

Do not use this Application to establish a SIMPLE IRA.

Please complete the Traditional and Roth Individual Retirement Account (IRA) Application and Adoption Agreement (the "Application") to establish your IRA account. The applicant's name must be that of an individual, not a business or trust. If you are opening an IRA for your spouse, your spouse must complete a separate Application. Please read the Traditional IRA or Roth IRA Disclosure Statement carefully or consult Internal Revenue Service ("IRS") Publication 590 for IRA eligibility requirements and contribution restrictions.

References to the "Custodian", "we" or "us" mean BNY Mellon Investment Servicing Trust Company.

The maximum allowable contribution to your IRAs (deductible, non-deductible and Roth) for each tax year is the lesser of (a) the contribution limit for the given tax year or (b) 100% of your compensation or earnings from self-employment. For those who have attained the age of 50 before the close of the taxable year, the annual IRA contribution limit increases by \$1,000 known as a "catch-up contribution". Please refer to IRS Publication 590-A for current details.

Making an IRA contribution on behalf of your spouse - If you have earned compensation, are married and file a joint federal income tax return, you may make an IRA contribution on behalf of your working or nonworking spouse. The total annual contribution limit for both IRAs may not exceed the lesser of the combined compensation of both spouses or the annual IRA contribution limits as set forth by the IRS. Contributions made on behalf of a spouse must be made to a separate IRA account established by your spouse.

Any contribution made to your IRA will be treated as a contribution for the year it is received, unless the contribution is made between January 1 and the April 15<sup>th</sup> (or later April IRS-designated date) postmark deadline and you have identified the contribution as a prior year contribution. Please read the Traditional and Roth Individual Retirement Account (IRA) Combined Disclosure Statement carefully or consult IRS Publication 590-A or a qualified tax professional for more information about eligibility requirements and contribution restrictions.

The minimum initial investment for each mutual fund or deposit account position within a Domini IRA is \$1,500, and the subsequent minimum is \$100.

**Please make checks payable to Domini Funds.**

Contributions to your IRA may be invested in mutual funds pursuant to the Mutual Fund Option. (See "Description of Available Options for Your Contributions" in the Combined Disclosure Statement).

Prospectuses for the mutual funds available through the Mutual Fund Option (the "Funds") may be obtained by calling 1-800-582-6757 or by going to [www.domini.com](http://www.domini.com). Before investing in a Fund, please be sure to read the prospectus for that Fund carefully.

All portions of the Traditional and Roth Individual Retirement Account (IRA) Application and Adoption Agreement are binding on you so you are encouraged to read all portions of it, in particular the "Description of Available Options for Your Contributions", the applicable Custodial Account Agreement and "Terms and Conditions" on the signature page of the Application.

**Trustee to Trustee Transfers and Rollovers**

If you are establishing an IRA account to accept a transfer or rollover, be sure to check the appropriate box on the Application. To transfer your current IRA directly to your Domini IRA, please complete a "Transfer of Assets/Direct Rollover Form." To certify a rollover from an IRA or a qualified retirement plan, please complete the "Certification of Rollover Assets." Participant directed rollovers must be completed within 60 calendar days.

**SIMPLIFIED EMPLOYEE PENSION (SEP) INSTRUCTIONS**

A SEP is a written arrangement (a plan) that allows your employer to make contributions toward your retirement. Contributions are made to a traditional Individual Retirement Account ("traditional IRA"). Your employer will provide you with a copy of the agreement containing participation rules and a description of how employer contributions may be made to your IRA. Your employer must also provide you with a copy of the completed Form 5305-SEP or SEP prototype adoption agreement and a yearly statement showing contributions made to your IRA.

If you are an employer who is establishing a SEP Plan, please refer to the IRS website at [www.irs.gov](http://www.irs.gov) to obtain a copy of IRS Form 5305-SEP.

Your employer has adopted a SEP Plan for your retirement needs. Please read the information on Form 5305-SEP as it contains important information on how a SEP works and your rights as a SEP IRA accountholder. Your employer will determine the amount to be contributed to your IRA each year. The amount for any year is limited to the smaller of the annual 415(c) dollar limitation (adjusted for cost-of-living, if applicable) or 25% of your compensation. Please see IRS Publication 560 for current limitations on benefits and contributions (COLA) limits.

