New Alternatives Fund Individual Retirement Account (IRA) Request for Distributions

ULTIMUS FUND SOLUTIONS

- Use this form to request a one-time distribution, establish a Systematic Withdrawal Plan (SWP) on your account or request an Removal of Excess or a Conversion/Recharacterization.
- Your bank must be a member of the Automated Clearing House (ACH) to establish a SWP going to your bank.
- The immediate use of new or updated banking instructions (within 30 days of account update) requires a Medallion Signature Guarantee.
- Requests that require a Medallion Signature Guarantee must be submitted by mail.
- A distribution fee may be applied at the time of your request. Contact Shareholder Services for applicable fee charges.

1. INVESTOR INFORMATION (*Required Information)

Owner's Name* (First, M.I., Last)

Date of Birth*

Social Security Number*

Street Address (Physical Address)*

City*

State*

Zip Code*

Account Number*

Fund Family Name

Daytime Phone*

2. REASON FOR DISTRIBUTION

- ○ I am at least age 59½ and this is a normal distribution.
- ○ I am under age 59½ and this is a premature distribution; I am aware that the IRS may assess a 10% penalty.
- ○ I am the beneficiary of an IRA and I am requesting a distribution.

3. DISTRIBUTION INSTRUCTIONS

Select either a **One Time** or **Systematic Distribution**. Provide details about the distribution(s) you are requesting to assist us in meeting federal regulations for tax reporting. **Please note that a Medallion Signature Guarantee may be required based on the amount requested.**

○ **One Time Distribution**

- ○ I wish to withdraw my entire account balance.
- ○ I wish to make a one-time, partial withdrawal of $
- ○ I wish to withdraw the requested amount proportionately across all investments.
- ○ I wish to withdraw the requested amount based on my pre-selected asset allocation model.
- ○ I wish to withdraw the requested amount from my investments as indicated in the chart below.

*If no election is made, we will withdraw the requested amount proportionately across all your investments.

Name of Investment	Share Class	Total Investment Amount ($)

Total:

○ **Systematic Withdrawal**

○ I wish to set up Automatic withdrawals in the amount of $ on a

○ Monthly ○ Quarterly ○ Semi-Annual ○ Annual basis.

Start Month | Start Date

*If no day is chosen, distributions will be made on the 25th day of the next upcoming month or the prior business day if the 25th falls on a weekend or holiday.

*If your request is received or processed after your requested start date, the first distribution will occur on the selected day of the next upcoming month.

○ I wish to withdraw the requested amount based on my pre-selected asset allocation model.
○ I wish to withdraw the requested amount proportionately across all investments.
○ I wish to withdraw the requested amount from my investments as indicated in the chart below.

*If no election is made, we will withdraw the requested amount proportionately across all your investments.

Name of Investment	**Share Class**	**Total Investment Amount ($)**

Total:

4. REQUIRED MINIMUM DISTRIBUTION

○ I wish to make a one-time withdrawal of my required minimum distribution for

○ I wish to make a one-time withdrawal of my required minimum distribution calculated by the Trustee/Custodian and distributed to me.

○ I wish to have my required minimum distribution calculated by the Trustee/Custodian and distributed to me in equal installments on:

○ Monthly ○ Quarterly ○ Semi-Annual ○ Annual basis.

Start Month | Start Date

*If no day is chosen, distributions will be made on the 25th day of the next upcoming month or the prior business day if the 25th falls on a weekend or holiday.

*If your request is received or processed after your requested start date, the first distribution will occur on the selected day of the next upcoming month.

- ○ I wish to withdraw the requested amount based on my pre-selected asset allocation model.
- ○ I wish to withdraw the requested amount proportionately across all investments.
- ○ I wish to withdraw the requested amount from my investments as indicated in the chart below.

*If no election is made, we will withdraw the requested amount proportionately across all your investments.

Name of Investment	Share Class	Total Investment Amount ($)
	Total:	

5. CONVERSIONS/RECHARACTERIZATIONS/EXCESS REMOVAL

Funds from a conversion, recharacterization or excess removal will be transferred in to the same fund(s) that they are converted, recharacterized or removed from.

