

Use this form to make a normal contribution, mistaken distribution correction or rollover contribution to your Health Savings Account (HSA). Use the HSA Transfer Form to request a transfer from another custodian/trustee into your HSA Administered by Flyte HCM. Enclose a check made payable to Flyte HCM, Inc. and forward with completed form to Flyte HCM, PO Box 3260, Burnsville, MN 55337. If you have any questions regarding HSA contributions, please email claims@flytehcm.com or call 952.746.0000.

Accountholder Information

First Name _____

MI Last Name _____

Social Security Number *(required)* _____

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://flytehcm.lh1ondemand.com>. Future contributions will be allocated according to your investment allocation instructions.

Contribution Amount: \$ _____

Contribution for Tax Year: _____

Contributions for a calendar year made by check must be received no later than three (3) business days prior to the tax filing deadline (generally April 15) of the following calendar year. For example, Calendar Year 2018 contributions must be received no later than April 12, 2019. Electronic contributions made online at <https://flytehcm.lh1ondemand.com> may be submitted up to the deadline.

Contribution Type *(choose one of the options below)*

- Normal** - A normal contribution would include a regular, catch-up, or post-tax contribution.
- Mistaken Distribution** - Contributions for a mistaken distribution must be made before April 15 of the following calendar year provided there is clear and convincing evidence that the amount(s) distributed was because of a mistake due to reasonable cause.

Date of Mistaken Distribution: _____

Full amount of Original Distribution (if partial repayment): \$ _____

Reason the original distribution was a mistake: _____

- Rollover** from HSA **or** MSA **or** IRA

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. IRA rollovers have additional restrictions.

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 and cannot exceed the annual maximum limit.

- I have enclosed a check from the previous trustee or custodian for my rollover.

Certification

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 Flyte HCM or Healthcare Bank, a division of Bell Bank liable for any adverse consequences that may result. I have not received tax or legal advice from Flyte HCM 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 Flyte HCM and Healthcare Bank. If I have chosen rollover as the contribution type, I make an irrevocable election to treat this transaction as such.

Signature of Accountholder *Please be advised - unsigned forms cannot be processed.* _____

Date _____