All amounts contributed to your IRA by your employer belong to you even after you stop working for the employer. Employer contributions to your SEP IRA are excluded from your income unless there are contributions in excess of the applicable limit. For SEP IRAs, you and/or your employer are responsible for clearly differentiating SEP employer contributions from those of personal IRA contributions (if contributed to the same account).

If you are establishing a SEP IRA, you must attach an executed copy of the employer's Form 5305-SEP or SEP prototype adoption agreement.

Please mail your completed Application to:

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

**Overnight Mail:**  
Domini Funds  
4400 Computer Drive  
Westborough, MA 01581  
1-800-582-6757

**TRADITIONAL AND ROTH INDIVIDUAL RETIREMENT ACCOUNT (IRA)  
APPLICATION AND ADOPTION AGREEMENT**

**Investor Share Class Only**

Domini Impact Investments P.O. Box 9785 Providence, RI 02940

Please consult a professional advisor for tax, legal and investment advice, and refer to IRS Publications 590-A and –B for more information. If you have any other questions completing this form, please contact our Shareholder Services line at 1 800 582-6757, M - F, 9 a.m. to 6 p.m., Eastern Time.

	<b>P.O. Box 9785</b>	<b>Providence, RI 02940</b>	<b>1-800-582-6757</b>
<b>Participant Information</b>			
<b>Name:</b>	Daytime Telephone: (     )     )		
Street Address *(required)(P.O. Box is not acceptable):	Evening Telephone: (     )     )		
City:	State:	Zip Code:	
Social Security Number:	Date of Birth:		
Mailing Address (if different from street address):			
City:	State:	Zip Code:	
Responsible Individual (If minor IRA):		Social Security Number:	
Email Address (optional):			

\*You must have a valid United States address.

\*\*Domini charges a \$15 annual account service fee for each account with a balance of less than \$10,000, subject to modification or waiver at Domini’s discretion. This fee does not apply if you sign up for online account access at [www.domini.com](http://www.domini.com) and choose electronic delivery of account statements, fund reports, and prospectus. To sign up for account access, once your account has been established, please visit [www.domini.com](http://www.domini.com), and click on “Account Access”. With e-delivery, you will help to reduce costs, save paper and energy, and cut waste. As the documents become available, you will be notified by email and receive a link to view or download the document, through your online account access. Please notify Domini promptly if your email address changes.

<b>Type of IRA</b>	<input type="checkbox"/> Traditional IRA <input type="checkbox"/> Rollover IRA <input type="checkbox"/> Roth IRA <input type="checkbox"/> Rollover Roth IRA <input type="checkbox"/> SEP IRA (The employer’s IRS Form 5305-SEP must be attached)		
	EMPLOYER INFORMATION (required for SEP IRA only)		
Employer Name:	Daytime Telephone: (     )     )		
Address:			
City:	State:	Zip Code:	

<b>Investment Instructions</b>	<b>REGULAR CONTRIBUTION FOR NOTED TAX YEAR:</b> Current Year: \$ _____ Prior Year: \$ _____		
	If SEP IRA, Employer Contribution: \$ _____. Please use a personal check, payable to Domini Funds. Not acceptable are: cashier’s checks, money orders, checks payable to third parties, starter checks, traveler’s checks or checks drawn on a non-U.S. bank.		
	<b>OTHER SOURCE (CHECK ONE):</b>		
	<b>ROLLOVER – (Please attach the Rollover Certification Form)</b>		
	<input type="checkbox"/> 60 Day Rollover Check. Type of IRA or Qualified Plan being rolled over: _____		
	<input type="checkbox"/> Direct Rollover from 401(k), 403(b), 457 Plan or other Qualified Plan (excluding a Designated Roth Contribution Account) to a traditional IRA		
	<input type="checkbox"/> Direct Rollover from a Designated Roth Contribution Account to a Roth IRA		
	<input type="checkbox"/> Qualified Rollover Contribution (conversion) into a Roth IRA from a 401(k), 403(b), 457 Plan or other Qualified Plan		

**TRANSFER OF ASSETS – (Please attach the Transfer of Assets Form)**

Traditional or SEP IRA transfer of assets held at another institution

Roth IRA transfer of assets held at another institution

**CONVERSIONS OR RECHARACTERIZATIONS** - Enclosed is a:  check or  Roth IRA Conversion Form or Recharacterization Form

Roth conversion rollover from a Traditional IRA

Recharacterization contribution (the proceeds of a distribution from a traditional IRA or Roth IRA at another institution)

