

2020

 VOID CORRECTED

|   |                   |  |   |  |
|---|-------------------|--|---|--|
| ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code |                   | 1 ABLÉ contributions                                       | OMB No. 1545-2262<br><br><b>2020</b><br>Form <b>5498-QA</b> | <b>ABLE Account<br/>Contribution<br/>Information</b><br><br><b>Copy A</b><br><b>For</b><br><b>Internal Revenue<br/>Service Center</b><br><b>File with Form 1096.</b><br>For Privacy Act and<br>Paperwork Reduction<br>Act Notice, see the<br><b>2020 General<br/>Instructions for<br/>Certain Information<br/>Returns.</b> |
|   |                   | \$   |   |  |
|   |                   | 2 ABLÉ to ABLÉ Rollovers                                   |   |  |
|   |                   | \$   |   |  |
| ISSUER'S TIN  | BENEFICIARY'S TIN | 3 Cumulative contributions                                 | 4 Fair market value   |  |
|   |                   | \$   | \$  |  |
| BENEFICIARY'S name  |                   | 5 Check if account opened in 2020 <input type="checkbox"/> | 6 Basis of eligibility                                      |  |
| Street address (including apt. no.)   |                   | 7 Code   |   |  |
| City or town, state or province, country, and ZIP or foreign postal code                                |                   |  |   |  |
| Account number (see instructions)   |                   |  |   |  |

Form **5498-QA**

Cat. No. 67556T

[www.irs.gov/Form5498QA](http://www.irs.gov/Form5498QA)

Department of the Treasury - Internal Revenue Service

**Do Not Cut or Separate Forms on This Page — Do Not Cut or Separate Forms on This Page**

CORRECTED

|  |                   |   |   |
|--|-------------------|---|---|
| ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code  |                   | 1 ABLÉ contributions  | OMB No. 1545-2262<br><br><b>2020</b><br><br>Form <b>5498-QA</b> |
|  |                   | \$  |   |
|  |                   | 2 ABLÉ to ABLÉ Rollovers  |   |
|  |                   | \$  |   |
| ISSUER'S TIN   | BENEFICIARY'S TIN | 3 Cumulative contributions  | 4 Fair market value   |
| BENEFICIARY'S name<br><br>Street address (including apt. no.)<br><br>City or town, state or province, country, and ZIP or foreign postal code<br><br>Account number (see instructions) |                   | \$  | \$  |
|  |                   | 5 If checked, account was opened in 2020 <input type="checkbox"/> | 6 Basis of eligibility  |
|  |                   | 7 Code  |   |
|  |                   |   |   |

**ABLE Account  
Contribution  
Information**

**Copy B**

**For Beneficiary**

This information  
is being furnished  
to the IRS.

Form **5498-QA**

(keep for your records)

[www.irs.gov/Form5498QA](http://www.irs.gov/Form5498QA)

Department of the Treasury - Internal Revenue Service

## Instructions for Beneficiary

The information on Form 5498-QA is furnished to you by the issuer of your Achieving a Better Life Experience (ABLE) savings account. Form 5498-QA reports contributions, rollovers, and program-to-program transfers to this ABLE account for 2020. For more information, see Pub. 907.

**Beneficiary's taxpayer identification number (TIN).** For your protection, this form may show only the last four digits of your TIN (social security number (SSN), individual taxpayer identification number (ITIN), or adoption taxpayer identification number (ATIN)). However, the issuer has reported your complete TIN to the IRS.

**Account number.** May show an account or other unique number the issuer assigned to distinguish your account.

**Box 1.** Shows the amount of contributions made to this ABLE account in 2020. Include all cash contributions and Qualified Tuition Plan (QTP) to ABLE account rollovers, and QTP to ABLE program-to-program transfers. Do not deduct these amounts on your income tax return.

