

2011 Tax Organizer

Health Savings Account (HSA) Questions

Complete a separate form for each HSA Plan.

| High Deductible Health Plan Information | | | |
|--|------------------|--|-----------------------------------|
| Indicate type of coverage under a High Deductible Health Plan | Self Only | | Family Coverage (see Note) |
| Note: Family HDHP coverage is an HDHP covering an eligible individual and at least one other individual (whether or not that individual is an eligible individual). | | | |
| Number of Months in High Deductible Health Plan in 2011 | | Minimum Annual Deductible for the High Deductible Plan | \$ |
| | | Maximum Annual Deductible and other out-of-pocket expenses for the High Deductible Plan | \$ |
| Contributions Information | | | |
| Taxpayer HSA contributions for 2011 (Pre-Tax/Cafeteria plan) | | | \$ |
| Taxpayer HSA contributions for 2011 (Non-Pre-Tax/Non-Cafeteria plan) | | | \$ |
| Rollover contributions to HSA for 2011 | | | \$ |
| Employer & Employee HSA Cafeteria Plan contributions for 2011 (Box 12 code W on W-2) | | | \$ |
| Distributions Information | | | |
| Total HSA Distributions for 2011 (bring forms 1099-SA) | | | \$ |
| Were the Gross Distributions used only to pay Qualified Medical Expenses? <input type="checkbox"/> Yes <input type="checkbox"/> No. | | | |
| HSA Account Balance | | | |
| HSA Balance on December 31, 2011 | | | \$ |