**Invest as Follows**

Fund Name: Domini Impact Equity Fund (473) Investor Share Class Dollar Amount \$ \_\_\_\_\_ or Percentage \_\_\_\_\_ %

Fund Name: Domini Impact International Equity Fund (430) Investor Share Class Dollar Amount \$ \_\_\_\_\_ or Percentage \_\_\_\_\_ %

Fund Name: Domini Impact Bond Fund (501) Investor Share Class Dollar Amount \$ \_\_\_\_\_ or Percentage \_\_\_\_\_ %

Fund Name: Domini Deposit Account at PNC Bank (675) Dollar Amount \$ \_\_\_\_\_ or Percentage \_\_\_\_\_ %

Must equal 100%

All dividends and capital gains, if any, will be reinvested.

Domini generally will assess 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 15<sup>th</sup> of each month (or the next applicable business day).

**Beneficiary Designation**

Note the share percentage must equal 100% for all Primary or all Contingent Beneficiaries. If neither the Primary nor the Contingent Beneficiary box is checked, the beneficiary will be deemed to be a Primary Beneficiary. If a trust is designated as a Beneficiary, please provide both the date of the trust and the name(s) of the trustee(s).

In the event of my death, the balance in the account shall be paid to the Primary Beneficiaries who survive me in equal shares (or in the specified shares, if indicated). If none of the Primary Beneficiaries survive me, the balance in the account shall be paid to the Contingent Beneficiaries who survive me in equal shares (or in the specified shares, if indicated). I understand that, unless I have specified otherwise, if I name multiple Primary Beneficiaries and a beneficiary does not survive me, such interest is terminated and that percentage will be divided proportionately among the remaining Primary Beneficiaries. Similarly, unless I have specified otherwise, if no Primary Beneficiary survives me and I have named multiple Contingent Beneficiaries and a beneficiary does not survive me, such interest is terminated and that percentage will be divided proportionately among the remaining Contingent Beneficiaries. I understand that I may change my beneficiaries at any time by giving written notice to the Custodian. If I do not designate a beneficiary, or if all designated beneficiaries predecease me, my surviving spouse will become the beneficiary of my IRA. If I do not have a surviving spouse at the time of my death, my estate will become the beneficiary of my IRA.

**Per Stirpes Beneficiary Designations:** The Custodian shall accept as complete and accurate all written instructions provided in good order by the estate/executor with regard to the identification of the beneficiaries and the allocations thereto.

**Participant’s Designation:** In the event of my death, I hereby designate the following individuals as the Primary and Contingent Beneficiary(ies) to receive all benefits that may become due and payable under my IRA. If I name a beneficiary that is a Trust, I understand that I must provide certain information concerning the Trust to the Custodian.

Primary  Contingent

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_ Share: \_\_\_\_\_ %

Address: \_\_\_\_\_ Daytime Telephone: ( \_\_\_\_\_ )

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary  Contingent

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_ Share: \_\_\_\_\_ %

Address: \_\_\_\_\_ Daytime Telephone: ( \_\_\_\_\_ )

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary  Contingent

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Relationship: \_\_\_\_\_ Share: \_\_\_\_\_ %

Address: \_\_\_\_\_ Daytime Telephone: ( \_\_\_\_\_ )

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**COMMUNITY PROPERTY SPOUSAL CONSENT**

**Note:** Consent of the Participant’s spouse may be required in a community property or marital property state to effectively designate a beneficiary other than, or in addition to, the Participant’s spouse.

**Disclaimer for Community and Marital Property States:** The Participant's spouse may have a property interest in the account and the right to dispose of the interest by will. Therefore, any sponsors, issuers, depositories and other persons or entities associated with the investments and the Custodian specifically disclaim any warranty as to the effectiveness of the Participant's beneficiary designation or as to the ownership of the account after the death of the Participant's spouse. For additional information, please consult your legal advisor.

I consent to the Beneficiary Designation.

Signature of Spouse: \_\_\_\_\_ Date: \_\_\_\_\_

Telephone  
Redemption  
Privileges

You have the ability to make share redemptions, and exchanges to another position within this account, by telephone, unless you inform us otherwise. Certain restrictions apply.

I do not want the ability to redeem IRA shares by telephone on this account.

In this case, you will be able to make redemptions or exchanges only by sending to us a signed letter of instruction.

