

**DOMINI SOCIAL INVESTMENTS INDIVIDUAL RETIREMENT ACCOUNT (IRA)
ROLLOVER CERTIFICATION FORM**



If you have questions in completing this form, please contact Shareholder Services at 1-800-582-6757, 9 am to 5 pm Eastern Time. Please consult a tax advisor for tax advice and refer to IRS Publication 590 for more information.

PARTICIPANT INFORMATION

Name: _____ Daytime Telephone: (_____) _____

Address: _____

City: _____ State: _____ Zip Code: _____

Social Security Number: _____ Date of Birth: _____

Account Number: _____

TRADITIONAL ROLLOVER

- Traditional IRA Rollover** - This is a distribution of all or part of my account balance from another Traditional IRA that is being rolled over within 60 days of receipt. I understand that 365 days must have passed since I last received a rollover distribution from the distributing Traditional IRA.
- IRA Eligible Rollover Distribution** - This is a non-periodic distribution from my employer's qualified retirement plan of all or part of my account balance, other than the portion of any distribution which is nontaxable, which is being rolled over within 60 days of receipt. (Your employer's plan administrator should be able to tell you what portion of your distribution is an "eligible distribution.") I certify that no portion of this rollover is from any portion of a Designated Roth Contribution Account under my employer's qualified retirement plan or from any amount required to be distributed under Internal Revenue Code Sections 408(a)(6) and 401(a)(9), commonly known as a required minimum distribution.

ROTH ROLLOVER

- Roth IRA Rollover** - This is a distribution of all or part of my account balance from another Roth IRA which is being rolled over within 60 days of receipt. I understand that 365 days must have passed since I last received a rollover distribution from the distributing Roth IRA.
- Direct Rollover (Conversion) from an Employer's Plan** - This is a distribution from my employer's qualified retirement plan paid as a direct rollover (conversion) contribution into a Roth IRA.
- Designated Roth Contribution Account** - This is a direct rollover or a 60- day rollover from my Designated Roth Contribution Account under my employer's qualified retirement plan. This rollover represents all or a portion of my Designated Roth Contribution Account under the employer's qualified retirement plan and no other source of money under the employer's qualified retirement plan is being rolled over to my Roth IRA.
- Military Death Gratuity Payment** - This rollover contribution is less than \$100,000 and is being made within 365 days of receipt.
- Servicemember's Group Life Insurance (SGLI)** - This rollover contribution is less than \$400,000 and is being made within 365 days of receipt.

PARTICIPANT CERTIFICATION

I certify that the contribution described above is an eligible IRA rollover or conversion contribution. I certify that this contribution is being rolled over within 60 days of receipt or is being rolled directly from my employer's plan or current custodian and meets the requirements for tax law provisions, as described above. I certify that the rollover is not part of a series of payments over my life expectancy or over a period of 10 years or more. The rollover does not include any required minimum distribution, hardship distribution, corrective distribution, or deemed distribution from the employer's qualified retirement plan. I understand that this rollover contribution is irrevocable and involves important tax considerations. Specifically, I understand that a rollover contribution from a pre-tax qualified retirement plan will no longer be eligible for the special averaging, capital gains and separate tax treatment that may be available under the employer's plan. I agree that I am solely responsible for all tax consequences. I also agree that neither the IRA custodian, Domini Social Investments, nor any of their agents or affiliates shall have responsibility for any such tax consequences or any consequences resulting from this amount being ineligible for rollover. Rules regarding rollovers, and their tax implications, are complex. Please refer to IRS Publication 590 or a tax advisor for more information.

I have read this form and understand and agree to be legally bound by the terms of this form. I also understand that the IRA Custodian will rely on my instructions within this form when accepting my rollover contribution.

Participant's Signature: _____ **Date:** _____

Mail to the following:

First Class Mail:
Domini Funds
P.O. Box 9785
Providence, RI 02940-9785

Overnight Mail:
Domini Funds
101 Sabin Street
Pawtucket, RI 02860
1-800-582-6757

**DOMINI SOCIAL INVESTMENTS INDIVIDUAL RETIREMENT ACCOUNT (IRA)
TRANSFER OF ASSETS / DIRECT ROLLOVER FORM**

Use this form to request an IRA transfer of assets or a direct rollover (excluding qualified rollover conversions to a Roth IRA) from an existing retirement plan account to your IRA at Domini Funds. Based on your instructions, PFPC Trust Company, will initiate the transfer or rollover for you. If you are over age 70½, you are responsible for distributing any required minimum distribution amounts from your current retirement plan account (excluding Roth IRAs) in advance of the transfer or rollover. Please remember that a transfer of assets can only occur between the same types of retirement plans.

Incomplete information will result in delays in processing your request. If you have any questions in completing this form, please contact Shareholder Services at 1-800-582-6757, 9 am to 5 pm Eastern Time. Please consult a tax advisor for tax advice and refer to IRS Publication 590 for more information.

PARTICIPANT INFORMATION

Name: _____ Daytime Telephone: (_____) _____

Address: _____

City: _____ State: _____ Zip Code: _____

Social Security Number: _____ Date of Birth: _____

INSTRUCTIONS

Complete items A, B, C and D.

- A. I am opening a new IRA and have attached the required IRA Application.
 Deposit the proceeds into my existing IRA. Account Number: _____

- B. Type of account transferring into: Traditional IRA Rollover IRA SEP IRA Roth IRA

C. Invest as follows: \$1,500 minimum for each

<u>Domini Social Equity Fund (473) Investor Share Class</u>	Dollar \$ _____	or Percentage _____	%
<u>Domini International Social Equity Fund (430) Investor Share Class</u>	Dollar \$ _____	or Percentage _____	%
<u>Domini Social Bond Fund (501) Investor Share Class</u>	Dollar \$ _____	or Percentage _____	%
<u>Domini Deposit Account at PNC Bank (675)*</u>	Dollar \$ _____	or Percentage _____	%

Must equal 100%

*There is generally a \$3.00 monthly service charge for Domini Deposit Account at PNC Bank account positions, subject to modification or waiver at Domini's discretion. This charge will be automatically withdrawn from your account on or about the 15th of each month (or the next applicable business day).

- D. Type of Request:
 IRA Transfer of Assets (like accounts) Direct Rollover from a Qualified Plan to an IRA Direct Rollover from a 403(b) or 457 to an IRA

DIRECT ROLLOVER NOTICE

If this contribution is a direct rollover from a qualified plan, 403(b), or 457 plan, I understand that by signing page 2 of this form, I am acknowledging that the direct rollover contribution is an irrevocable election and is no longer eligible for special tax treatment which may be accorded to distributions from a qualified plan, 403(b), or 457 plan. You may want to contact your current plan administrator or custodian to ensure that you have completed any documents they may require. If you are over age 70½, please contact your current custodian regarding the required minimum distribution rules before initiating a direct rollover. Direct rollovers from a qualified plan to an IRA can only be in the form of cash.

CURRENT CUSTODIAN AND ACCOUNT INFORMATION

Type of account you are transferring/rolling over from (check one):

- Traditional/Rollover IRA
 SEP-IRA
 Roth IRA
 403(b)
 457 Plan
 Qualified Plan*

*If you are rolling over a qualified plan, please contact your current plan administrator for distribution/rollover form requirements.

Please attach your most recent statement, if possible. Note, your current custodian may require a Medallion Signature Guarantee to process your transfer or rollover request. Please see the Participant Authorization section for an explanation of the Medallion Signature Guarantee.

Name of current custodian: _____

Address: _____

City: _____ State: _____ Zip code: _____

Contact name: _____ Telephone number: () _____

1) Investment to transfer: _____

Account number: _____

- Liquidate Entire Account
 Partial Dollar Amount \$ _____ or # of Shares _____
 Transfer In-Kind
 (applies only to Domini mutual fund holdings)
- For Certificate of Deposits:
 Immediately*
 At Maturity Date _____

2) Investment to transfer: _____

Account number: _____

- Liquidate Entire Account
 Partial Dollar Amount \$ _____ or # of Shares _____
 Transfer In-Kind
 (applies only to Domini mutual fund holdings)
- For Certificate of Deposits:
 Immediately*
 At Maturity Date _____

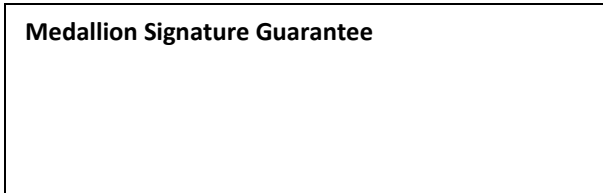
***Note:** If you wish to have certificates of deposit transferred immediately and they have not matured, you may incur a redemption penalty. We cannot accept requests to transfer assets from certificates of deposit more than 60 days before their maturity.

PARTICIPANT AUTHORIZATION

I authorize the transfer of assets or direct rollover as noted above to my Domini Funds IRA and authorize my current custodian, Domini Funds, and PFPC Trust Company to process this request on my behalf. I understand it is my responsibility to insure the prompt transfer of assets or direct rollover by the current custodian. I have read and understand all information on this form and hereby provide the applicable authorization.

Participant's Signature: _____ Date: _____

Medallion Signature Guarantee Stamp and Signature (If required by your current custodian or transfer agent): An eligible guarantor is a domestic bank or trust company, securities broker/dealer, clearing agency or savings association that participates in a medallion program recognized by the Securities Transfer Agents Association. The three recognized medallion programs are the Securities Transfer Agents Medallion Program (known as STAMP), Stock Exchanges Medallion Program (SEMP), and the Medallion Signature Program (MSP). A notarization from a notary public is NOT an acceptable substitute for a signature guarantee.



First Class Mail:
 Domini Funds
 P.O. Box 9785
 Providence, RI 02940-9785

Overnight Mail:
 Domini Funds
 101 Sabin Street
 Pawtucket, RI 02860
 1-800-582-6757

How did you hear about us?

- Advertisement in _____
 News story in _____
 Website
 Friend/Relative
 Conference
 Financial Advisor/Broker
 Other

FACTS**WHAT DOES PFPC TRUST COMPANY DO WITH YOUR PERSONAL INFORMATION?****Why?**

Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information.

Please read this notice carefully to understand what we do.

What?

The types of personal information we collect and share depend on the product or service you have with us. This information can include:

- Social Security number
- Account balances
- Transaction history
- Account transactions
- Retirement assets

When you are no longer our customer, we continue to share your information as described in this notice.

How?

All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information; the reasons PFPC Trust Company chooses to share; and whether you can limit this sharing.

Reasons we can share your personal information	Does PFPC Trust Company share?	Can you limit this sharing?
For our everyday business purposes—such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes—to offer our products and services to you	No	No
For joint marketing with other financial companies	No	No
For our affiliates' everyday business purposes—information about your transactions and experiences	Yes	No
For our affiliates' everyday business purposes—information about your creditworthiness	No	No
For our affiliates to market to you	No	No
For nonaffiliates to market to you	No	No

Questions?

Call 508-871-9768

Who we are

Who is providing this notice?

PFPC Trust Company, custodian for self-directed savings and retirement accounts, such as Individual Retirement Accounts, Qualified Plans and 403(b)(7) Plans, and for mutual fund Wrap Product and Global Cash Portal accounts

What we do

How does **PFPC Trust Company** protect my personal information?

To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings. Our internal data security policies restrict access of nonpublic personal information to authorized employees. We maintain physical, electronic and procedural safeguards to guard our customers' nonpublic personal information. Employees who violate our data security policies are subject to disciplinary action, up to and including termination.

How does **PFPC Trust Company** collect my personal information?

We collect your personal information, for example, when you

- Open an account or deposit funds
- Make deposits or withdrawals from your account
- Provide account information
- Give us your contact information
- Show your government-issued ID

We also collect your personal information from affiliates or other companies.

Why can't I limit all sharing?

Federal law gives you the right to limit only

- Sharing for affiliates' everyday business purposes—information about your creditworthiness
- Affiliates from using your information to market to you
- Sharing for nonaffiliates to market to you

State laws and individual companies may give you additional rights to limit sharing.

Definitions

Affiliates

Companies related by common ownership or control. They can be financial and nonfinancial companies.

Nonaffiliates

Companies not related by common ownership or control. They can be financial and nonfinancial companies.

- **PFPC Trust Company** does not share information with nonaffiliates so they can market to you.

Joint marketing

A formal agreement between nonaffiliated financial companies that together market financial products or services to you.

- **PFPC Trust Company** doesn't jointly market.

Other important information

This notice applies to individual consumers who are customers or former customers. This notice replaces all previous notices of our consumer privacy policy, and may be amended at any time. We will keep you informed of changes or amendments as required by law.