

Corporate Resolution Form

This form must be completed by corporations, partnerships, business trusts, and other similar organizations and submitted along with an Account Registration form, Retain a copy of this form for your records. Any modification of the information provided by you in this form will require the submission of a new form. If you need additional forms, please call 1-800-93-GREEN, Monday through Friday, 9:00 a.m. to 6:00 p.m. Eastern Time. This document is in full force and effect until another duly executed form is received by Atlantic Fund Services. Please send this completed form to Green Century Funds, P.O. Box 588, Portland, ME 04112.

Note: For assistance in filling out this form, please contact Shareholder Services at 1-800-221-5519 Monday through Friday, 8:00 am to 6:00 pm Eastern Time.

Please attach the appropriate documents

For Corporations: Certified Articles of Incorporation (specifically indicating the authority of the assigning officer "to sell, assign and transfer funds.")

For Partnerships: Partnership Agreement or other appropriate documentation including evidence of who has the authority to act on behalf of the partnership.

For Other Organizations: Documents indicating the nature and purpose of the organization including evidence of who has the authority to act on behalf of the organization.

Account Registration Information All organizations must complete this section. Name of Business/Organization ___ Tax Identification Number ____-☐ Green Century Balanced Fund-Individual Investor Share Class Account # If new account, write "New" Green Century Equity Fund-Individual Investor Share Class Account # If new account, write "New" ☐ Green Century International Index Fund-Individual Investor Share Class Account # If new account, write "New" ☐ Green Century International Index Fund-Institutional Share Class Account # If new account, write "New"

Article 1. Resolutions for Telephone Redemption and Exchange of Shares

This section must be completed only if the "Telephone Redemption Option" on the enclosed Account Registration form has been elected.

Resolved: That, in connection with any funds invested by		_ in shares of
•	NAME OF ORGANIZATION	
☐ Green Century Balanced Fund-Individual Investor Share Class		

- ☐ Green Century Equity Fund-Individual Investor Share Class
- ☐ Green Century International Index Fund-Individual Investor Share Class
- ☐ Green Century International Index Fund-Institutional Share Class

any of the following persons acting singly	or in concert	
NAME(S) AND TITLE(S) OF PERSON(S) WITH AU	THORITY	
is (are) hereby authorized and directed to Account Registration form.	execute the Telephone Rede	mption Option in the Green Century Funds
Resolved: That Atlantic Fund Services (A		gnated as the true and lawful agent of aption of exchange between funds, any and
NAME OF ORGANIZATION		
Equity Fund-Individual Investor Share Cla Class, and/or Green Century Internationa	ss, Green Century Internation I Index Fund-Institutional Shar hereby authorized and directed changes of shares held in the	re Class accounts (the "Accounts"), with full d to accept and act without inquiry upon any Accounts from the individual(s) identified
Further Resolved: That		will not hold Atlantic liable for
any loss, expense or costs arising out of a	any telephone request for redence ne redence and exchange	emption or exchange so long as Atlantic acts procedures as described in the prospectus
Further Resolved: That each of the follow relating to the Green Century Funds as de		authorized to make telephone transactions alf of this organization.
NAME	TITLE	
Article 2. Resolutions for Writter All organizations must complete this section	on as authorization for written	redemption of shares.
Resolved: That, the following named persignatories) of	sons are currently (officers) (tr and any	rustees) (partners) or (other authorized of them is/are currently authorized to MBER
NAME OF ORGANIZ	ATION NU	MBER
request in writing the redemption of any n	umber of shares held by this o	organization in the funds indicated below.
 □ Green Century Balanced Fund-Individual □ Green Century Equity Fund-Individual □ Green Century International Index Funder □ Green Century International Index Funder 	Investor Share Class nd-Individual Investor Share Clas	es
AUTHORIZED SIGNATURE(S) NAME	TITLE	SPECIMEN SIGNATURE

Further Resolved: That until duly notified in writing of a resolution to the contrary, Atlantic Fund Services (Atlantic) is authorized to accept and act upon the certificate of the (Secretary) (Clerk) or (other officer) of this organization as to the names of the present and future officers or other authorized signatories of this organization, and to act and rely upon any specimens of signatures of officers, or other persons, if any, authorized to sign and act for this organization, which are furnished to Atlantic by such (Secretary) (Clerk) or (other officer).

Article 3. General Resolutions and Certification

All organizations must complete this section.

authorized and (Telephone Red (Charter) (Article	directed to d demption) ar es of Organi	igned (Secretary) (Certify to Atlantic Fund/or (Written Rederization or Incorporated, and the By-Laws	nd Services (Atlantion) and that ion) (Declaration)	antic) that the for the provisions th	egoing resolution(s nereof are in confo	s) relating to rmity with the
				the laws of	and we	ere duly adopted
NAME	E OF ORGANIZ	ZATION		NAM	E OF STATE	
at a meeting of	the Board of	f (Directors) or (Trus	stees) of the org	anization duly ca	illed and held on _	// DATE
and that these r organization off resolutions are	esolutions a icially notifie in effect and	sent and acting through the authority the sent and the authority the sent at the the persons identification of the formal that the persons identification of the persons identification of the formal that the persons identification of the formal that the persons identification of the formal that the persons identification of the persons ident	reby conferred s trary in writing a entified from tim	shall remain in fu and Atlantic may se to time as offic	II force and effect us conclusively presusers or trustees by a	until this me that such certificate of the
I certify that the prescribed in the		ed authorized perso resolutions.	n(s) in Articles	1 and/or 2 are em	npowered to act wi	thin the authority
Witness my har	nd this	day of				
•		,		*SECRETARY, CLE	RK, TRUSTEE, OR OT	HER OFFICER
			Confirmed:			
Account Auth	norization	Information for E	ach Individua	al Listed in Art	icle 1 and Article	e 2 Above
First Name	MI	Last Name		Date of Birth Social Security Number		Number
Street Address (Not	t a PO Box)		City		State	Zip Code
Daytime Telephone		Evening Te	elephone			
First Name	MI	Last Name		Date of Birth	Social Security	Number
Street Address (Not	t a PO Box)		City		State	Zip Code
Daytime Telephone		 Evening Te	elephone			

First Name	MI	Last Name		Date of Birth	Social Security Number	
Street Address (Not	a PO Box)		City		State	Zip Code
Daytime Telephone		Evening Telephone				
First Name	MI	Last Name		Date of Birth	Social Security Number	
Street Address (Not	a PO Box)		City		State	Zip Code
Daytime Telephone		 Evening Telephone				

^{*}If the secretary or other recording officer is authorized to act alone by the above resolutions, this certificate must also be confirmed by another officer.