

IRA Transfer Request Form



To request an IRA Transfer to your Summit HSA or HSAToday® Account, please complete this form and submit to:

DataPath Financial Services
P.O. Box 55068
Little Rock, AR 72215
Fax: 501-687-1409

PART I - ACCOUNT HOLDER INFORMATION (PLEASE PRINT)

Name:		SSN:	
Address:			
City:		State:	Zip:
HSAToday™ or Summit HSA Account Number:			
Work Phone:		Home Phone:	
Email:			
Mother's Maiden Name (Security purposes only):		Date of Birth:	

PART II – TYPE OF REQUEST

Follow the Directions Below

IRA Transfer Request:

I currently have a Health Savings Account with DataPath Financial Services, Inc. and want to do a one-time transfer from my IRA (*Individual Retirement Account*).
(Proceed to Part III)

IMPORTANT: The amount you are allowed to transfer to your HSA is capped at the HSA annual contribution limit as defined in IRS Section 223 less any current tax year contributions already made to your HSA.

IMPORTANT:

If you do not have an HSA Account, please complete an HSA Account Application and submit along with this transfer request form. Ask your Employer or Plan Service Provider for assistance.

PART III. – IRA TRANSFER INFORMATION

This request is for a Trustee-to-Trustee transfer. The monies currently in an Individual Retirement Account (IRA) with another Trustee or Custodian are to be directly transferred to DataPath Financial Services, Inc.

CURRENT IRA CUSTODIAN INFORMATION:

Institution Name:	
Phone:	
Address:	
City, State, Zip:	
Current IRA Account Number:	
Current Custodian Contact Name and Phone:	

TRANSFER INSTRUCTIONS

I _____, authorize my IRA Custodian _____
(HSA Account Owner, Please Print Name) (IRA Custodian Name, Please Print Name)

to make a one-time direct transfer from my IRA to my Health Savings Account Custodian:

Amount to Transfer: \$ _____.

IMPORTANT: The amount you are allowed to transfer to your HSA is capped at the HSA annual contribution limit as defined in IRS Section 223 less any current tax year contributions already made to your HSA.

Make a check payable to DataPath Financial Services, Inc. for the above account and mail to:

(Please include a copy of this form, Part III and from Page 1, Parts I & II)

**DATAPATH FINANCIAL SERVICES, INC.
PO BOX 9668, DEPT #4473
CONWAY, AR 72033**

PART III. – ACCOUNT HOLDER SIGNATURE

Sign Here for an IRA Trustee to Trustee Transfer

I authorize the transfer of the IRA 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.

Account Holder – Signature Required:

Date:

RULES AND CONDITIONS APPLICABLE TO ROLLOVER

GENERAL INFORMATION

President George W. Bush signed the Health Opportunity Patient Empowerment Act of 2006 on December 20, 2006. The law, part of the Tax Relief and Health Care Act of 2006, provides new opportunities for health savings accounts (HSA) participants to build their funds.

HSA provisions of the Act include:

One time transfer from IRAs to HSAs

The new rules allow for a one-time contribution to an HSA of amounts distributed from an Individual Retirement Arrangement (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.

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 subject to a 20 percent additional tax.

For Internal Use Only: Accepting HSA Custodian

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.

DataPath Financial Services, Inc.
PO Box 55068
Little Rock, AR 72215

Authorized Signature of New Custodian

Date