Convert my Traditional IRA to a Roth IRA

Convert:
- ○ All Shares
- ○ Dollar Amount: $
- ○ Percentage: %

NOTE: If All Shares is not selected, we convert the elected dollar amount or percentage proportionately across all your investments.

To:
- ○ A new Roth IRA *(Complete and enclose an IRA New Account Form)*
- ○ My existing Roth IRA, account number:

Important: Withholding income taxes from the amount converted (instead of paying applicable income taxes from another source) may adversely impact the expected financial benefits of converting from an IRA to a Roth IRA (consult your financial advisor if you have a question). If you wish to convert a Traditional IRA to a Roth IRA with no federal taxes withheld, you must elect to have 0% withholding below in Part 5. In so doing, by signing this form, you acknowledge that you may be required to pay estimated tax and that insufficient payments of estimated tax may result in penalties.

Recharacterize My Contribution

Recharacterize my contribution of $ for tax year

To:
- ○ A new Traditional or Roth IRA *(Complete and enclose an IRA or Roth IRA New Account Form)*
- ○ My existing Traditional or Roth IRA, account number:

NOTE: Earnings may be negative, reducing the amount withdrawn.

Important: Federal and State taxes will not be withheld when recharacterizing contributions.

Removal of Excess Contributions Plus Earnings

For what year was the contribution made?

○ Current Year ○ Prior Year

Excess Contribution Amount: $

NOTE: Earnings may be negative, reducing the amount withdrawn.

Reallocation of Excess Contribution

○ Apply excess contribution towards tax year _____ and refund earnings (if applicable).

○ Apply both excess contribution and earnings (if applicable) towards tax year _____ . Cannot exceed contribution limits.
NOTE: We are unable to apply excess contribution towards prior year or future year contributions after the tax filing deadline has passed.

○ I wish to withdraw the requested amount based on my pre-selected asset allocation model.
○ I wish to withdraw the requested amount proportionately across all investments.
○ I wish to withdraw the requested amount from my investments as indicated in the chart below.

*If no election is made, we will withdraw the requested amount proportionately across all your investments.

Name of Investment	Share Class	Total Investment Amount ($)
	Total:	

Important: Please complete Part 5 for withholding instructions on the earnings portion of your excess removal.

6. WITHHOLDING NOTICE AND ELECTION

Federal Withholding

Completion and execution of this form, including any federal withholding election made herein, obviates the need to complete a separate Internal Revenue Service Form W-4R. However, a copy of IRS Form W-4R with instructions is attached for your reference.

Your withholding rate is determined by the type of payment you will receive.

For nonperiodic payments, the default withholding rate is 10%. You can choose to have a different rate by entering a rate between 0% and 100% below. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its territories. (See the attached Form W-4R for more information).

Complete this section if you would like a rate of withholding that is different from the default withholding rate. See the instructions and the Marginal Rate Tables that follow for additional information. Enter the rate as a whole number (no decimals).

Withhold _____ %

If no withholding information is included, we will automatically withhold the default withholding percentage elected on your account. If you do not have a default withholding election on your account and the above information is left blank, we will automatically apply 10% default withholding to your requested distribution (Federal and State taxes will not be withheld when recharacterizing contributions). Federal taxes will not be withheld from ROTH IRA Distributions unless requested above.

State Withholding

Your state of residence will determine your state income tax withholding requirements, if any. Those states with mandatory withholding may require state income tax to be withheld from payments if federal income taxes are withheld or may mandate a fixed amount regardless of your federal tax election. Voluntary states let individuals determine whether they want state taxes withheld. Some states have no income tax on retirement payments. Please consult with a tax advisor or your state's tax authority for additional information on your state requirements.

Name of Withholding State _____

○ Withhold _____ %

○ Do Not Withhold State Income Tax

NOTE: State income tax withholding may not be available for all states. If applicable, mandatory state income tax will be withheld from the distribution in accordance with state tax guidelines.

