CVS HEALTH FUTURE FUND 401(k) ROLLOVER CONTRIBUTION FORM

To complete this Form, please read the Instructions for Rollover Contributions to the CVS Health Future Fund 401(k)

Sect	tion 1: PARTI	CIPANT PERSONAL INFORMATION (Please print)					
Ра	rticipant's Na rticipant's Ac st 4 Digits of S	dress:					
Sect	ion 2: CONF	RMATION OF QUALIFYING ROLLOVER CONTRIBUTION (Select and complete below)					
	My Rollover Contribution is a/an: 📮 Direct Rollover						
	My Total Rollover Contribution is from a:						
		Qualified Retirement Plan:					
		Complete Plan Name					
Ę		it/Rollover IRA:					
Rollover Confirmation	 Complete Name of Trustee/Custodian (i.e. Fidelity, Schwab, Bank of XXX) By checking the box, I CONFIRM that my rollover contribution (refer to the Instructions for the Acceptable and Unacceptable Contribution Sources): If from a former employer's plan, is qualified under Internal Revenue Code §401(a), 403(b) or 457(b); If from a Conduit/Rollover IRA, consists solely of untaxed contributions and earnings; Is not from a traditional IRA, Roth IRA or inherited IRA; Is not from a SIMPLE IRA within 2 years of the first contribution; Contains no funds from a har Iship withdrawal, excess or corrective distribution or subject to a required minimum distribution; Is not one of a series of substantially equal payments payable made over life expectancy or a period of ten or more years; and Does not include any funds that were formerly in the Apria Healthcare Group, Inc. 401(k) Savings Plan. 						
Sect	tion 3: ROLLO	VER CONTRIBUTION TYPES AND AMOUNTS (Check and complete all that apply)					

ts	I hereby request that Future Fund accept my qualifying rollover contribution in the amount of \$ (insert total amount). The breakdown of my total rollover contribution is:								
Amounts		Untaxed Rollover (contributions and earnings) Amount: \$(insert amount). The source of my untaxed rollover amount is:							
Contribution Types and		□ 401(k) □ □ 403(b) □	Employer (i.e. Profit Share, Money Purchase, De Governmental 457(b)	efined Benefit) 🖵 Conduit/Rollover IRA					
	 Previously Taxed Rollover Amount (e.g. Roth or after/post tax): \$ (insert amount) The source of my previously taxed rollover amount is (select and complete all that apply): 								
		Roth Amount:	Roth Deferral Amount (excluding any earnings/	losses) \$(insert amount)					
ပိ			Earnings on Roth Deferral \$	(insert amount)					
			Tax Year of the First Roth Deferral	(insert year)					
		Previously Tax	ed Contributions (non-Roth) Amount: \$	(insert amount)					

Mail your Check, Form and required documentation to CVS Future Fund, P.O. Box 360512, Pittsburgh, PA 15251-6512. Retain copies for your records. xxxxxxxx CVS-RF 03/2018

CVS HEALTH FUTURE FUND 401(k) **ROLLOVER CONTRIBUTION FORM (continued)**

Investment	Fund	Enter Percen	t		
Stable Value	e Fund		%		
Bond Index	Bond Index		%		
Diversified	Bond		%		
Inflation-Pr	otected		%	1	
Conservativ	e Lifestyle		%	 Important Notes: Review Future Fund Investments Options on Future Fund online via myHR or www.lifeatworkportal.com/cvs.html; Be sure your investment fund elections are in multiples of 1% and add up to 100%; You are limited to investing no more than 20% of your rollover contribution into the CVS 	
Moderate L	ifestyle		%		
Aggressive	ifestyle		%		
Growth& In	come		%		
Core Equity			%		
Socially Res	ponsible Fund		%		
Large Cap G	rowth		%		
Mid Cap Inc	lex		%	Health Stock Fund; andFailure to complete your investment direction	
Global Equi	ty		%	accurately will cause a delay in the process	
Internation	al Equity Index		%	of your rollover contribution	
Internation	al Equity		%		
Small Cap V	alue		%		
Small Cap Ir	ndex		%		
Small Cap G	rowth		%		
CVS Health	Common Stock Fund (20% maximum)		%		
Total (Must	be in 1% multiples and add up to 100%	100	%		

