

**HSA BENEFICIARY  
DESIGNATION/CHANGE (FORM 2603H)**



**Please Print or Type**

\_\_\_\_\_  
 CUID Credit Union Name

\_\_\_\_\_  
 Social Security Number HSA Suffix Account Owner's Name (First, Initial, Last)

**(Before filling out the "DESIGNATION OF BENEFICIARY" section, please see instructions on reverse side.)**

**DESIGNATION OF BENEFICIARY**

(Revocable)

**PRIMARY Beneficiary(ies)**

%	Name	Mailing Address	Relationship	Birth Date	SS #

% Column MUST total 100%

**SECONDARY Beneficiary(ies)**

%	Name	Mailing Address	Relationship	Birth Date	SS #

% Column MUST total 100%

**TERTIARY Beneficiary(ies)**

%	Name	Mailing Address	Relationship	Birth Date	SS #

% Column MUST total 100%

(This beneficiary designation overrides all previous designations for this HSA. If you have more than one HSA, you must fill out a separate Beneficiary Designation/Change Form for each HSA.)

**CONSENT OF SPOUSE**

I consent to the designation of beneficiary on this form, and I agree to convert this HSA into the separate property of my spouse to be distributed as shown on this form following my spouse's death. I understand that by signing this consent, I am giving up both my current community/marital property rights in this HSA and my community/marital property rights in any future contributions to this HSA. I further understand that I may not revoke this consent in the future. However, this consent will be automatically revoked if my spouse amends this designation of beneficiary during my lifetime.

X \_\_\_\_\_  
 Signature of Account Owner's Spouse Date (MM/DD/YYYY)

**ACCOUNT OWNER'S SIGNATURE**

(This beneficiary designation is not effective unless signed.)

X \_\_\_\_\_  
 Account Owner's Signature Date (MM/DD/YYYY)

**General Instructions.** A beneficiary can be a person, trust, charity, or your estate. Write only one beneficiary on each line. Make sure that you write the full names of all beneficiaries. For example, if you name your children as beneficiaries, DO NOT merely write “children” on one of the lines; instead, write the full names of all your children on separate lines.

**Order of Payment.** To qualify to receive money from the HSA, a human beneficiary must be alive on the day after your death, and a trust, charity, or estate must be in existence within nine months after your death. If any of the primary beneficiaries you name qualify to receive money, then all of the money will be paid to the primary beneficiaries. The money will be paid to secondary beneficiaries ONLY if none of the primary beneficiaries qualify to receive money. And, the money will be paid to tertiary beneficiaries ONLY if none of the primary or secondary beneficiaries qualify to receive money.

**Primary Beneficiaries.** If you’re naming only one primary beneficiary, put 100% in the percent column. If you’re naming more than one primary beneficiary, you must indicate what percentage each is to receive. The total MUST equal 100%.

If you do not assign a percentage for any primary beneficiary, then all primary beneficiaries will share equally. If you assign all primary beneficiaries a percentage, but the percentage of those that qualify for payment do not total 100%, then the beneficiaries who do qualify will share in proportion to their percentages.

**Secondary Beneficiaries.** If you’re naming only one secondary beneficiary, put 100% in the percent column. If you’re naming more than one secondary beneficiary, you must indicate what percentage each secondary beneficiary is to receive. The percent column MUST equal 100%.

If you do not assign a percentage for any secondary beneficiary, then all of the secondary beneficiaries will share equally. If you assign all secondary beneficiaries a percentage, but the percentages of those that qualify for payment do not total 100%, then the beneficiaries who qualify will share in proportion to their percentages.

**Tertiary Beneficiaries.** If you’re naming one tertiary beneficiary, put 100% in the percent column. If you’re naming two tertiary beneficiaries, you must indicate what percentage each tertiary beneficiary is to receive. The percent column MUST equal 100%.

If you do not assign a percentage for either tertiary beneficiary, then both tertiary beneficiaries will share equally. If you assign both tertiary beneficiaries a percentage, but only one qualifies for payment, then the tertiary beneficiary who qualifies will receive 100%.

**Example.** Mary wants her HSA to be paid to her husband if he is alive on the day after her death. If her husband is not alive, she wants her HSA to be paid equally to her two children. Mary would list her husband’s name under the “Primary Beneficiary(ies)” section with 100%. She would list the two children’s names under the “Secondary Beneficiary(ies)” section with each child receiving 50%.