HSA CONTRIBUTION FORM

Instructions

1. Use this form to make a normal, mistaken distribution, rollover or transfer contribution.
2. Enclose a check made payable to **TASC** (TPA) and forward with completed form to:
   Mail: PO Box 7511 **or Fax: 1-877-231-1287**
   Madison, WI 53707-7511
   If a check will be sent for a transfer from another HSA custodian or trustee, indicate that in the transfer section and forward the completed form without an enclosed check. Transfer checks should be sent to
   Healthcare Bank FBO (Accountholder Name)
   3100 13th Avenue South, Fargo ND 58103.
3. If you have any questions regarding making a contribution to your HSA, please call **1-877-933-3539**. For more information regarding transfers, see the HSA Transfer Information Form.

Accountholder Information

Last Name | First Name | Middle Initial

Social Security Number | Employee ID and Employer (if applicable)

Telephone Number | Email Address

Street Address

City | State | Zip Code

Contribution Information

Contributions over the cash minimum qualify to be invested and will be placed by default into an interest-bearing account. If you would like to change your investment allocation, you may do so by logging in to your account at https://partners.tasconline.com/tasc1ppt. Future contributions will be allocated according to your investment allocation instructions.

Contribution Amount $_____

Contribution for Tax Year _____

Contribution Type (choose one below):

☐ Normal - A normal contribution would include a regular, catch-up, or post-tax contribution.

☐ Mistaken Distribution – Contributions for a mistaken distribution must occur before December 31 of the year in which the mistaken distribution occurred. Contributions received after December 31 will be applied to the contribution maximum for the following year.

☐ Rollover from (choose one): ☐ HSA ☐ MSA **Please include a check.**

Rules and Conditions Regarding Rollovers A rollover is a way to move money or property from one HSA or Medical Savings Account (MSA) to another HSA. The Internal Revenue Code limits the number of rollovers that may be taken, how quickly rollovers must be completed and how the trustee or custodian must report the transaction.
Timeliness The funds you receive from the distributing HSA or MSA must be deposited into another HSA within 60 days of receipt of funds.
Twelve Month Restriction You can only make one rollover contribution per HSA per twelve-month period.

☐ Transfer from (choose one): ☐ HSA ☐ MSA ☐ IRA

☐ I have enclosed a check from the previous trustee or custodian.

Signature

I certify that I am the HSA accountholder or an individual authorized to execute this transaction. I have read and understand the instructions and any rules or conditions relating to and have met the requirements for making this transaction. I assume full responsibility for this transaction and will not hold TASC or Healthcare Bank liable for any adverse consequences that may result. I have not received tax or legal advice from TASC or Healthcare Bank and, if necessary, will seek the advice of a tax or legal professional to ensure my compliance with related laws. All information provided by me is true and correct and may be relied upon by TASC and Healthcare Bank. If I have chosen rollover or transfer as the contribution type, I make an irrevocable election to treat this transaction as such.

Signature of HSA Accountholder | Date