



##37PNC#####

# Transfer of Assets

Please complete this form to transfer assets from an existing HSA, MSA or IRA custodian to your new HSA custodian. Some custodians may require you to submit their forms in addition to this form. Please check with your current custodian to ensure the necessary documentation is completed. Only use this form if the assets will be transferred directly from your existing HSA, MSA or IRA custodian. If your funds have been distributed to you from your existing custodian and you would like the funds to rollover into your HSA, please use the 'HSA Rollover Contribution' form. **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/p969.pdf](http://www.irs.gov/pub/irs-pdf/p969.pdf).

Please Note: It may take up to 10 days for the completion of the transfer of assets, (from the time this form is received).



## Mail completed form and account statement to:

P.O. Box 162177  
Altamonte Springs, FL 32716



## Questions about this form?

855.424.7211  
M-F, 8:00 a.m. - 8:00 p.m. ET

### Section 1: HSA Account Information (PNC Bank as Custodian)

ACCOUNT NUMBER

LAST NAME

FIRST NAME

MIDDLE INITIAL

EMPLOYER NAME

SOCIAL SECURITY NUMBER

EMAIL ADDRESS

TELEPHONE NUMBER

STREET ADDRESS

CITY

STATE

ZIP CODE

### Section 2: Current 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 one)

#### Select type of transfer:

☐

HSA  
(Transaction Code 208)

☐

MSA  
(Transaction Code 209)

☐

IRA\*  
(Transaction Code 210)

\_\_\_\_\_  
SIGNATURE OF ACCOUNT HOLDER

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
DATE

### Section 4: Signature

I certify that I am the HSA account holder and legally authorized to receive payment(s) from this HSA account and that all information provided by me is true and correct. I further certify that no tax advice has been given to me by PNC Bank 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 Current 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 PNC Bank as Custodian, or its affiliates, liable for any adverse consequences that may result.

\_\_\_\_\_  
SIGNATURE OF ACCOUNT HOLDER

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
DATE

### Section 5: Medallion Signature Guarantee

Your current custodian/transfer agent may require a medallion signature guarantee. Acceptable signature guarantees may be obtained from banks or brokerage firms that are members of the Securities Transfer Association Medallion Signature Program (STAMP), the New York Stock Exchange Medallion Signature Program (MSP), or the Stock Exchange Medallion Program (SEMP). Please ensure that the original form is submitted. Photocopies, faxes and notarized signatures are not acceptable signature guarantees.

\_\_\_\_\_  
GUARANTOR'S FIRM

\_\_\_\_\_  
GUARANTOR'S SIGNATURE

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
DATE

\_\_\_\_\_  
STAMP

Complete Next Page ➤

## Section 6: Transfer Instructions

☐ Entire account balance

☐ Specific dollar amount of transfer:

\$ \_\_\_\_\_

☐

Close Account

☐

Keep Account Open

## Section 7: Instructions to Custodian/Transfer Agent

**Please liquidate the amount shown in Section 6 and make check payable to PNC Bank FBO (Accountholder Name) HSA. Checks should be mailed along with this form to:**

**PNC #010163**

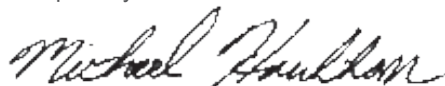
**BIN 88163**

**Milwaukee, WI 53288-0163**

## Section 8: Acceptance by PNC Bank as Custodian

PNC Bank 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). PNC Bank, 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 PNC Bank



AUTHORIZED REPRESENTATIVE OF PNC BANK

DATE

\_\_\_\_ / \_\_\_\_ / \_\_\_\_