

HEALTH SAVINGS ACCOUNT TRANSFER REQUEST



TRANSFERRING YOUR CURRENT HSA TO A FIFTH THIRD HSA

Your HSA can help keep both your physical and financial health in good shape by saving money while you enjoy certain tax advantages.

That's because your HSA gives you a designated place to save money for medical expenses, which are often unexpected. An HSA can provide greater peace of mind, knowing that funds will be available when you need them to make paying your medical bills easier.

In addition to saving money for medical expenses and retirement, you will enjoy such other benefits as:



A Triple tax advantage¹:

- Contributions are made pre-tax
- Interest/investment earnings on the account are not taxable
- Taxes are not paid upon withdrawal of funds, as long as they're used for an eligible medical expense²



Unused money rolls over from year to year – there's no “use it or lose it” policy



Your account is portable – it moves with you when you change medical plans, change employers, or retire



Online system for simplified account management at **53hsa.com**



Fifth Third Bank Debit MasterCard® to cover medical expenses and make ATM withdrawals

You can use your HSA for a wide range of qualified medical expenses, including doctor's office visits, orthodontics, prescription medication, and even contact lenses.

With your HSA, you're in control of your healthcare costs. You decide how much to contribute to your account, and what expenses you want to pay.

Plus, managing your account is easy with 24/7 online access at **53hsa.com**, where you can check your balance, transfer funds, pay for medical expenses, and more.

Start funding a healthy future today by transferring your HSA to a Fifth Third HSA.

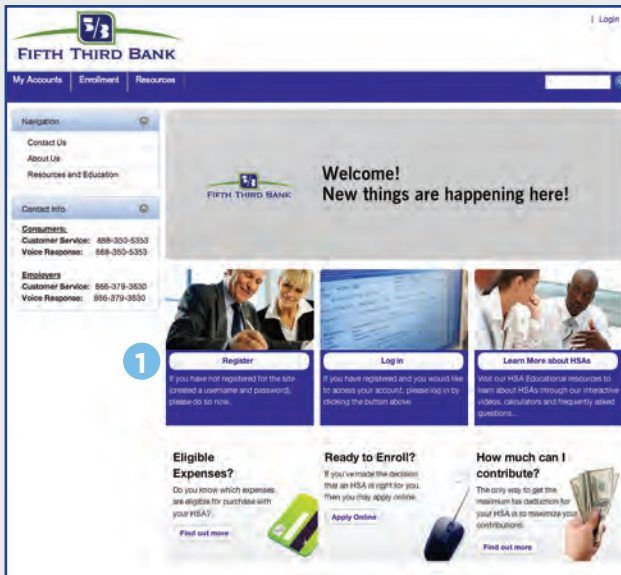
Continue for instructions to transfer your HSA to a Fifth Third Bank HSA.



¹Fifth Third Bank does not provide tax or accounting advice. Please consult an accountant or tax advisor for professional advice on these areas.

²For a list of qualified medical expenses, please visit www.irs.gov.

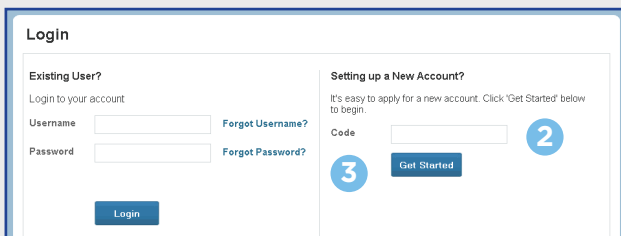
Step 1: Create a New Account



Log in to the online portal at www.53hsa.com

- 1 Click on **Register**
- 2 Enter the appropriate code
 - a. **Employer code** - if your employer offers the Fifth Third Bank HSA. Your employer must provide this code.


OR
 - b. **FTB-77** if you are not associated with an employer group that offers the Fifth Third Bank HSA.



- 3 Click **Get Started**
- 4 Complete the online HSA form to create your account. Be sure to navigate through the full account creation process by clicking **Next** at the bottom of each page after you have completed each section.