7. PAYMENT INSTRUCTIONS **Denotes that a Medallion Signature Guarantee is required

○ **Qualified Charitable Distribution (QCD)****

- ○ Mail check(s) to the address of record (The information below must still be completed)**
- ○ Mail check(s) directly to the qualified charity**

Make check payable to

EIN

Street Address (Physical Address)*

City*

State*

Zip Code*

○ **By Mail**

- ○ Mail check(s) to the address of record
- ○ Make check(s) payable to someone other than the account owner (Indicate payee below)**

  Make check payable to:

○ **Send to My Bank**

Send distributions to my bank by Automated Clearing House (ACH) based on the:

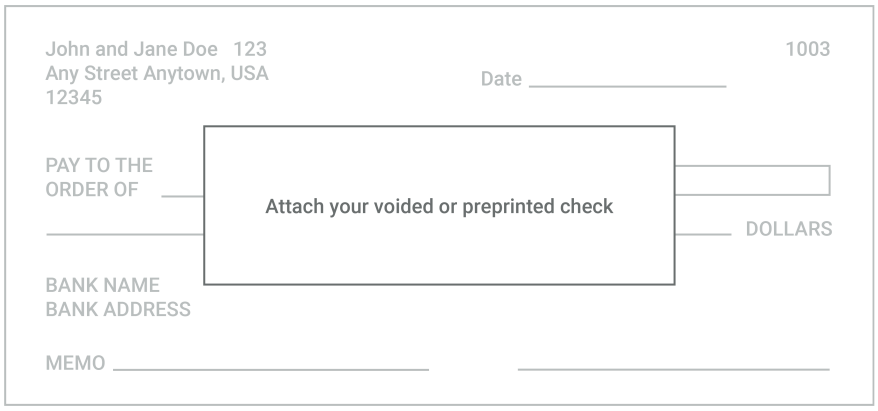
○ ACH instructions already established for my IRA ○ Bank Account Information below **

Wire transfer my One Time Distribution (not available for Automatic Distributions) to my bank based on the:
NOTE: Wire transfers are not available for Systematic Withdrawals.

○ Wire instructions already established for my IRA ○ Bank Account Information below **

I authorize the Custodian to withdraw money from my mutual fund account and deposit to my bank account. I understand this privilege will be effective after the verification process.
Please attach a voided check for your bank account. We are unable to update or add a new bank account unless we receive a voided check for bank verification.

Account Type: ○ Checking ○ Savings



Enter your checking or savings account information:

Bank Name

Bank's Phone Number

Bank Address

ABA Routing Number

City

State

Zip Code

Name(s) on Bank Account

Bank Account Number

8. ACKNOWLEDGEMENT AND MEDALLION SIGNATURE GUARANTEE

By signing this *IRA Distribution Request Form*, I certify that the information I have provided is true and correct, and I authorize the Trustee/Custodian to distribute my IRA as instructed above. I understand that I am responsible for ensuring I am eligible to authorize this distribution, and I assume all responsibility for any consequences as a result of my actions. I will indemnify and hold the Trustee/Custodian harmless from any consequences related to executing my instructions, including payments made in error. I have been advised to seek competent legal and tax advice, and have not been provided any such advice from the Trustee/Custodian. I also understand that if this distribution involves a SIMPLE IRA, special rules apply, and I assume responsibility for my actions regarding those issues.

Signature of IRA Owner (or other authorized person):

Account Owner Signature

Date

Note: Please sign your name exactly how it appears in the registration.
A Medallion Signature Guarantee Stamp is designed to protect the account from fraud.

A Medallion Signature Guarantee can be obtained from a bank, broker-dealer, credit union, national securities exchange, savings association or other financial intermediaries that are members of an Approved Medallion Guarantee Program. The stamp must also contain the letter prefix (A, B, C, D, E, F, X, Y or Z) that identifies the grantor's maximum surety amount, and that bond must cover the amount of the requested transaction. Please note that a Notary Public stamp is not acceptable.

