



REDEMPTION FORM FOR NONRETIREMENT ACCOUNTS

For assistance in completing this request, please contact the Northern Funds Center at **800-595-9111** weekdays from 7:00 a.m. to 5:00 p.m. Central time. Please mail your request to: Northern Funds, P.O. Box 75986, Chicago, IL 60675-5986 or fax your request to: **312-557-0411**.

INSTRUCTIONS

INVESTOR SERVICES: **800-595-9111** WEBSITE: **northerntrust.com/funds**

- **Complete this form for a one-time redemption. We will not process this request if it is not signed by all account owners.**
- **Additional documentation may be required if a change of ownership (i.e., death, disability, divorce, power of attorney) is involved with this request. For more information regarding these redemption requests, please call Investor Services at the number listed above.**
- **A Medallion Signature Guarantee may be required.**

Please print all information.

1 CURRENT ACCOUNT INFORMATION

ACCOUNT TYPE

Sole Owner Joint Tenants Trust UGMA/UTMA Corporation Partnership

OWNER'S FIRST NAME _____ LAST NAME _____ PHONE NUMBER _____

JOINT OWNER'S FIRST NAME _____ LAST NAME _____

OWNER'S SOCIAL SECURITY NUMBER _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

2 REDEMPTION OPTIONS

Please tell us which funds you would like to redeem. If you are only completing a request for a full redemption, go immediately to Section B and do not fill out any portion of Section A.

A) PARTIAL REDEMPTION

NORTHERN FUNDS ACCOUNT NUMBER _____ AMOUNT _____ OR, NUMBER OF SHARES _____

NORTHERN FUNDS ACCOUNT NUMBER _____ AMOUNT _____ OR, NUMBER OF SHARES _____

B) FULL REDEMPTION (100% OF ACCOUNT BALANCE)

NORTHERN FUNDS ACCOUNT NUMBER _____ AMOUNT _____ OR, NUMBER OF SHARES _____

NORTHERN FUNDS ACCOUNT NUMBER _____ AMOUNT _____ OR, NUMBER OF SHARES _____

3 HOW TO RECEIVE REDEMPTION PROCEEDS

Please tell us how you would like to receive your redemption proceeds. If you would like to establish the option of transferring your money from your Northern Funds account to your bank account that is not currently on file with us, you must have your signature guaranteed in Section 6 and attach a preprinted voided check or deposit slip.

Please select only one option for where you would like your payment sent. If you do not select one of the options, we will default to the address of record.

- A)** Send a check to my address of record. (If you have changed your address on your Northern Funds account within the past 10 days, you must have your signature guaranteed in Section 6.)
 First Class Mail **OR** Overnight Mail (your account will be debited a \$20 fee)
- B)** Deposit electronically to my bank account (if this is an account we have not redeemed into before, your signature must be guaranteed). (Complete Section 4)
- C)** Send proceeds via Federal Funds wire to my bank account. (Your account will be charged \$15 for each wire redemption unless the designated bank account is maintained at Northern Trust or an affiliated bank.) (Complete Section 4)
- D)** Send payment to Others (Third Party). You must have your signature guaranteed in Section 6. Please fill in payable to section below.
 First Class Mail **OR** Overnight Mail (Your account will be debited a \$20 fee.)
- E)** Send payments to another financial institution. You must have either your signature guaranteed in Section 6 or include a Letter of Acceptance from the Receiving Institution. Please fill in the information below.

PAYABLE TO

<hr/> FIRST NAME		<hr/> LAST NAME	
<hr/> STREET ADDRESS			
<hr/> CITY	<hr/> STATE	<hr/> ZIP	

FOR THE BENEFIT OF

<hr/> FIRST NAME	<hr/> LAST NAME
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RECEIVING INSTITUTION

<hr/> NAME (RECEIVING INSTITUTION)		
<hr/> STREET ADDRESS		
<hr/> CITY	<hr/> STATE	<hr/> ZIP

FOR THE BENEFIT OF REGISTRATION AT RECEIVING INSTITUTION

<hr/> FIRST NAME	<hr/> LAST NAME
<hr/> ACCOUNT NUMBER	

4 BANK ACCOUNT INFORMATION

Please indicate your bank account number and the address of your bank to which redemptions should be wired.

BANK NAME

BANK STREET ADDRESS

BANK PHONE NUMBER

CITY

STATE

ZIP

ABA ROUTING NUMBER

BANK ACCOUNT NUMBER

TYPE OF ACCOUNT: Checking Savings

LIST ALL BANK ACCOUNT OWNERS

FIRST NAME

LAST NAME

FIRST NAME

LAST NAME

TYPE OF WIRE: Domestic International*

For international wires, please provide swift code _____

*All wires must go through an American corresponding bank. Please provide American bank name and routing number.

AMERICAN BANK NAME

ROUTING NUMBER

5 SIGNATURE

I hereby authorize Northern Funds to redeem shares from my fund account(s) listed and to send the proceeds to me or my bank account listed or to others (with additional signatures). I understand and agree that such redemption privileges are subject to terms and conditions in the then-current prospectus of the funds selected and may be modified, suspended, or terminated by that fund at any time.

For your protection, a signature guarantee is required if your redemption request is over \$100,000.00. For certain redemptions, your signature must be guaranteed by a U.S. bank or trust company, credit union, or savings association, or by a foreign bank that has a U.S. correspondent bank, by a U.S. registered dealer or broker in securities, municipal, or government securities, or by a U.S. National Securities Exchange, a registered securities association or clearing agency. (A notary is not acceptable.)

SIGNATURE

DATE

SIGNATURE

DATE

To protect you and Northern Funds against fraud, your signature(s) must be guaranteed or validated by any “eligible” financial institution. Eligible financial institutions include commercial banks, trust companies, saving associates and credit unions as defined by the Federal Deposit Insurance Act. Also included are member firms of a domestic stock exchange. You should verify with the institution that they participate in the Medallion Signature Guarantee Program.

MEDALLION SIGNATURE GUARANTEE IS REQUIRED IF:

- Payment is equal to or greater than \$100,000
- Electronic payment is to a bank account not on file
- The payment recipient is someone other than the account owner
- Payment is being sent to an address that is different from the address of record
- Funds are being transferred to another Northern Funds account that is not registered to the account owner

Financial institution: Place Medallion Signature Guarantee stamp here.

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IMPORTANT INFORMATION
You may obtain a Medallion Signature Guarantee stamp from a participating bank or brokerage firm where you hold an account.

Please mail your completed form to:

Mailing address:

Northern Funds
P.O. Box 75986
Chicago, IL 60675-5986

Overnight address:

Northern Funds
333 South Wabash Avenue
Dept. W-38
Chicago, IL 60604