

Domini Impact Investments
SIMPLE INDIVIDUAL RETIREMENT ACCOUNT (SIMPLE IRA)
TRANSFER OF ASSETS FORM



Use this form to request a transfer of SIMPLE IRA assets held with another custodian to your Domini SIMPLE IRA. Based on your instructions, BNY Mellon Investment Servicing Trust Company will initiate the transfer for you. If you are over age 70½, you are responsible for distributing any required minimum distribution amounts from your current SIMPLE IRA in advance of the transfer. Please remember the transfer of assets can only occur between SIMPLE IRA accounts. Incomplete information will result in delays in processing your request. Please consult a professional advisor for tax, legal and investment advice and refer to IRS Publications 560, and 590-A and – B. If you have any other questions in completing this form, please contact Shareholder Services at 1-800-582-6757, Monday through Friday, 9 a.m. to 6 p.m., Eastern Time.

PARTICIPANT INFORMATION

Name: _____ Daytime Telephone: () _____

Address: _____

City: _____ State: _____ Zip Code: _____

Social Security Number: _____ Date of Birth: _____

INVESTMENT INSTRUCTIONS

Complete items A and B.

A. I am opening a new SIMPLE IRA and have attached the required SIMPLE IRA Application.

Deposit the proceeds into my existing SIMPLE IRA. Account Number: _____

B. Invest as follows: Minimum initial investment is for each is \$1,500.

Fund Name	Dollar Amount \$	or	Percentage	%
Fund Name: Domini Impact Equity Fund (473) Investor Share Class				
Fund Name: Domini Impact International Equity Fund (430) Investor Share Class				
Fund Name: Domini Impact Bond Fund (501) Investor Share Class				
Fund Name: Domini Deposit Account at PNC Bank (675)*				

Must equal 100%

*There is generally a \$3 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 This charge will be withdrawn automatically from your account on or about the 15th of each month (or the next applicable business day).

CURRENT CUSTODIAN AND ACCOUNT INFORMATION

Please attach your most recent statement, if possible. Note: your current custodian may require a Medallion Signature Guarantee to process your transfer 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: () _____

Continued on next page.

Domini Impact Investments
SIMPLE INDIVIDUAL RETIREMENT ACCOUNT (SIMPLE IRA)
TRANSFER OF ASSETS FORM CONTINUED

1) Investment to transfer:

Account number: _____ Share class: _____ CUSIP number: _____

Liquidate Entire Account Partial Dollar Amount \$ _____ or # of Shares _____ Transfer In-Kind

For Certificate of Deposits: Immediately* At Maturity Date _____

2) Investment to transfer:

Account number: _____ Share class: _____ CUSIP number: _____

Liquidate Entire Account Partial Dollar Amount \$ _____ or # of Shares _____ Transfer In-Kind

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

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

Mail to the following:

First Class Mail:
 Domini Funds
 P.O. Box9785
 Providence, RI 02940
 1-800 582-6757

Overnight Mail:
 Domini Funds
 4400 Computer Drive
 Westborough, MA 01581

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.

Medallion Signature Guarantee Stamp

Domini Impact Investments
SIMPLE INDIVIDUAL RETIREMENT ACCOUNT (SIMPLE IRA)
CERTIFICATION OF ROLLOVER ASSETS

Use this form to certify that a contribution is an eligible rollover contribution.

IMPORTANT CHANGES TO THE RULES GOVERNING INDIRECT (60-DAY) ROLLOVERS BETWEEN IRA ACCOUNTS

Effective January 1, 2015, there is a new restriction on indirect (60-day) IRA-to-IRA rollovers. An IRA participant is allowed only one rollover across all IRAs (Traditional, Rollover, Roth, SEP, SARSEP and SIMPLE IRAs) in aggregate that a taxpayer owns in any 12-month or 365-day period. As an alternative, a participant can make an unlimited number of trustee-to-trustee transfers where the proceeds are delivered directly to the receiving financial institution, successor custodian or trustee. You must contact the receiving institution to initiate a trustee-to-trustee transfer. For more information please visit the Internal Revenue Service's web site www.irs.gov using the search term "IRA One-Rollover-Per-Year Rule".

PARTICIPANT INFORMATION

Name: _____ Daytime Telephone: () _____

Address: _____

City: _____ State: _____ Zip Code: _____

Social Security Number: _____ Date of Birth: _____

Existing Account Number: _____ or New SIMPLE IRA Account Application attached

PARTICIPANT CERTIFICATION

By signing below, I certify that the following are true and correct:

- The investment is an eligible SIMPLE IRA rollover contribution being rolled over within 60 calendar days.
- The rollover does not include any required minimum distribution amounts or corrective distribution amounts.

I understand that this rollover contribution is irrevocable. I agree that I am solely responsible for all tax consequences. I also agree that neither the Custodian nor [CLIENT] 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 Publications 560 and 590 or a professional 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 Custodian will rely on my certification when accepting my rollover contribution.

Participant's Signature: _____ Date: _____

Mail to the following:

First Class Mail:
Domini Funds
P.O. Box9785
Providence, RI 02940
1-800 582-6757

Overnight Mail:
Domini Funds
4400 Computer Drive
Westborough, MA 01581