Step 2: Complete the HSA Transfer Request Form

HSA TRANSFER REQUEST



1 Instructions

1. **Open your Fifth Third Bank HSA at www.53hsa.com, if you have not yet done so.**
2. Use this form to initiate a direct transfer of funds from your current HSA with another trustee or custodian to an HSA with **Fifth Third Bank**.
3. Complete this form and fax it to **your current HSA trustee or custodian**. Contact your current HSA trustee or custodian for the appropriate fax number.
4. If you do not have access to a fax machine, mail completed form to **your current HSA trustee or custodian**. Contact your current HSA trustee or custodian for the appropriate mailing address.
5. Keep a copy of the form for your records.
6. If you have any questions regarding the completion of this form, please contact the **Fifth Third Bank HSA Support Center at 1-888-350-5353**. If you have questions regarding the status of a requested transfer, please contact **your current HSA trustee or custodian**.

2 Account Holder Information

Last Name	First Name	Middle Initial
Social Security Number	Date of Birth	Fifth Third Bank HSA Account Number
Telephone Number	E-mail Address	
Street Address (cannot be a PO Box)		
City	State	Zip Code

3 Transaction Type

HSA to HSA Transfer (9) I have an HSA with another institution and want to transfer the funds directly to my Fifth Third Bank HSA. (Please complete the *Current Trustee or Custodian Information* section and the *Sign here for Transfers* section.)

MSA to HSA Transfer (10) I have an Archer MSA with another institution and want to transfer the funds directly to my Fifth Third Bank HSA. (Please complete the *Current Trustee or Custodian Information* section and the *Sign here for Transfers* section.)

IRA to HSA Transfer (11) I have an IRA with another institution and want to conduct a one-time direct transfer to my Fifth Third Bank HSA. Note: An IRA-to-HSA contribution is limited to your HSA annual contribution limit and does reduce the amount that can be contributed to an HSA during the year. (Please complete the *Current Trustee or Custodian Information* section and the *Sign here for Transfers* section.)

HSA Rollover (4) I have been issued a check and closed my HSA or MSA, and I would like to roll over the funds to my HSA at Fifth Third Bank. (Please complete the *Rollover Qualification Questions* below and the *Sign here for HSA Rollovers* section.)

HSA Rollover Qualification Questions (All answers must be No for an eligible rollover.)

1. Timeliness

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

(a) 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

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

Once you have created a Fifth Third HSA Account, you can request your existing HSA funds be transferred to your new Fifth Third HSA Account.

- 1** Please read the instructions before you begin.
- 2** Complete the Account Holder Information. This is your personal information.
- 3** Check the Transaction Type. If you have an HSA with another institution and would like to transfer the funds directly to your new Fifth Third HSA, check the first box, labeled "HSA to HSA Transfer."

Step 2: Complete the HSA Transfer Request Form (Cont.)

4 **Current Trustee or Custodian Information**

Institution Name _____ Routing Number _____ Account Number _____
 Street Address _____
 City _____ State _____ Zip Code _____
 Telephone Number _____ Amount to Transfer _____

5 Transfer/Rollover All Part of the funds in the HSA account specified above.

Please make check payable to **Fifth Third Bank fbo [customer name referenced above]** and mail along with a copy of this form to:
 Fifth Third Bank
 Attn: HSA Operations Department
 P.O. Box 638323
 Cincinnati, OH 45263-638323

Fifth Third Bank does not process in-kind transfers.

Signatures

Sign here for HSA Rollovers

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 or property 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 acknowledge and agree that neither Fifth Third Bank nor any of its employees, officers or agents has provided any recommendation for a fee or other compensation (direct or indirect) with respect to this rollover transaction, including whether, in what amount, in what form, and to what destination, the rollover should be made. I further acknowledge and agree that neither Fifth Third Bank nor any of its employees, officers or agents has acted as a "fiduciary" (within the meaning of the U.S. Employee Retirement Income Security Act of 1974, as amended and/or the U.S. Internal Revenue Code of 1986, as amended, as applicable) in connection with this rollover transaction, and that there is no agreement or arrangement (written or verbal) that any such recommendation has been or will be rendered or that Fifth Third Bank, or any of its employees, officers or agents, has acted or will act as a fiduciary in connection with this rollover transaction.]

Sign here for Transfers

I direct the current trustee or custodian to transfer my HSA or MSA as set forth in this form. 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 transfer transaction and will not hold the Trustee or Custodian liable for any adverse consequences that may result. Fifth Third Bank, as the new custodian, agrees to accept the funds as a transfer.

