

# NEW ALTERNATIVES FUND

## Cost Basis Election Form

New Alternatives Fund, and our Transfer Agent, BNY Mellon Investment Servicing (US) Inc., will be tracking and reporting to the IRS and shareholders the realized gains and losses on covered shares of New Alternatives Fund in taxable accounts. In general, covered shares are those acquired on or after January 1, 2012. Please complete this form to elect or change your cost basis method(s). Please note that this election covers both covered and uncovered shares. **If we do not receive an election in good order, the default method of First In, First Out will be applied to your account.**

New Alternatives Fund does not provide tax advice and is not responsible for the elections. We **strongly** recommend that you consult with your Tax Advisor and/or Financial Professional before making important tax elections for your account(s). For more information on choosing a cost basis, please visit our FAQs at [www.newalternativesfund.com](http://www.newalternativesfund.com) and the IRS website at [www.irs.gov](http://www.irs.gov).

### 1. Account Information

Account Owner / Entity Name:	Telephone Number
Social Security / Tax Identification number:	
New Alternatives Fund Account Number(s):	
First Election (Check Box) <input type="checkbox"/>	Change of Prior Election (Check Box) <input type="checkbox"/>
	This is a permanent change of election <input type="checkbox"/>
	This election is for this sale only <input type="checkbox"/>

### 2. Cost Basis Method Election

For my account(s) listed above, I elect the following:

- FI** – First In, First Out (Fund’s default methodology)
- AC** – Average Cost
- SL** – Specific Lot Identification

### 3. Signatures

By signing below, I certify that I am authorized to make this tax election for the accounts identified above. When signing as executor, administrator, attorney, trustee, guardian or as the custodian for a minor, please give full title as such. For a Corporation, Partnership, or LLC, this form must be signed by a corporate officer or other authorized party.

Signature #1:	Date:
Print Name:	
Signature #2 (if applicable):	Date:
Print Name:	

Return Form to: Fax: 508 599 1863 or Mail to: New Alternatives Fund, Inc. c/o BNY Mellon Investment Servicing (US) Inc., PO Box 9794, Providence, RI 02940