Employee Benefits Corporation

Transfer of Assets

##37PNC##################

Ensure you have an active WealthCare Saver* Health Savings Account (HSA) and account number (starting with 601) through your Administrator.

Complete sections 1 through 4 in their entirety, including the full account numbers of the HSA you are transferring to (section 1) and the HSA you are transferring from (section 2).

Mail completed form to your previous HSA custodian. Retain a copy of this form and direct questions on the status of your transfer to your previous HSA custodian. Only use this form if the assets will be transferred directly from your existing HSA, MSA, or IRA custodian.

Note: Please complete this form to transfer assets from an existing HSA, MSA, or IRA custodian to your HSA with WealthCare Saver. Some custodians may require you to submit their forms in addition to this form. Please check with your previous custodian to ensure the necessary documentation is completed.

Please complete a separate form for each account to be transferred. You may wish to review IRS publication 969 found at www.irs.gov/pub/irs_pdf/p696.pdf.

Please allow 10-14 business days from receipt of a complete and accurate transfer request for processing and transmission of assets to the receiving custodian.

Mail completed form
to your previous HSA Custodian
for processing

Questions about this form?
1-800-346-2126
participantservices@ebcflex.com

Transfer my HSA TO this account

Section 1: HSA Account Information (WealthCare Saver as Custodian)

ACCOUNT NUMBER (12 digits beginning with 601)

LAST NAME | FIRST NAME | MIDDLE INITIAL

EMPLOYER NAME | SOCIAL SECURITY NUMBER ___ - ___ - ____

EMAIL ADDRESS | TELEPHONE NUMBER

STREET ADDRESS

CITY | STATE | ZIP CODE

Transfer my HSA FROM this account

Section 2: Previous Custodian Information

ACCOUNT NUMBER

BANK NAME

TELEPHONE NUMBER (PLEASE INCLUDE AREA CODE)

STREET ADDRESS

CITY | STATE | ZIP CODE

Complete Next Page ›

Section 3: Funding Instructions

Select type of transfer:

☐ HSA (Transaction Code 208) ☐ MSA (Transaction Code 209) ☐ IRA (Transaction Code 210)

Select amount of transfer:

☐ Entire deposit account balance ☐ Specific dollar amount of deposit account balance: $ _____

_____ ____ / ____ / _____

LEGAL SIGNATURE OF ACCOUNT HOLDER (FIRST & LAST NAME REQUIRED) DATE

The deposit account balance refers to the cash balance in your HSA only. As applicable, you may have an associated HSA investment account with a separate portfolio balance. If you wish for any or all of your investment account portfolio balance to be included in your deposit account balance transfer, **you must initiate a liquidation of investments.** As the Custodian of your HSA, WealthCare Saver, does not initiate the liquidation of investment holdings and does not accept in-kind transfers of investment assets.

Section 4: Signature

I certify that I am the HSA account holder and legally authorized to receive payment(s) from this HSA and that all information provided by me is true and correct. I further certify that no tax advice has been given to me by WealthCare Saver as Custodian, or its affiliates. I understand that I may consult a tax professional or legal counsel. All decisions regarding this request to transfer assets from my existing account at the Previous Custodian named above are my own. I acknowledge that I have met the requirements for making the above request and I assume full responsibility for this request to transfer assets and will not hold WealthCare Saver as Custodian, or its affiliates, liable for any adverse consequences that may result.

_____ ____ / ____ / _____

LEGAL SIGNATURE OF ACCOUNT HOLDER (FIRST & LAST NAME REQUIRED) DATE

Section 5: Transfer Instructions for Previous Custodian

Please liquidate the amount shown in Section 3 and make check payable to WealthCare Saver FBO (Account Holder Name) HSA. Checks should be mailed along with this form to:

Standard Mailing Address:
WealthCare Saver #010163
BIN 88163
Milwaukee, WI 53288-0163

Overnight Mailing Address:
WealthCare Saver #010163
4900 W. Brown Deer Road
Milwaukee, WI 53223

Section 6: Acceptance by WealthCare Saver as Custodian

WealthCare Saver accepts its appointment as Custodian of the above referenced account and has established an HSA for the Account Holder under Internal Revenue Code Section 223(a). WealthCare Saver, as a Custodian, cannot accept assets other than cash in the form of a check. Upon receipt of the check, the proceeds will be credited to the above referenced HSA.

Accepted by WealthCare Saver



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AUTHORIZED REPRESENTATIVE OF WEALTHCARE SAVER

* Alegeus Technologies, LLC, d/b/a WealthCare Saver, is licensed with the IRS as a Non-Bank Custodian