Automatic  
Investment

- The minimum subsequent investment is \$50 per Fund if an automatic investment plan is established.
- All contributions invested using the Automatic Investment Plan will be current year contributions.
- We will establish your banking instructions using the voided check attached in the space provided below.

For SEP IRA only:

Personal IRA contribution or

Employer contribution

I would like to automatically invest from my bank account to my IRA account on the following basis. If you do not indicate a frequency, then we will default to monthly.

Weekly  Monthly  Quarterly  Semi-annually  Annually

My contribution to the funds marked below will take place on the \_\_\_\_\_ (e.g. 15<sup>th</sup>) of the month, beginning in the month of \_\_\_\_\_ (e.g. January). If you do not indicate a date of the month, then we will default to the 15<sup>th</sup> of the month.

\$50 minimum for each

Fund Name: Domini Impact Equity Fund (473) Investor Share Class Dollar Amount \$ or Percentage %

Fund Name: Domini International Impact Equity Fund (473) Investor Share Class Dollar Amount \$ or Percentage %

Fund Name: Domini Impact Bond Fund (501) Investor Share Class Dollar Amount \$ or Percentage %

Fund Name: Domini Deposit Account at PNC Bank (675) Dollar Amount \$ or Percentage %

Must equal 100%

All dividends and capital gains, if any, will be reinvested.

Domini generally will assess 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 15<sup>th</sup> of each month (or the next applicable business day).

ATTACH VOIDED CHECK HERE

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## Terms and Conditions

I, the Participant, acknowledge receiving and reading the Traditional and Roth IRA Application and Adoption Agreement Instructions, the Traditional IRA and Roth IRA Combined Disclosure Statement, the Traditional IRA Custodial Account Agreement, the Roth IRA Custodial Account Agreement, the Privacy Notices and the Business Continuity Plan Disclosure Statement (the "Account Documents"). I acknowledge receiving and reading the current prospectus for each Mutual Fund I may have designated for investment. The Custodian, upon proper instructions from me, is authorized to exchange units of one Eligible Asset for units of any other Eligible Asset and to purchase units of any Eligible Asset with the proceeds of any redemption.

Article VIII, Section 23 of the Traditional IRA Custodial Account Agreement and Article IX, Section 23 of the Roth IRA Custodial Account Agreement authorize the Custodian to take or to omit to take certain actions in the event assets or property in my IRA Account are liquidated and the Custodian does not receive timely instructions it can reasonably or practicably carry out and I agree to the terms of both Sections 23.

I hereby establish an Individual Retirement Account ("IRA") in accordance with instructions provided on these pages entitled Traditional and Roth Individual Retirement Account (IRA) Application and Adoption Agreement and agree to participate under the terms and conditions contained in the Account Documents and on the aforementioned pages (the "Full Agreement"). (My IRA account with the Custodian is called the "IRA Account" on this page).

I agree that this IRA becomes effective only upon written acceptance by the Custodian and that such written acceptance will consist of a confirmation of transaction statement.

I agree that the Custodian may amend (add to, delete from or revise) any term of the Full Agreement at any time by notice to me and that my sole remedy if I disagree with the amendment is to transfer funds in the IRA Account to another custodian. I agree that the Full Agreement is binding on me and on my successors in interest.

Each contribution to my IRA will be invested in accordance with the written instructions I provide with respect to that contribution. In the event that this is a rollover contribution, the undersigned hereby irrevocably elects, pursuant to the requirements of Section 1.402(a)(5)-1T of the IRS regulations, to treat this contribution as a rollover contribution.

**Custodial Fees:** \$10 annual maintenance fee per account per year. This fee is owed and due for each full and partial calendar year that the IRA Account is open. The participant may pay the fee with funds other than those in the IRA Account ("non-custodial funds"). If the fee for a calendar year is not paid by the participant from non-custodial funds by the date reasonably designated by the Custodian or prior to closing the IRA Account, the Custodian is authorized to deduct the fee from funds in the IRA Account at any time immediately after such payment due date or immediately after receiving instructions to close the IRA Account. The Custodian is authorized to change the fee but will give at least 30 days written notice to the participant of any fee change. The Custodian will keep those records, identify and file returns and provide other information concerning the IRA as required of custodians by the Internal Revenue Code and any regulations issued or forms adopted by the Internal Revenue Service or U.S. Treasury Department.