Medallion Signature Guarantee Stamp

9. MAILING INSTRUCTIONS

Please send completed form to:

Regular Delivery
New Alternatives Fund
c/o Ultimus Fund Solutions, LLC
P.O Box 46707
Cincinnati, OH 45246

Overnight Delivery
New Alternatives Fund
c/o Ultimus Fund Solutions, LLC
225 Pictoria Dr, Suite 450
Cincinnati, OH 45246

Fax
1-877-513-0756

State Withholding Information for Retirement Accounts

This State Withholding Information table provides withholding requirements for distributions from retirement accounts. The type of distribution, your withholding election (if provided) and your state of tax residency, which is derived from your address of record, determines state withholding requirements. State withholding regulations are subject to interpretation and constant change therefore the information provided below may differ from the state withholding that is applied to your retirement account distributions. Be advised that this information is not to be construed as tax advice therefore we recommend that you contact your tax advisor regarding a state withholding election specific to your state and personal tax situation. State withholding on Roth IRAs is voluntary.

State of Residence	**State Withholding Information**
AK, FL, HI NV, NH, SD, TN, TX, WA, WY	State withholding is not available.
AL, AZ, CO, GA, ID, IL, IN, KY, LA, MS, MO, MT, NJ, NM, NY, ND, OH, PA, RI, SC, UT, VA, WV, WI	State withholding is voluntary and applied only if you instruct us to withhold. Note the following state-specific minimums. • NY, WI: $5 of the distribution amount *(NY: whole dollars only)* • IN, MO, MT, NJ, NM: $10 of the distribution amount *(IN, MT: whole dollars only)* • UT: 5% of the distribution amount
AR, CA, CT, DC, DE, IA, KS, ME, MA, MI, MN, NC, OK, OR, VT *You may opt-out of the state withholding requirement for these states by requesting no withholding apply to your distribution.*	State withholding is applied when federal withholding is required. Note the following state-specific minimums. • AR: 3% of the distribution amount • CA: 10% of the federal withholding amount *($10 or greater)* • CT: 6.99% of the distribution amount • DC: 10.75% of the distribution amount *(mandatory withholding only applies to lump-sum distributions)* • DE, IA, KS, ME, MA: 5% of the distribution amount • MI: 4.25% of the distribution amount • MN: 6.25% of the distribution amount • NC: 4% of the distribution amount *(whole dollars only)* • OK: 4.75% of the distribution amount • OR: 8% of the distribution amount *($10 or greater)* • VT: 30% of the federal withholding amount
MD	State withholding required only on distributions eligible for rollover. For other distributions, state withholding is voluntary. Note the following state-specific minimum. • MD: 7.75% of the distribution amount
NE	State withholding required only on “normal” distributions eligible for rollover. For other distributions, state withholding is voluntary. Note the following state-specific minimum. • NE: 5% of the distribution amount

Form **W-4R**

Department of the Treasury
Internal Revenue Service

Withholding Certificate for Nonperiodic Payments and Eligible Rollover Distributions

Give Form W-4R to the payer of your retirement payments.

OMB No. 1545-0074

2025

1a First name and middle initial	Last name	1b Social security number

Address

City or town, state, and ZIP code

Your withholding rate is determined by the type of payment you will receive.

- For nonperiodic payments, the default withholding rate is 10%. You can choose to have a different rate by entering a rate between 0% and 100% on line 2. Generally, you can't choose less than 10% for payments to be delivered outside the United States and its territories.
- For an eligible rollover distribution, the default withholding rate is 20%. You can choose a rate greater than 20% by entering the rate on line 2. You may not choose a rate less than 20%.

See page 2 for more information.

2	Complete this line if you would like a rate of withholding that is different from the default withholding rate. See the instructions on page 2 and the Marginal Rate Tables below for additional information. Enter the rate as a whole number (no decimals)	2	%

Sign Here

Your signature (This form is not valid unless you sign it.) **Date**

General Instructions

Section references are to the Internal Revenue Code.

Future developments. For the latest information about any future developments related to Form W-4R, such as legislation enacted after it was published, go to *www.irs.gov/FormW4R*.

Purpose of form. Complete Form W-4R so payers withhold the correct amount of federal income tax from your nonperiodic payment or eligible rollover distribution from an employer retirement plan, annuity (including a commercial annuity), or individual retirement arrangement (IRA). See page 2 for the rules and options that are available for each type of payment. Don't use this form for periodic payments (payments made in installments at regular intervals over a period of more than 1 year) from these plans or arrangements. Instead, use Form W-4P, Withholding Certificate for Periodic Pension or Annuity Payments. For more information on withholding, see Pub. 505, Tax Withholding and Estimated Tax.

