

THE BANK OF NEW YORK MELLON
 BENEFITWALLET H.S.A.
 PO BOX 535473
 PITTSBURGH PA 15253

IMPORTANT NOTICE

Please review these tax documents carefully. If you find a discrepancy, please contact the Customer Service number provided on your statement no later than May 31

HSA Account Holders:

If your maximum contribution limit has not been reached, we can accept contributions to your HSA until April 15. If you do make an additional contribution, or have already done so, we will furnish a final 5498-SA by May 31 reflecting the additional contribution.



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SWATHY JOY
 3155 BAYONET COURT
 MARIETTA GA 30068

CORRECTED (if checked)

TRUSTEE'S/PAYER'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number THE BANK OF NEW YORK MELLON BENEFITWALLET H.S.A. PO BOX 535473 PITTSBURGH, PA 15253		OMB No. 1545-1517 Form 1099-SA (Rev. November 2019) For calendar year 2020		Distributions From an HSA, Archer MSA, or Medicare Advantage MSA
PAYER'S TIN 13-5160382	RECIPIENT'S TIN ***-**-9832	1 Gross distribution 1,200.88	2 Earnings on excess cont.	
RECIPIENT'S name, street address (including apt no.), city or town, state or province, country, and ZIP or foreign postal code SWATHY JOY 3155 BAYONET COURT MARIETTA, GA 30068		3 Distribution code 1	4 FMV on date of death	
Account Number: 95002630091637		5 HSA <input checked="" type="checkbox"/> Archer MSA <input type="checkbox"/> MA MSA <input type="checkbox"/>		

**Copy B
For Recipient**
This information
is being furnished
to the IRS.

Form **1099-SA** (Rev. 11-2019) (keep for your records) www.irs.gov/Form1099SA Department of the Treasury - Internal Revenue Service

CORRECTED (if checked)

TRUSTEE'S name, street address, city or town, state or province, country, ZIP or foreign postal code, and telephone number THE BANK OF NEW YORK MELLON BENEFITWALLET H.S.A. PO BOX 535473 PITTSBURGH, PA 15253		1 Employee or self-employed person's Archer MSA contributions made in 2020 and 2021 for 2020		OMB No. 1545-1518 2020		HSA, Archer MSA, or Medicare Advantage MSA Information
TRUSTEE'S TIN 13-5160382		PARTICIPANT'S TIN ***-**-9832		2 Total contributions made in 2020 \$2,300.00	Form 5498-SA	
PARTICIPANT'S name, street address (including apt. no.), city or town, state or province, country, and ZIP or foreign postal code SWATHY JOY 3155 BAYONET COURT MARIETTA, GA 30068		4 Rollover contributions		5 Fair market value of HSA, Archer MSA, or MA MSA \$5,030.86		
Account Number: 95002630091637		6 HSA <input checked="" type="checkbox"/> Archer MSA <input type="checkbox"/> MA MSA <input type="checkbox"/>				

**Copy B
For Participant**
This information
is being
furnished to the
IRS.

Form **5498-SA** (keep for your records) www.irs.gov/Form5498SA Department of the Treasury - Internal Revenue Service