Form **8889**	**Health Savings Accounts (HSAs)**	OMB No. 1545-0074
Department of the Treasury Internal Revenue Service	▶ Information about Form 8889 and its separate instructions is available at *www.irs.gov/form8889.* ▶ **Attach to Form 1040 or Form 1040NR.**	**2016** Attachment Sequence No. **52**

Name(s) shown on Form 1040 or Form 1040NR	Social security number of HSA beneficiary. If both spouses have HSAs, see instructions ▶

Before you begin: Complete Form 8853, Archer MSAs and Long-Term Care Insurance Contracts, if required.

Part I	**HSA Contributions and Deduction.** See the instructions before completing this part. If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part I for each spouse.

1	Check the box to indicate your coverage under a high-deductible health plan (HDHP) during 2016 (see instructions) . . . . ▶	☐ Self-only ☐ Family	
2	HSA contributions you made for 2016 (or those made on your behalf), including those made from January 1, 2017, through April 18, 2017, that were for 2016. **Do not** include employer contributions, contributions through a cafeteria plan, or rollovers (see instructions)	**2**	
3	If you were under age 55 at the end of 2016, and on the first day of **every** month during 2016, you were, or were considered, an eligible individual with the **same** coverage, enter $3,350 ($6,750 for family coverage). **All others,** see the instructions for the amount to enter	**3**	
4	Enter the amount you and your employer contributed to your Archer MSAs for 2016 from Form 8853, lines 1 and 2. If you or your spouse had family coverage under an HDHP at any time during 2016, also include any amount contributed to your spouse's Archer MSAs	**4**	
5	Subtract line 4 from line 3. If zero or less, enter -0-	**5**	
6	Enter the amount from line 5. But if you and your spouse each have separate HSAs and had family coverage under an HDHP at any time during 2016, see the instructions for the amount to enter	**6**	
7	If you were age 55 or older at the end of 2016, married, and you or your spouse had family coverage under an HDHP at any time during 2016, enter your additional contribution amount (see instructions)	**7**	
8	Add lines 6 and 7	**8**	
9	Employer contributions made to your HSAs for 2016	**9**	
10	Qualified HSA funding distributions	**10**	
11	Add lines 9 and 10	**11**	
12	Subtract line 11 from line 8. If zero or less, enter -0-	**12**	
13	**HSA deduction.** Enter the **smaller** of line 2 or line 12 here and on Form 1040, line 25, or Form 1040NR, line 25	**13**	

Caution: *If line 2 is more than line 13, you may have to pay an additional tax (see instructions).*

Part II	**HSA Distributions.** If you are filing jointly and both you and your spouse each have separate HSAs, complete a separate Part II for each spouse.

14a	Total distributions you received in 2016 from all HSAs (see instructions)	**14a**	
b	Distributions included on line 14a that you rolled over to another HSA. Also include any excess contributions (and the earnings on those excess contributions) included on line 14a that were withdrawn by the due date of your return (see instructions)	**14b**	
c	Subtract line 14b from line 14a	**14c**	
15	Qualified medical expenses paid using HSA distributions (see instructions)	**15**	
16	**Taxable HSA distributions.** Subtract line 15 from line 14c. If zero or less, enter -0-. Also, include this amount in the total on Form 1040, line 21, or Form 1040NR, line 21. On the dotted line next to line 21, enter "HSA" and the amount	**16**	
17a	If any of the distributions included on line 16 meet any of the **Exceptions to the Additional 20% Tax** (see instructions), check here . . . . ▶ ☐		
b	**Additional 20% tax** (see instructions). Enter 20% (.20) of the distributions included on line 16 that are subject to the additional 20% tax. Also include this amount in the total on Form 1040, line 62, or Form 1040NR, line 60. Check box c on Form 1040, line 62, or box b on Form 1040NR, line 60. Enter "HSA" and the amount on the line next to the box	**17b**	