If the total contributions (including any contributions from a section 529 program/QTP), but not including contributions of the designated beneficiary's compensation income made under section 529A(b)(2)(B) (ii) made to your ABLE account for 2020 exceeded \$15,000, or if the contributions of an employed designated beneficiary's compensation income exceeded, the applicable amount under section 529A(b)(2)(B) (ii), the excess contributions, plus the earnings on them, must be returned by the date your tax return is due (including extensions), or you may owe a penalty. Check with your ABLE program to verify that excess contributions and earnings are returned timely. You must keep track of your ABLE account basis (contributions and distributions).

**Box 2.** Shows the amount of any rollover or program-to-program transfer made to this ABLE account from another ABLE account in 2020. Generally, any amount rolled over from one ABLE account to another ABLE account for the benefit of the named beneficiary or of an eligible individual who is a member of the beneficiary's family who is described in section 152(d)(2)(B) is not taxable.

**Box 3.** May show the cumulative amount contributed since the establishment of the ABLE account (or of an ABLE account of the same designated beneficiary that was rolled over, or directly transferred (in a program-to-program transfer), to the current ABLE account).

**Box 4.** Shows the FMV of the ABLE account as of the end of the year.

**Box 5.** The ABLE account was opened in 2020 if the box is checked.

**Box 6.** These codes show the basis for your ABLE account eligibility. A—eligibility established under 529A(e)(1)(A), SSDI, Title II SSA. B—eligibility established under 529A(e)(1)(A), SSI, Title XVI SSA. C—eligibility established by disability certification under section 529A(e)(1)(B).

**Box 7.** These codes show the type of disability for which you are receiving ABLE account qualifying benefits. 1—developmental disorders (including autism); 2—intellectual disability; 3—psychiatric disorders; 4—nervous disorders (including blindness and deafness); 5—congenital anomalies (including Down syndrome); 6—respiratory disorders; 7—other.

**Future developments.** For the latest information about developments related to Form 5498-QA and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/Form5498QA](http://www.irs.gov/Form5498QA).

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**ABLE Account  
Contribution  
Information**

|   |                   |                                   |   |
|---|-------------------|-----------------------------------|---|
| ISSUER'S name, street address, city or town, state or province, country, and ZIP or foreign postal code |                   | 1 ABLÉ contributions              | OMB No. 1545-2262<br><br><b>2020</b><br>Form <b>5498-QA</b> |
|   |                   | \$                                |   |
|   |                   | 2 ABLÉ to ABLÉ Rollovers          |   |
|   |                   | \$                                |   |
| ISSUER'S TIN  | BENEFICIARY'S TIN | 3 Cumulative contributions        | 4 Fair market value   |
|   |                   | \$                                | \$  |
| BENEFICIARY'S name  |                   | 5 Check if account opened in 2020 | 6 Basis of eligibility                                      |
|   |                   | <input type="checkbox"/>          |   |
| Street address (including apt. no.)   |                   | 7 Code                            |   |
|   |                   |                                   |   |
| City or town, state or province, country, and ZIP or foreign postal code                                |                   |                                   |   |
| Account number (see instructions)   |                   |                                   |   |

**Copy C**

**For Issuer**

For Privacy Act and Paperwork Reduction Act Notice, see the **2020 General Instructions for Certain Information Returns.**

Form **5498-QA**

[www.irs.gov/Form5498QA](http://www.irs.gov/Form5498QA)

Department of the Treasury - Internal Revenue Service

## Instructions for Issuer

To complete Form 5498-QA, use:

- The 2020 General Instructions for Certain Information Returns, and
- The 2020 Instructions for Form 5498-QA.

To get or to order these instructions, go to [www.irs.gov/Form5498QA](http://www.irs.gov/Form5498QA).

**Due dates.** Furnish Copy B of this form to the beneficiary (participant) by March 15, 2021.

File Copy A of this form with the IRS by May 31, 2021.

**Need help?** If you have questions about reporting on Form 5498-QA, call the information reporting customer service site toll free at 866-455-7438 or 304-263-8700 (not toll free). Persons with a hearing or speech disability with access to TTY/TDD equipment can call 304-579-4827 (not toll free).