reporting person.

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.