

## SALES CHARGE WAIVER FORM

Use this form to claim a waiver to the initial sales charge or the contingent differed sales charge as explained in the Alger Family of Funds prospectus. Please attach this form to your Alger Family of Funds New Account Application, if for an initial purch ase. If you have any questions about completing this form, please contact Shareholder Services at 1.800.992.3863.

## Mailing Instructions

Please send completed form to:

Regular Mail Delivery
Alger Family of Funds
PO Box 2175
Milwaukee WI 53201-2175

Overnight Delivery

Alger Family of Funds C/O UMB Fund Services, INC 235 W Galena Street Milwaukee WI 53212

Section 1: Account Registration	
Owner(s)/Account Title (as listed on your statement):	
Account Number (if existing):	Social Security Number:
SECTION 2: ELIGIBILITY OF WAIVER	
Name of Individual Requesting Waiver:	
Authorized Signature (owner, custodian, trustee):	Date:
Please substantiate your eligibility for the waiver of the sales charge by checking one of the options below:	
☐ Employees of Fred Alger & Company, Incorporated ("Alger, Inc.") and its affiliates; and spouses, children, siblings and parents of those employees and trusts of which those individuals are beneficiaries, as long as orders for the shares were placed by the employees	
Accounts managed by Fred Alger Management, Inc.; employees, participants and beneficiaries of those accounts; and spouse minor children of those employees, participants and beneficiaries as long as orders for the shares were placed by the employees, participants and beneficiaries	
☐ Directors/Trustees of any investment company which Alger Inc. or any of its affiliates serves as investment advisor or distributor	
☐ Defined Contribution Plans as defined by ERISA that have an agreement in place with Alger Inc. for waiver of the sales charge	
☐ Registered investment advisors for their own accounts	
Registered investment advisors, banks, trust companies and other financial institutions, including broker-dealers and their immediate families, and financial intermediaries offering self-directed investment brokerage accounts, that have an agreement in place with Alger Inc. for waiver of sales charge	
☐ Financial institutions on behalf of investment advisors or financial planners for their own accounts or their clients and charge a management, consulting or other fee for their services; and retirement and deferred compensation plans and trusts used to fund those plans	
☐ Registered representatives of broker-dealers that have an agreement in place with Alger Inc. for waiver of the sales charge; and their spouses, children, siblings and parents	
☐ Children or spouses of individuals who died in the terrorist attacks of September 11, 2001	
SECTION 3: VERIFICATION OF ELIGIBILITY	
This section should be completed by the appropriate official of the organization with which the eligible person is affiliated.	
Verifying Signature:	Title:
Company:	Date: