New Alternatives Fund

Non-Qualified Transfer of Assets Form

Please complete this form only if you are transferring assets directly to a new or existing non-qualified (non-IRA) account with New Alternatives Fund (the "Fund"). Please complete a separate form for each account you wish to transfer. Transfers may take 3 to 5 weeks to complete after your paperwork is received in good order.

For Additional Copies or Assistance

If you need additional copies of this application, or would like assistance completing it, please call the New Alternatives Fund at **800-441-6580** or go to www.newalternativesfund.com.

Instructions

1. If you are establishing a new account, please contact **800-441-6580** or go to www.newalternativesfund.com about additional information that must be submitted with this Form.
2. Mail this Transfer Form to:
   New Alternatives Fund
   PO Box 46707
   Cincinnati, OH 45246

   Overnight Delivery:
   New Alternatives Fund
   225 Pictoria Dr, Suite 450
   Cincinnati, OH 45246
3. Retain a copy for your records.

1. ACCOUNT REGISTRATION

Please provide your primary legal address, in addition to any mailing address (if different).

Owner's Name (First, Middle, Last)

Street Address

Date of Birth

City, State, Zip

Cell Phone Number

Email Address

Alternate Telephone

○ This is a new account. I have completed and enclosed an Application with this transfer form.

○ This is an existing account. Please transfer proceeds to my account number:

2. INFORMATION ABOUT YOUR EXISTING ACCOUNT

Name of Firm Currently Holding Your Account

Account Name

Street Address

Account Number

City, State, Zip

Firm Telephone Number

Please attach a copy of the most recent statement for this account.

3. TRANSFER INFORMATION

Please transfer assets from the above account to New Alternatives Fund. Transfer should be according to the following instructions (Note: If transferring from more than one fund within an account, please include details on a separate sheet of paper):

This transfer is a: (check one)

- ○ Complete Transfer. Please liquidate all assets in my account.
- ○ Partial Transfer:

  Liquidate $ _____ from my account.
- ○ Transfer in kind. Please transfer:
  - ○ Full Transfer. Please transfer all assets in my account.
  - ○ Partial Transfer of my account.

    _____ shares of _____

    (Fund Name)

The type of account I am transferring from is a: (check one)

- ○ Individual
- ○ Joint Tenant
- ○ Transfer on Death
- ○ Trust
- ○ Other

The type of account I am transferring to is a: (check one)

- ○ Individual
- ○ Joint Tenant
- ○ Transfer on Death
- ○ Trust
- ○ Other

4. CERTIFICATIONS AND SIGNATURES

I hereby authorize this liquidation and/or transfer in kind from my current financial institution to the account designated on this form. By signing below, I certify the information set forth herein is accurate and I have received and read a prospectus for the funds in which I am making my investment. To the extent that I have requested a redemption of mutual fund shares in connection with my transfer, I understand that such shares will be redeemed at the net asset value next determined after my transfer request is reviewed and determined to be in good order by the delivering firm. **The Internal Revenue Service does not require your consent to any provision of this document other than the certification required to avoid backup withholding.**

Medallion Signature Guarantee* (if required):

Some Firms require a Medallion Signature Guarantee to transfer assets. Please check with your current firm to see if they require a Medallion Signature Guarantee. Failure to obtain a required signature guarantee may result in a delay in the transfer of assets.

Account Owner's Signature _____ Date _____

Joint Owner's Signature (if applicable) _____ Date _____

* A signature guarantee can be obtained from a bank, broker-dealer, a credit union, a national securities exchange, savings association or other financial intermediaries that are members of an Approved Medallion Guarantee Program. A signature by a Notary Public is not acceptable as a signature guarantee.

5. TRANSFER INSTRUCTIONS

Make check payable to:

New Alternatives Fund

FBO:	
Account Number:	

Mail this Transfer Form to:

New Alternatives Fund
PO Box 46707
Cincinnati, OH 45246

or

Via Overnight Delivery
225 Pictoria Dr, Suite 450
Cincinnati, OH 45246