I have read and understand the Instructions for Rollover Contribution to the CVS Health Future Fund 401(k) contained herein and certify that the above is correct and accurate to the best of my knowledge and belief. I understand that Future Fund may require additional proof that the above conditions have been met before my contributions will be accepted by Future Fund.

Signature of Participant

Certification

Date

Section 6: MAILING AND GENERAL INSTRUCTIONS

To roll your gualified rollover contribution into Future Fund:

- Your rollover check must be made payable to: "Trustees of Future Fund/CVS FBO (insert your name)"
- For a **Direct** Rollover, please include the check advice or a distribution statement showing the breakdown of untaxed and previously taxed assets from your former employer's qualified plan. If you cannot provide this, your former Plan Administrator must complete the attached Qualified Distribution Form
- **Mailing and General Instructions** For an Indirect Rollover, please include the check advice or a distribution statement showing the date of distribution and the original sources from your former employer's qualified plan or Conduit/Rollover IRA

Mail your Check, fully completed and signed Rollover Contribution Form and required documentation to:

Regular Mail: CVS Future Fund Box 360512 Pittsburgh, PA 15251-6512 **Overnight Mail:** BANK OF NEWYORK MELLON Pittsburgh Lockbox ATTN: Lockbox 360512 500 Ross Street 154-0455 Pittsburgh, PA 15251-6512

IMPORTANT NOTE: Checks received without the CVS Health Future Fund 401(k) Rollover Contribution Form and required documentation cannot be accepted and will result in a delay or denial of your rollover application

INSTRUCTIONS FOR ROLLOVER CONTRIBUTIONS TO THE CVS HEALTH FUTURE FUND 401(k)

Section 1: PARTICIPANT PERSONAL INFORMATION - Enter your legal name, address, last 4 digits of your SSN and Employee ID

Section 2: CONFIRMATION OF QUALIFYING ROLLOVER CONTRIBUTIONS – Please read the following carefully to determine and confirm your rollover contribution is qualified and acceptable:

Direct versus Indirect Rollover Contribution:

- A Direct Rollover Contribution is when you choose to roll over the proceeds into Future Fund and the distribution proceeds are from your former employer's qualified plan and made payable to "Trustees of Future Fund / FBO your name."
- An Indirect Rollover Contribution is when you now choose to roll over the proceeds into Future Fund within 60 days of the distribution from your former employer's qualified plan or Conduit/Rollover IRA and the check was made payable to "you." Note, this type of rollover cannot contain previously taxed contributions (e.g. Roth or after/post tax).

If you had an outstanding loan that was offset from your previous retirement plan, you may roll over the offset amount no later than the due date for filing your income tax return, including extensions, for the year in which the loan is treated as distributed. To rollover an offset amount, you must make-up the rolled over amount from your own funds. For taxable years beginning prior to January 1, 2018, loan offsets needed to be rolled over within 60 days of distribution in order to avoid taxation.

If the distribution was a nonqualified distribution, the earnings in the loan offset will be taxed (including the 10% additional income tax on early distributions, unless an exception applies) unless you roll over the amount of the earnings in the loan offset to a Roth IRA or designated Roth account in an eligible employer plan no later than the due date for filing your income tax return, including extensions, for the year in which the loan is treated as distributed from the Plan. (For taxable years beginning prior to January 1, 2018, loan offsets needed to be rolled over within 60 days of distribution in order to avoid taxation.)

Acceptable Rollover Contribution Sources: Future Fund can accept:

- Untaxed contributions from the following types of employer-sponsored qualified plans, such as: 401(k), Roth 401(k), profit sharing and money purchase pension plans, 403(b) qualified annuity, 403(b) and Roth 403(b) and governmental 457(b) plans;
- > If a Direct Rollover, previously taxed (Roth or after/post tax) contributions from your former employer's qualified plan;
- > Distributions from a Conduit/Rollover IRAs provided it is from **only** untaxed sources (e.g. 401(k), employer)
- Distributions from qualified plans to spousal beneficiaries and former spouses who are alternate payees under a Qualified Domestic Relations Order (QDRO); and
- Simplified Employee Pensions Plan (SEP-IRA) or SIMPLE IRA (provided within two years of the first contribution in the SIMPLE IRA).

Unacceptable Rollover Contribution Sources: Future Fund cannot accept:

- > Distributions from a Traditional, Roth or Inherited IRA or a SIMPLE IRA within 2 years of the first contribution;
- Previously taxed (e.g. Roth or post/after tax) distributions from your Conduit/Rollover IRA or an Indirect Rollover from your former employer's qualified plan;
- Hardship distributions, excess or corrective distributions, mandatory 70-1/2 distributions;
- > Distributions to a beneficiary (other than a spousal beneficiary);
- > Distributions made over life expectancy or a period of ten or more years; and
- Any funds from the Apria Healthcare Group, Inc. 401(k) Savings Plan.

Section 3: ROLLOVER CONTRIBUTION TYPES AND AMOUNTS - Untaxed and Previously Taxed Amounts:

- Provide the origin of your rollover contribution and type of contributions (untaxed/pre-tax or previously taxed/after/post tax and what portion is earnings)
- Consult the check advice or distribution statement for the breakdown of untaxed and previously taxed/after/post tax assets and earnings from your prior employer's qualified plan
- Previously taxed contributions are only allowed as a direct rollover from your previous employer's qualified plan.

Special Considerations:

- For a Direct Rollover, provide a copy of the check advice or distribution statement showing the breakdown of untaxed and previously/after/post tax assets from your former employer's qualified plan. If you cannot provide this, your former Plan Administrator must complete the attached Qualified Distribution Form;
- For an Indirect Rollover, provide a copy of the check advice or distribution statement indicating the date of distribution and the original sources from your former employer's qualified plan or Conduit/Rollover IRA; and
- Rollovers must be in cash in the form of a check and no in kind distributions of employer stock or stock certificates will be accepted.

Section 4: INVESTMENT ELECTIONS

- Information about investment options is available at Future Fund online via myHR.cvs.com or directly at <u>https://www.lifeatworkportal.com/cvs.html;</u>
- Your investment elections must be in multiples of 1% and must total 100%; and
- You are limited to contribute a maximum of 20% of your initial contribution into the CVS Health Stock Fund

Mail your Check, Form and required documentation to CVS Future Fund, P.O. Box 360512, Pittsburgh, PA 15251-6512. Retain copies for your records. xxxxxxxx CVS-BD-

INSTRUCTIONS FOR ROLLOVER CONTRIBUTIONS TO THE CVS HEALTH FUTURE FUND 401(k)

Section 5: PARTICIPANT CERTIFICATION AND SIGNATURE

- Certify that you have read these instructions and to the best of your ability, the information provided is correct and accurate
- Typically, your certification and required documentation will be acceptable proof that all of the conditions have been met, that your former employer's plan is an eligible retirement plan and the distribution is eligible to be rolled over to Future Fund. If the Company requests additional proof, you may be required to provide a letter from the plan administrator of your former employer's plan.

Section 6: MAILING AND GENERAL INSTRUCTIONS

Follow the mailing and general instructions carefully. Checks received <u>without</u> the CVS Health Future Fund 401(k) Rollover Contribution Form and required documentation <u>cannot</u> be accepted and will result in a <u>delay or denial</u> of your rollover application.