

# IRA Distribution Form

Effective February 2016

This form may be used to take a distribution from your First Eagle Funds Individual Retirement Account (IRA). Mandatory distributions out of your retirement account should be completed through the Required Minimum Distribution Form (RMD). If you are a beneficiary looking to take a distribution due to the death of an IRA account owner, please complete the Inherited IRA Distribution Form. A separate form is required for each fund/account from which you wish to take a distribution. 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.

## 1. Account Information

<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
First Name, Middle Initial, Last Name		Social Security Number	Date of Birth (MM/DD/YYYY)	
<input type="text"/>		<input type="text"/>	<input type="text"/>	<input type="text"/>
Street Address		City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>		
Daytime Telephone	Evening Telephone	Fund/Account Number		

Select one of the following. If removing an Excess Contribution, please go directly to Section 3.

## 2. Distribution Amount

A Medallion Signature Guarantee (as described in Section 8) is required to have your distribution sent to your bank if instructions are not on file, to a name or address other than that shown on your account, if a distribution by check is more than \$100,000, or if you are signing on behalf of the account owner.

- Partial Distribution (specific amount): \$
- Total Distribution

Select one of the following.

**NOTE:** We encourage you to consult your tax adviser for information on how to properly report your distribution. First Eagle Funds is not required to report the reason for each type of premature distribution.

## 3. Distribution Type

- Normal Distribution (if taken after attainment of age 59 ½)
- Premature Distribution (shareholders under age 59 ½ may be subject to a penalty)
- Premature Distribution Exempt from Penalty (as designated under IRS Rule 72t)
- SIMPLE IRA Distribution (if taken within 24 months of contribution, may be subject to a penalty)
- Coverdell Education Savings Account Distribution (distributions not used for qualified education expenses may be subject to a penalty)
- Excess Contribution Removal: I over-contributed into my IRA in the amount of \$  for tax year . I understand that First Eagle Funds will calculate the gain/loss based on my over-contribution amount. (Please choose a Payment Method in Section 4.)

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Select one of the following.

**4. Payment Method**

- Send a check by mail to my address of record. (If sending to a new address or to an address that has been updated with the Funds within the last 15 days, a Medallion Signature Guarantee is required in Section 8.)
- Send the redemption proceeds to my bank. (Please complete Section 5.)
- Invest the assets into my new non-retirement account. (A New Account Application will be required.)
- Invest the assets in my existing First Eagle Funds Non-Retirement Account Number .
- Make the check payable as indicated below and mail to the following alternate payee and/or address. (A Medallion Signature Guarantee is required in Section 8.)

Alternate Payee Name

Alternate Street Address

City

State

Zip Code

Select one of the following methods of redemption. If bank instructions are not already on file, please attach a pre-printed, voided check or deposit slip/statement below and provide a Medallion Signature Guarantee in Section 8.

**5. Bank Instructions**

- ACH (requires up to three business days, at no charge)
- Fed Wire (next day, for an additional charge of \$7.50 deducted directly from the redemption proceeds)

Please attach a pre-printed voided check or deposit slip/statement here.

Bank Name

Name(s) on Bank Account

*continued on the following page*

**NOTE:** Not for RMD's. Use the Required Minimum Distribution (RMD) Form for RMD distributions

**6. Systematic Withdrawal Plan (If updating any Systematic Withdrawal Plan, any current plan will be deleted.)**

Please choose the date(s) and frequency of the redemptions.

Date of Withdrawal:  3rd  15th  25th  
 Frequency of Withdrawal:  Monthly  Quarterly  Annually

Starting Month



Fund Name

\$ Amount (minimum of \$50)



Fund Name

\$ Amount (minimum of \$50)

If you have an account balance of \$10,000 or greater, you can add the option to automatically have redemptions taken from your First Eagle Funds account on a regular basis. This form should not be used for establishing systematic withdrawal plans or retirement accounts.

**NOTE:** The withdrawal program will start at least seven days after the initial set-up.

How would you like to receive your redemptions? (Please check one.)

By check to the address of record  By ACH to my bank (to add or update, see Section 5)

**7. Federal Income Tax Withholding**

We are required to withhold 10% of the taxable distribution unless you elect no withholding. Withholding amounts are sent to the IRS as a prepayment of federal income tax. You may withhold additional amounts. Please be aware the IRS may impose a penalty for under-withholding.

I elect not to have federal income tax withheld from my distribution.  
 Please withhold federal income tax at a rate of  % from my distribution.

Select one of the following.

**NOTE:** We encourage you to consult your accountant or tax adviser regarding your IRA distribution.

**8. Foreign Payment Instructions**

Payments to an address outside the United States are subject to special rules. U.S. citizens receiving payments outside the United States may not waive withholding. Withholding for foreign citizens is subject to tax treaty rules. See IRS Publication 515 for more information.

**Certification:**

I hereby certify that I am a United States citizen living abroad. I understand that payments sent to me abroad are subject to 10% tax withholding and cannot be waived.  
 I hereby certify that I am a foreign citizen. I am attaching Form W-8BEN to certify my status and comply with IRS rules. I understand that withholding, if applicable, will be applied to my distribution payments based on my certification or lack thereof.

Complete only if applicable.

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In order to complete your request, please sign your name below exactly as it appears on your account (if signing on behalf of the account owner, please include your designated title.) A Medallion Signature Guarantee may be required.

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

**9. Signatures and Authorization**

A Medallion Signature Guarantee assures that a signature is genuine and protects investors from unauthorized requests. It is required on this form in order to have your distribution sent to your bank if instructions are not on file, to a name or address other than that shown on your account, if a distribution by check is more than \$100,000, or if you are signing on behalf of the account owner. 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.

**10. Mail the completed form to:**

**Regular Mail:**  
 First Eagle Funds  
 P.O. Box 219324  
 Kansas City, MO 64121-9324

**Overnight Mail:**  
 First Eagle Funds  
 330 West 9th Street  
 Kansas City, MO 64105