I understand that the telephone transaction privileges will apply to my account. If I have telephone transaction privileges, I agree that neither the Custodian, Domini Funds, nor their transfer agent, their agents, officers, trustees, directors or employees will be liable for any loss, liability or expense for acting, or refusing to act on instructions given under the telephone transaction privileges that are reasonably believed to be genuine and I accept the risk of loss.

I direct that all benefits upon my death be paid as indicated on the beneficiary designation. If I named a beneficiary that is a Trust, I understand I must provide certain information concerning such Trust to the Custodian.

I (the Participant) certify under penalties of perjury that (i) all information I have provided on this form or otherwise in connection with establishing my IRA is true, correct, and complete, and (ii) I am a US person (including a US resident alien) and that my Social Security Number is true, correct and complete and that this number is my Taxpayer Identification Number. (Foreign persons must use appropriate Form W-8)

To help the U.S. Government fight the funding of terrorism and money laundering activities, Federal law requires all financial institutions to obtain, verify, and record information that identifies persons opening accounts. To comply, the Custodian requires the participant's name, address, date of birth and government-issued identification number (generally, a Social Security Number) and other information that may help the Custodian identify the participant; and the Custodian may ask for copies of related documentation and may consult third-party databases to help verify the participant's identity. I have read and I understand the Disclosure Statement which explains the risks of opening this account if I do not provide all requested identification materials or if my identity cannot be adequately verified in accordance with U.S. Government requirements.

**Participant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

(Responsible Individual in the case of a minor IRA)

IRA Custodian: BNY Mellon Investment Servicing Trust Company, 4400 Computer Drive, Westborough, MA 01581

**Dealer or  
Advisor  
Designation**

If you do not have a Dealer or Advisor assisting you with this transaction, please leave this section blank.

Firm Name: \_\_\_\_\_ Firm Number: \_\_\_\_\_

Representative's Name: \_\_\_\_\_ Rep. Number: \_\_\_\_\_

Telephone: (            ) \_\_\_\_\_ Branch Number: \_\_\_\_\_

Branch Address: \_\_\_\_\_

<b>FACTS</b>	<b>WHAT DOES BNY MELLON INVESTMENT SERVICING TRUST COMPANY DO WITH YOUR PERSONAL INFORMATION?</b>
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<b>Why?</b>	<p>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.</p> <p>Please read this notice carefully to understand what we do.</p>
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<b>What?</b>	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> <li>• Social Security number</li> <li>• Account balances</li> <li>• Transaction history</li> <li>• Account transactions</li> <li>• Retirement assets</li> </ul> <p>When you are no longer our customer, we continue to share your information as described in this notice.</p>
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<b>How?</b>	<p>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 BNY Mellon Investment Servicing Trust Company chooses to share; and whether you can limit this sharing.</p>
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Reasons we can share your personal information	Does <b>BNY Mellon Investment Servicing Trust Company</b> 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

<b>Questions?</b>	Call 855-649-0623
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## FACTS WHAT DOES DOMINI DO WITH YOUR PERSONAL INFORMATION?

Why?	<p>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.</p> <p>Please read this notice carefully to understand what we do.</p>
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What?	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> <li>• Social Security number</li> <li>• Name, address, email address, and phone number</li> <li>• Account balances</li> <li>• Transaction history</li> <li>• Account transactions</li> <li>• Assets</li> <li>• Retirement assets</li> </ul> <p>When you are <i>no longer</i> our customer, we continue to share your information as described in this notice.</p>
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How?	<p>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 Domini chooses to share; and whether you can limit this sharing.</p>
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Reasons we can share your personal information	Does <b>Domini</b> share?	Can you limit this sharing?
<b>For our everyday business purposes—</b> such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
<b>For our marketing purposes—</b> to offer our products and services to you	Yes	No
<b>For joint marketing with other financial companies</b>	No	We don't share
<b>For our affiliates' everyday business purposes—</b> information about your transactions and experiences	Yes	No
<b>For our affiliates' everyday business purposes—</b> information about your creditworthiness	No	We don't share
<b>For our affiliates to market to you</b>	No	We don't share
<b>For nonaffiliates to market to you</b>	No	We don't share

Questions?	Call <b>1-800-498-1351</b> or go to <b>www.domini.com</b>
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## Who we are

Who is providing this notice?	Domini Impact Investments LLC (“DSIL”) ; DSIL Investments Services LLC; and all the Funds advised by DSIL (collectively referred to as “Domini”). A complete list of Funds is included under Affiliates below.
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## What we do

