

HSA Transfer Request Form



To request an HSA Transfer or Rollover from prior custodian to **Beneliance**, please complete this Form and Submit to:

Beneliance

PO Box 55068, Little Rock, AR 72215

Voice: 888-665-1264 Toll-Free Fax: 855-445-1696 Email: support@beneliance.com

PART I - ACCOUNT OWNER INFORMATION (PLEASE PRINT)

Name:	SSN:	DOB:
Address:		
HSAToday Account:	Phone:	Email:

PART II – TRUSTEE TO TRUSTEE TRANSFER

I currently have a Health Savings Account or Medical Savings Account with another Trustee/Custodian and want to transfer the funds directly to Beneliance (DataPath Financial Services)

Current Custodian Contact Name	
Phone and Fax Number:	
Address:	
Current MSA/HSA Account Number:	

I _____, authorize _____ (current custodian) to Directly transfer: _____ All or _____ Part of my account in the following manner. If partial transfer list Amount \$_____.

Check one of the following:

- Make a check payable to (“Beneliance”) and mail to: **Beneliance**, Health Savings Account Dept., PO Box 55068, Little Rock, AR 72215
- The Previous Custodian is going to transfer funds via ACH to Beneliance. Previous Custodian can call **888-665-1264** to receive the account information for this transfer. Amount to transfer \$_____

PART III – HSA ROLLOVER

I have been issued a check in the amount of \$_____ and closed my HSA or MSA. I would like to rollover the funds to establish an HSA with Beneliance (DataPath Financial Services)

(Answer the Rollover Qualification Questions on Page 2 and then complete Part III and IV.)

I want to send my rollover funds via:

- Check** – mail check to: Beneliance, PO Box 55068, Little Rock, AR 72215
- EFT Draft** from my personal bank account at this financial institution:

Bank Name: _____ Account Type: Checking Savings

Route Number: _____ Account Number: _____

PART IV– SIGNATURES

I authorize the transfer of the HSA or MSA assets in the manner described above, and certify that all of the information provided by me may be relied upon by the Trustee or Custodian.

Printed Name _____
Signature _____
Date _____

For Internal Use Only: Our organization agrees to serve as the new Custodian for the account of the above named individual, and as Custodian, we agree to accept the assets being transferred.

Processor Printed Name _____
Processor Signature _____
Date _____

RULES AND CONDITIONS APPLICABLE TO ROLLOVER (Retain instruction page your records)

GENERAL INFORMATION

A rollover is a way to move money or property from a Medical Savings Account (MSA) or existing Health Savings Account (HSA) to a Health Savings Account. The Internal Revenue Code (IRC) 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.

ROLLOVER

1. Timelines

The funds you receive from a MSA or HSA must be deposited into an HSA within 60 days after you receive them. When counting the 60 days, include weekends and holidays. There are generally no exceptions to the 60-day rule and the IRS cannot grant extensions. Receipt generally means the day you actually have the funds in hand. For example, the 60 days would begin on the day you pick up the check from the Trustee or Custodian or you receive the check in the mail.

2. Twelve-Month Restriction

You are entitled to one distribution per year per HSA which may be rolled over. Twelve (12) months must pass after receipt of one distribution which you rollover before you may take another distribution from the same HSA to rollover. The focus is on distributions out of an HSA. An HSA is created by executing a plan agreement, not by depositing a contribution into a separate investment with an existing MSA or HSA.

You are entitled to rollover the same assets only once in a twelve (12) month period. Twelve (12) months must elapse between the time you receive a distribution of the assets to be rolled over and the time you receive another distribution of those same assets for rollover purposes.

HSA Rollover Qualification Questions (for Part III)

(For an eligible rollover, all questions must be answered "NO") Funds from an IRA or SIMPLE IRA may not be rolled over to an HSA.

1. Have more than 60 days elapsed since you received the distribution from the distributing MSA or HSA bank?
 Yes **No**
 2. Did you receive any other distributions from the distributing MSA/HSA during the preceding 12 months, which you also rolled over?
 Yes **No**
-