[I acknowledge and agree that neither Fifth Third Bank nor any of its employees, officers or agents has provided any recommendation for a fee or other compensation (direct or indirect) with respect to the transfer of my HSA or MSA, as applicable, including whether, in what amount, in what form, and to what destination, the transfer should be made. I further acknowledge and agree that neither Fifth Third Bank nor any of its employees, officers or agents has acted as a "fiduciary" (within the meaning of the U.S. Employee Retirement Income Security Act of 1974, as amended and/or the U.S. Internal Revenue Code of 1986, as amended, as applicable) in connection with the transfer of my HSA or MSA, as applicable, and that there is no agreement or arrangement (written or verbal) that any such recommendation has been or will be rendered or that Fifth Third Bank, or any of its employees, officers or agents, has acted or will act as a fiduciary in connection with the transfer of my HSA or MSA, as applicable.]

Signature of HSA Account Holder _____ Date _____ **6** Signature of HSA Account Holder _____ Date _____
 Signature of receiving custodian _____ Date _____

4 Complete the Current Trustee or Custodian Information. This is the bank or institution where your HSA currently resides.

5 Select whether you are requesting **All** of your current HSA funds to be transferred, or if the amount you recorded on the line above is a **Part** of your current HSA funds.

6 Sign and date your form.

Step 3: Submit your HSA Transfer Request Form

Once you've completed and signed your HSA Transfer Request Form:



Make a copy of the HSA Transfer Request Form for your records.



Fax or mail it to your current HSA Trustee or Custodian.



Your HSA Trustee or Custodian will send a check to your Fifth Third HSA.



Questions? Just call our HSA Support Center at 1-888-350-5353.

Fees may apply.

MasterCard is a registered trademark of MasterCard International Incorporated.

Member FDIC. Equal Housing Lender.

HSA TRANSFER REQUEST



Instructions

1. **Open your Fifth Third Bank HSA at www.53hsa.com, if you have not yet done so.**
2. Use this form to initiate a direct transfer of funds from your current HSA with another trustee or custodian to an HSA with **Fifth Third Bank**.
3. Complete this form and fax it to **your current HSA trustee or custodian**.
Contact your current HSA trustee or custodian for the appropriate fax number.
4. If you do not have access to a fax machine, mail completed form to **your current HSA trustee or custodian**.
Contact your current HSA trustee or custodian for the appropriate mailing address.
5. Keep a copy of the form for your records.
6. If you have any questions regarding the completion of this form, please contact the **Fifth Third Bank HSA Support Center at 1-888-350-5353**.
If you have questions regarding the status of a requested transfer, please contact **your current HSA trustee or custodian**.

Account Holder Information

Last Name	First Name	Middle Initial
Social Security Number	Date of Birth	Fifth Third Bank HSA Account Number
Telephone Number	E-mail Address	
Street Address (cannot be a PO Box)		
City	State	Zip Code

Transaction Type

- HSA to HSA Transfer (9)** I have an HSA with another institution and want to transfer the funds directly to my Fifth Third Bank HSA.
(Please complete the Current Trustee or Custodian Information section and the Sign here for Transfers section.)
- MSA to HSA Transfer (10)** I have an Archer MSA with another institution and want to transfer the funds directly to my Fifth Third Bank HSA.
(Please complete the Current Trustee or Custodian Information section and the Sign here for Transfers section.)
- IRA to HSA Transfer (11)** I have an IRA with another institution and want to conduct a one-time direct transfer to my Fifth Third Bank HSA.
Note: An IRA-to-HSA contribution is limited to your HSA annual contribution limit and does reduce the amount that can be contributed to an HSA during the year.
(Please complete the Current Trustee or Custodian Information section and the Sign here for Transfers section.)
- HSA Rollover (4)** I have been issued a check and closed my HSA or MSA, and I would like to roll over the funds to my HSA at Fifth Third Bank. *(Please complete the Rollover Qualification Questions below and the Sign here for HSA Rollovers section.)*

HSA Rollover Qualification Questions *(All answers must be No for an eligible rollover.)*