How does <b>Domini</b> 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 <b>Domini</b> collect my personal information?	We collect your personal information, for example, when you <ul style="list-style-type: none"> <li>• Open an account or invest funds</li> <li>• Make deposits or withdrawals from your account</li> <li>• Provide account information</li> <li>• Give us your contact information</li> <li>• Show your government-issued ID</li> </ul> <p>We also collect your personal information from affiliates or other companies.</p>
Why can't I limit all sharing?	Federal law gives you the right to limit only <ul style="list-style-type: none"> <li>• Sharing for affiliates' everyday business purposes— information about your creditworthiness</li> <li>• Affiliates from using your information to market to you</li> <li>• Sharing for nonaffiliates to market to you</li> </ul> <p>State laws and individual companies may give you additional rights to limit sharing.</p>

## Definitions

Affiliates	Companies related by common ownership or control. They can be financial and nonfinancial companies. <ul style="list-style-type: none"> <li>• Our affiliates include DSIL; DSIL Investment Services LLC; Domini Holdings LLC; and the registered investment companies advised by DSIL including the Domini Investment Trust and its series, the Domini Impact Equity Fund, the Domini Impact International Equity Fund, and the Domini Impact Bond Fund.</li> </ul>
Nonaffiliates	Companies not related by common ownership or control. They can be financial and nonfinancial companies. <ul style="list-style-type: none"> <li>• <b>Domini</b> does not share information with nonaffiliates so they can market to you.</li> </ul>
Joint marketing	A formal agreement between nonaffiliated financial companies that together market financial products or services to you. <ul style="list-style-type: none"> <li>• <b>Domini</b> does not jointly market.</li> </ul>

## Business Continuity Plan Disclosure Statement

Domini Impact Investments LLC and its affiliated distributor, DSIL Investment Services LLC, maintain a Business Continuity Plan (BCP) that has been developed with the goal of protecting the health and safety of our employees and maintaining continuity of service for our Domini Funds' shareholders. Our plan is designed to ensure that we are prepared to operate through significant business disruptions, so that our shareholders can access their accounts without significant interruption under most circumstances.

Key elements of our BCP include the following:

- Critical data from our computer systems is backed up daily to geographically remote, secure facilities.
- All Domini employees can access Domini's computer data remotely via a secure connection. In the event that Domini's primary network is not accessible, Domini maintains replicas of all files and database servers in a geographically remote disaster-recovery network available to all employees over a secure connection.
- We maintain an office evacuation plan and emergency procedures in the event of a disaster affecting our primary office facilities or surrounding area.
- We maintain an emergency contact list and procedures updated and distributed on a regular basis.

Our mission critical functions, including shareholder transaction processing, custody and fund accounting, and investment submanagement, are accomplished through our key service providers. These key service providers are required to maintain business continuity plans, which Domini reviews at least annually.

Domini's BCP is designed to address significant business disruptions of varying scope, including a firm-only disruption, single-building disruption, city-wide business disruption, or a regional disruption. In the event of a significant business disruption, our employees are to communicate from alternate locations and access Domini's computer data remotely. Key service providers would be contacted, and would, if possible, continue to provide critical shareholder transaction processing, custody, fund accounting, and investment submanagement services. Our key service providers maintain offices outside New York City, thereby lessening the effect of a city-wide business disruption. Our key service providers maintain alternate business locations with the goal of enabling them to resume critical functions in a reasonable period of time in the event of a regional disruption of significant scope.

If you need to contact us after a significant business disruption, please call our Shareholder Information line at 1-800-582-6757, our main office telephone number at 212-217-1100, or go to our website at [www.domini.com](http://www.domini.com) and click on the "Contact Us" link. If you cannot contact us by calling our Shareholder Information line, our main office phone number, or our website, please contact Domini Funds' Transfer Agent, BNY Mellon Asset Servicing, at 610-382-7826 or through its website at <http://www.bnymellon.com/assetservicing/index.html>.

It is impossible for us to anticipate every potential problem that may occur, but we believe our BCP will enable us to continue to conduct business in the event of a variety of possible business disruptions. We believe that our BCP is reasonably designed to help us limit the recovery time necessary to resume operations.

We review and test our BCP at least annually. The BCP is subject to modification based on changing circumstances and assessment of need.