Caution. If you have too little tax withheld, you will generally owe tax when you file your tax return and may owe a penalty unless you make timely payments of estimated tax. If too much tax is withheld, you will generally be due a refund when you file your tax return. Your withholding choice (or an election not to have withholding on a nonperiodic payment) will generally apply to any future payment from the same plan or IRA. Submit a new Form W-4R if you want to change your election.

2025 Marginal Rate Tables

You may use these tables to help you select the appropriate withholding rate for this payment or distribution. Add your income from all sources and use the column that matches your filing status to find the corresponding rate of withholding. See page 2 for more information on how to use this table.

Single or Married filing separately		Married filing jointly or Qualifying surviving spouse		Head of household	
Total income over—	**Tax rate for every dollar more**	*Total income over—*	**Tax rate for every dollar more**	*Total income over—*	**Tax rate for every dollar more**
$0	**0%**	$0	**0%**	$0	**0%**
15,000	**10%**	30,000	**10%**	22,500	**10%**
26,925	**12%**	53,850	**12%**	39,500	**12%**
63,475	**22%**	126,950	**22%**	87,350	**22%**
118,350	**24%**	236,700	**24%**	125,850	**24%**
212,300	**32%**	424,600	**32%**	219,800	**32%**
265,525	**35%**	531,050	**35%**	273,000	**35%**
641,350*	**37%**	781,600	**37%**	648,850	**37%**

*If married filing separately, use $390,800 instead for this 37% rate.

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General Instructions *(continued)*

Nonperiodic payments—10% withholding. Your payer must withhold at a default 10% rate from the taxable amount of nonperiodic payments **unless** you enter a different rate on line 2. Distributions from an IRA that are payable on demand are treated as nonperiodic payments. Note that the default rate of withholding may not be appropriate for your tax situation. You may choose to have no federal income tax withheld by entering "-0-" on line 2. See the specific instructions below for more information. Generally, you are not permitted to elect to have federal income tax withheld at a rate of less than 10% (including "-0-") on any payments to be delivered outside the United States and its territories.

Note: If you don't give Form W-4R to your payer, you don't provide an SSN, or the IRS notifies the payer that you gave an incorrect SSN, then the payer must withhold 10% of the payment for federal income tax and can't honor requests to have a lower (or no) amount withheld. Generally, for payments that began before 2025, your current withholding election (or your default rate) remains in effect unless you submit a Form W-4R.

Eligible rollover distributions—20% withholding. Distributions you receive from qualified retirement plans (for example, 401(k) plans and section 457(b) plans maintained by a governmental employer) or tax-sheltered annuities that are eligible to be rolled over to an IRA or qualified plan are subject to a 20% default rate of withholding on the taxable amount of the distribution. You can't choose withholding at a rate of less than 20% (including "-0-"). Note that the default rate of withholding may be too low for your tax situation. You may choose to enter a rate higher than 20% on line 2. Don't give Form W-4R to your payer unless you want more than 20% withheld.

Note that the following payments are not eligible rollover distributions for purposes of these withholding rules:

- Qualifying "hardship" distributions;
- Distributions required by federal law, such as required minimum distributions;
- Distributions from a pension linked emergency savings account;
- Eligible distributions to a domestic abuse victim;
- Qualified disaster recovery distributions;
- Qualified birth or adoption distributions; and
- Emergency personal expense distributions.

See Pub. 505 for details. Also *Nonperiodic payments—10% withholding*.

Payments to nonresident aliens and foreign estates. Do not use Form W-4R. See Pub. 515, Withholding of Tax on Nonresident Aliens and Foreign Entities, and Pub. 519, U.S. Tax Guide for Aliens, for more information.

Tax relief for victims of terrorist attacks. If your disability payments for injuries incurred as a direct result of a terrorist attack are not taxable, enter "-0-" on line 2. See Pub. 3920, Tax Relief for Victims of Terrorist Attacks, for more details.

