SIMPLE IRA Transfer Form

First Name

This form may be used to effect a direct transfer to a First Eagle Funds SIMPLE IRA from a SIMPLE IRA with another custodian. If you do not have an existing First Eagle Funds SIMPLE IRA, an account application must accompany this form. If you have any questions or to ensure that all legal requirements are met, please call Shareholder Services at 800-334-2143.

All information must be supplied.

Provide information on the Custodian/Trustee/ Financial institution where your assets are currently held.

1. Participant Information

Social Security Number	Date of Birth (MM/DD/YYYY)
Street Address	
Sti eet Addi ess	
City	State Zip Code
Fund Name	Account Number (if new account, specify "New Account")
2. Information About Your Current SIMPLE IRA	
Name of Current Custodian/Trustee	Name of Current Financial Institution
·	
Street Address	
City	State Zip Code
Daytime Telephone Number	Account Number
Initial Participation Date (MM/DD/YYYY)	
Initial Fall (tolpation bate (twiny bb) 1111)	
<u> </u>	
3. Instructions to Current SIMPLE IRA Custodian	n/Trustee/Financial Institution
☐ Liquidate the total amount of my account. Approxim	vata valua: \$

% of my account.

OR

Transfer assets from the above account to UMB Bank, n.a. The transfer should be in cash according to the following instructions. **NOTE:** Please include a copy of your most recent

account statement.

□ \$

Invest the transferred amount as follows. If this is a new account, please complete a SIMPLE IRA Application.

4. Investment Instructions

First Eagle Global Fund] _%	Share Class	ПΑ	□с	\square I
First Eagle Overseas Fund] _%	Share Class	ПΑ	□с	\square I
First Eagle U.S. Fund] _%	Share Class	ПΑ	□с	\square I
First Eagle Gold Fund] _%	Share Class	ПΑ	□с	\square I
First Eagle Rising Dividend Fund] _%	Share Class	ПΑ	□с	\square I
First Eagle High Yield Municipal Fund] _%	Share Class	ПΑ	□с	\square I
First Eagle Global Income Builder] _%	Share Class	ПΑ	□с	\square I
First Eagle Small Cap Opportunity Fund] _%	Share Class	ПΑ	□с	\square I
First Eagle Global Real Assets Fund] _%	Share Class	ПΑ		\square I
First Eagle U.S. Smid Cap Opportunity Fund] _%	Share Class	ПΑ		\square I
First Eagle Short Duration High Yield Municipal Fund] _%	Share Class	ПΑ	□с	\square I
Total Investment	100	%				

To be reviewed and signed by the Funds' custodian.

5. To be Completed by UMB Bank, n.a. (UMB)

UMB agrees to accept custodianship and the transfer described above for deposit to a First Eagle Funds SIMPLE IRA established on behalf of the above-named individual. UMB accepts its appointment as successor custodian of the above IRA and requests the liquidation and transfer of assets as indicated above.

UMB Bank, n.a.

Signature of Custodian	
Date (MM/DD/YYYY)	

In order to complete your request, sign your name exactly as it appears on your account (if signing on behalf of the account owner, please include your designated title).

By signing below, the owner of the above referenced account hereby authorizes the transfer specified in this form.

6. Employee Signature and Authorization

The undersigned certifies to the current SIMPLE IRA custodian or trustee that a successor SIMPLE IRA has been established meeting the requirements of Internal Revenue Code Section 408(p) to which assets will be transferred, and certifies to UMB that the SIMPLE IRA from which assets are being transferred meets the requirements of Internal Revenue Code Section 408(p). We recommend that you contact your resigning custodian to determine their transfer and signature requirements. A Medallion Signature Guarantee may be required.

A Medallion Signature Guarantee assures that a signature is genuine and protects investors from unauthorized requests. A Medallion Signature Guarantee may be obtained from an officer of a commercial bank or trust company, savings and loan or savings bank, or a member firm of a domestic stock exchange. Notarization by a notary public is **not** acceptable.

Account Owner's Signature				
Title (if applicable)				
Date (MM/DD/YYYY)				
Affix Medallion Signature Guarantee stamp.				
Name and Title of Guarantor				

If you have any questions or to ensure that all legal requirements are met, please call Shareholder Services at 800-334-2143

7. Mail the completed form to:

Regular Mail:

First Eagle Funds P.O. Box 219324 Kansas City, MO 64121-9324

Overnight Mail:

First Eagle Funds 801 Pennsylvania Avenue Suite 219324 Kansas City, MO 64105-1307

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