

HSA Rollover Certification



Use this form to deposit HSA rollover funds received directly by you into an HSA with Discovery Benefits.

1. Individual Information

<input type="text"/>		<input type="text"/> - <input type="text"/> - <input type="text"/>
HSA Account Name (First, MI, Last)		Social Security Number
<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/>	<input type="text"/>
Day Telephone	E-mail Address	Birth Date
<input type="text"/>		
Home Address	City	State ZIP

2. Current HSA Trustee or Custodian Information

<input type="text"/>	<input type="text"/>		
Current HSA Trustee or Custodian Name	Current HSA Account Number		
<input type="text"/>			
Address	City	State	ZIP
<input type="text"/> - <input type="text"/> - <input type="text"/>	<input type="text"/> - <input type="text"/> - <input type="text"/>		
Telephone Number	Fax Number		

3. HSA Rollover (For a rollover to be eligible, all must be answered No)

Timeliness – 60 Days

Have more than 60 days elapsed since you received the distribution from the distributing HSA? Yes No

Twelve Month Restriction

Did you receive any other distributions from the distributing HSA during the preceding 12 months which you also rolled over? Yes No

Have the assets involved in this transaction been previously rolled over from one HSA to another within the past 12 months? Yes No

Have you made a rollover contribution to the HSA during the preceding 12 months? Yes No

Eligible Plan

Does the rollover deposit consist of funds other than those distributed from either an HSA, Archer MSA, or Medical FSA? Yes No

4. Rules and Conditions Applicable to Rollovers

General Information

A rollover is a way to move funds from one HSA to another HSA. The Internal Revenue Code limits how many rollovers may be taken, how quickly rollovers must be completed and how the Trustee or Custodian must report the transaction. By properly completing this form you are certifying to the Trustee or Custodian that you have satisfied the rules and conditions applicable to your rollover and that you are making an irrevocable election to treat the transaction as a rollover.

Timeliness The funds you receive from the distributing HSA must be deposited into another HSA within 60 days after you receive them. When counting the 60 days, include weekends and holidays. Receipt generally means the day you actually have the funds in hand. For example, the 60 days would begin on the day following the day you pick up the check from the Trustee or Custodian or you receive the check in the mail.

Twelve Month Restriction IRS Notice 2004-50; Q&A 55 indicates that only one rollover contribution may be made to an HSA during a one-year period. Twelve (12) months must pass after receipt of one rollover distribution before you may take another rollover distribution from the same HSA.

5. Signatures

I have read and understand the rollover rules and conditions on this form, and I have met the requirements for making a rollover. Due to the important tax consequences of rolling over funds to an HSA, I have been advised to see a tax professional. All information provided by me is true and correct and may be relied on by the Trustee or Custodian. I assume full responsibility for this rollover transaction and will not hold the Trustee or Custodian liable for any adverse consequences that may result.

I hereby irrevocably designate this contribution of \$ in cash as a rollover contribution.

HSA Account Holder Signature

Date