1. Timeliness
- Have more than 60 days elapsed since you received the distribution from the distributing HSA or MSA? Yes No
- (a) 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
- (b) Have the assets involved in this transaction been previously rolled over from one HSA to another within the past 12 months? Yes No

Current Trustee or Custodian Information

Institution Name	Routing Number	Account Number
Street Address		
City	State	Zip Code
Telephone Number	Amount to Transfer	
Transfer/Rollover	<input type="checkbox"/> All of the funds in the HSA account specified above.	
	<input type="checkbox"/> Part	

Please make check payable to **Fifth Third Bank fbo [customer name referenced above]** and mail along with a copy of this form to:

Fifth Third Bank
Attn: HSA Operations Department
P.O. Box 638323
Cincinnati, OH 45263-638323

Fifth Third Bank does not process in-kind transfers.

Signatures

Sign here for HSA Rollovers

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 or property 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 acknowledge and agree that neither Fifth Third Bank nor any of its employees, officers or agents has provided any recommendation for a fee or other compensation (direct or indirect) with respect to this rollover transaction, including whether, in what amount, in what form, and to what destination, the rollover should be made. I further acknowledge and agree that neither Fifth Third Bank nor any of its employees, officers or agents has acted as a "fiduciary" (within the meaning of the U.S. Employee Retirement Income Security Act of 1974, as amended and/or the U.S. Internal Revenue Code of 1986, as amended, as applicable) in connection with this rollover transaction, and that there is no agreement or arrangement (written or verbal) that any such recommendation has been or will be rendered or that Fifth Third Bank, or any of its employees, officers or agents, has acted or will act as a fiduciary in connection with this rollover transaction.

Signature of HSA Account Holder _____ Date _____

Sign here for Transfers

I direct the current trustee or custodian to transfer my HSA or MSA as set forth in this form. 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 transfer transaction and will not hold the Trustee or Custodian liable for any adverse consequences that may result. Fifth Third Bank, as the new custodian, agrees to accept the funds as a transfer.

I acknowledge and agree that neither Fifth Third Bank nor any of its employees, officers or agents has provided any recommendation for a fee or other compensation (direct or indirect) with respect to the transfer of my HSA or MSA, as applicable, including whether, in what amount, in what form, and to what destination, the transfer should be made. I further acknowledge and agree that neither Fifth Third Bank nor any of its employees, officers or agents has acted as a "fiduciary" (within the meaning of the U.S. Employee Retirement Income Security Act of 1974, as amended and/or the U.S. Internal Revenue Code of 1986, as amended, as applicable) in connection with the transfer of my HSA or MSA, as applicable, and that there is no agreement or arrangement (written or verbal) that any such recommendation has been or will be rendered or that Fifth Third Bank, or any of its employees, officers or agents, has acted or will act as a fiduciary in connection with the transfer of my HSA or MSA, as applicable.

Signature of HSA Account Holder _____ Date _____



Signature of receiving custodian _____ Date _____

Rules and Conditions Applicable to Rollovers and HSA, or IRA Transfers

General Information

A rollover is a way to move money or property from one HSA, IRA, or MSA 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.

HSA Rollover

1. Timeliness

The funds you receive from the distributing HSA or MSA 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.

(a) **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 roll over before you may take another distribution from the same HSA to roll over. 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 within an existing HSA.

(b) You are entitled to roll over 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 until you receive another distribution of those same assets for rollover purposes. IRS Notice 2004-50; Q&A 55 indicates that only one rollover contribution may be made to an HSA during a one-year period.

Individual Retirement Account (IRA) into HSA*

One-time transfer from IRA to HSA

The new rules allow for a one-time contribution to an HSA of amounts distributed from an IRA. The contribution must be made in a direct trustee-to-trustee transfer. The IRA transfer will not be included in income or subject to the early withdrawal additional tax.*

Unlike Health FSA/HRA transfers, the IRA transfer is not treated as a rollover contribution. Thus any amounts transferred from the IRA to the HSA during the year reduce the maximum amount that may otherwise be contributed to the HSA during the year. Generally, only one transfer may be made during the lifetime of an individual.

If an individual electing the one-time transfer does not remain an eligible individual for the 12 months following the month of the contribution, the transferred amount is included in income and is subject to a 10 percent additional tax.