Specific Instructions

Line 1b

For an estate, enter the estate's employer identification number (EIN) in the area reserved for "Social security number."

Line 2

More withholding. If you want more than the default rate withheld from your payment, you may enter a higher rate on line 2.

Less withholding (nonperiodic payments only). If permitted, you may enter a lower rate on line 2 (including "-0-") if you want less than the 10% default rate withheld from your payment. If you have already paid, or plan to pay, your tax on this payment through other withholding or estimated tax payments, you may want to enter "-0-".

Suggestion for determining withholding. Consider using the Marginal Rate Tables on page 1 to help you select the appropriate withholding rate for this payment or distribution. The tables are most accurate if the appropriate amount of tax on all other sources of income, deductions, and credits has been paid through other withholding or estimated tax payments. If the appropriate amount of tax on these sources of income has not been paid through other withholding or estimated tax payments, you can pay part through withholding on this payment by entering a rate that is greater than the rate in the Marginal Rate Tables.

The marginal tax rate is the rate of tax on each additional dollar of income you receive above a particular amount of income. You can use your filing status as a guide to find the rate of withholding for amounts above the total income level in the tables.

To determine the appropriate rate of withholding from the tables, do the following. Step 1: Find the rate that corresponds with your total income not including the payment. Step 2: Add your total income and the taxable amount of the payment and find the corresponding rate.

If these two rates are the same, enter that rate on line 2. (See *Example 1* below.)

If the two rates differ, multiply (a) the amount in the lower rate bracket by the rate for that bracket, and (b) the amount in the higher rate bracket by the rate for that bracket. Add these two numbers; this is the expected tax for this payment. To get the rate to have withheld, divide this amount by the taxable amount of the payment. Round up to the next whole number and enter that rate on line 2. (See *Example 2* below.)

If you prefer a simpler approach (but one that may lead to overwithholding), find the rate that corresponds to your total income including the payment and enter that rate on line 2.

Examples. Assume the following facts for *Examples 1* and *2*. Your filing status is single. You expect the taxable amount of your payment to be $20,000. Appropriate amounts have been withheld for all other sources of income and any deductions or credits.

Example 1. You expect your total income to be $65,000 without the payment. Step 1: Because your total income without the payment, $65,000, is greater than $63,475 but less than $118,350, the corresponding rate is 22%. Step 2: Because your total income with the payment, $85,000, is greater than $63,475 but less than $118,350, the corresponding rate is 22%. Because these two rates are the same, enter "22" on line 2.

Example 2. You expect your total income to be $61,000 without the payment. Step 1: Because your total income without the payment, $61,000, is greater than $26,925 but less than $63,475, the corresponding rate is 12%. Step 2: Because your total income with the payment, $81,000, is

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greater than $63,475 but less than $118,350, the corresponding rate is 22%. The two rates differ. $2,475 of the $20,000 payment is in the lower bracket ($63,475 less your total income of $61,000 without the payment), and $17,525 is in the higher bracket ($20,000 less the $2,475 that is in the lower bracket). Multiply $2,475 by 12% to get $297. Multiply $17,525 by 22% to get $3,856. The sum of these two amounts is $4,153. This is the estimated tax on your payment. This amount corresponds to 21% of the $20,000 payment ($4,153 divided by $20,000). Enter "21" on line 2.

Privacy Act and Paperwork Reduction Act Notice. We ask for the information on this form to carry out the Internal Revenue laws of the United States. You are required to provide this information only if you want to (a) request additional federal income tax withholding from your nonperiodic payment(s) or eligible rollover distribution(s); (b) choose not to have federal income tax withheld from your nonperiodic payment(s), when permitted; or (c) change a previous Form W-4R (or a previous Form W-4P that you completed with respect to your nonperiodic payments or eligible rollover distributions). To do any of the aforementioned, you are required by sections 3405(e) and 6109 and their regulations to provide the information requested on this form. Failure to provide this information may result in inaccurate withholding on your payment(s). Failure to provide a properly completed form will result in your payment(s) being subject to the default rate; providing fraudulent information may subject you to penalties.

Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation, and to cities, states, the District of Columbia, and U.S. commonwealths and territories for use in administering their tax laws. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

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