Powers John F Form 3							
January 10, 2012							
FORM 3 UNITED STA	TES SECURITIES AND EXCHANGE COMMISSION		ION	OMB APPROVAL			
Washington, D.C. 20549				OMB Number:	3235-0104		
INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES			Expires:	January 31, 2005			
SECURITIESEstimated average burden hours per responseFiled 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 1940Estimated average burden hours per response							
(Print or Type Responses)							
1. Name and Address of Reporting Person <u>*</u> Powers John F	2. Date of Event Requiring Statement (Month/Day/Year) 01/03/2012	<sup>3</sup> 3. Issuer Name <b>and</b> Ticker or Trading Symbol BLACKROCK CREDIT ALLOCATION INCOME TRUST IV [BTZ]					
(Last) (First) (Middle)	01/05/2012	4. Relationship of Reporting	5. If A	mendment, D	ate Original		
		Person(s) to Issuer	Filed(N	/Ionth/Day/Yea	r)		
55 AST 52ND STREET							

(Street)

# NEW YORK, NYÂ 10055

(City) (State)

1.Title of Security (Instr. 4)

(Zip)

2. Amount of Securities 3. Beneficially Owned Ownership (Instr. 4) Form: Direct (D)

(Check all applicable)

(give title below) (specify below)

10% Owner

Other

Table I - Non-Derivative Securities Beneficially Owned

or Indirect (I) (Instr. 5)

SEC 1473 (7-02)

\_X\_\_ Director

Officer

4. Nature of Indirect Beneficial Ownership (Instr. 5)

Reporting Person

Person

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting

\_ Form filed by More than One

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

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date		Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect	

(Instr. 5)

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Powers John F 55 AST 52ND STREET NEW YORK, NY 10055	ÂX	Â	Â	Â		
Signatures						
/s/ Noah Gellner as Attorney-in-Fact	01/03/2012					
**Signature of Reporting Person		Date				

# **Explanation of Responses:**

## No securities are beneficially owned

- \* If the form is filed by more than one reporting person, see Instruction 5(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).

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#### **Remarks:**

#### No securities are beneficially owned.

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.