

Account Ownership Change (NON-IRA)



Please use this form to make the following ownership changes to your non-IRA Ariel Investments account(s):

- From an Individual Account to a Joint Tenant Account
- From a Joint Tenant Account to an Individual Account because of the death of an account owner, divorce or other situation
- From an Individual or Joint Tenant Account to a Trust
- From an UGMA/UTMA Account to an Individual Account due to the minor reaching the age of majority
- UGMA/UTMA change of custodian

Once completed, mail this form to Ariel Investment Trust, c/o U.S. Bank Global Fund Services, P.O. Box 701, Milwaukee, WI 53201-0701. For overnight delivery, send to Ariel Investment Trust, c/o U.S. Bank Global Fund Services, 615 East Michigan Street, Floor 3, Milwaukee, WI 53202-5207. If you have any questions or need assistance filling out this form, please call us at 800.292.7435.

If as a result of this change of ownership you would like to update the banking instructions associated with your account, please attach a voided check or deposit slip to this form. (Note: checks must be preprinted with your name and address. If none of the names on your voided check can be found on your new account registration, please complete Section 4. We cannot accept starter checks.)

Please print all items except signature(s).			
CURRENT ACCOUNT REGISTRATION	ON		
Please provide the information exactly as	it currently appears on your Ariel In	vestments account(s).	
Account Owner / Minor / Trust			
If applicable: Joint Account Owner / Adult C	ustodian / Trustee(s)		
Account Number(s)			
Mailing Address	City	State	Zip
NEW ACCOUNT REGISTRATION			
Please complete only one section — A, E	B. C. D or E.		
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CHANGE FROM INDIVIDUAL ACC	COUNT TO JOINT ACCOUNT		
Note: All joint registrations will be regist	ered as joint Tenants with Right of Su	rvivorship unless otherwise specified.	
Name of Joint Account Owner			
Social Security Number	Date of Birth		
Mailing Address	City	State	Zip
Please select one: ☐ U.S. Citizen ☐ Re:	sident Alien (must attach a copy of Alien ID,	Green Card or Passport)	
The current Account Owner and new Joint Account Guarantee in Section 4.	ount Owner must provide signatures in Secti	on 3. The current Account Owner is required	to obtain a signature
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CHANGE FROM JOINT TENANT A	CCOUNT TO INDIVIDUAL ACC	JOUNT	
Name of Individual Remaining on Account		Social Security Number of Remaining Ov	wner of Account
Name of Individual to Remove from Accour	nt	Social Security Number to Remove from	Account
		*	

If this change is being made because one of the Account Owners is deceased, the living Account Owner must provide a certified copy of the death certificate. If required by law within your state of residency, you must also submit an inheritance tax waiver.

If this change is being made for reasons other than death of one of the Account Owners, all Account Owners must provide signatures in Section 3 and have their signatures guaranteed in Section 4.

CHANGE FROM INDIVIDUAL/JOINT TENANT ACCOUNT TO A TRUST ACCOUNT A copy of the Trust Agreement must be attached. Name of Trust Social Security Number or Tax Identification Number Date of Trust Agreement Trustee's First Name Middle Initial Last Name Social Security Number Date of Birth Please select one: ☐ U.S. Citizen ☐ Resident Alien (must attach a copy of Alien ID, Green Card or Passport) Co-Trustee's First Name Middle Initial Last Name Social Security Number Date of Birth Please select one: ☐ U.S. Citizen ☐ Resident Alien (must attach a copy of Alien ID, Green Card or Passport) The current Account Owner(s) must sign in Section 3. If the current Account Owner(s) are the Sole Trustee(s) of the trust and the Social Security Number/ Taxpayer Identification Number is not changing, then the current Account Owner(s)' signatures do not require a signature guarantee. Otherwise, all current Account Owner(s)' signatures must be signature guaranteed in Section 4. New Trustee(s) must sign in Section 3. CHANGE FROM UGMA/UTMA ACCOUNT TO INDIVIDUAL ACCOUNT (MINOR HAS REACHED AGE OF MAJORITY) Name of Minor Social Security Number Name of Custodian Instructions to the Custodian. • Provide your signature in Section 3 and obtain a signature guarantee in Section 4. Instructions to the Former Minor: • Please provide your signature in Section 3. CHANGE OF UGMA/UTMA ACCOUNT CUSTODIAN The current Custodian must provide a signature in Section 3 and obtain a signature guarantee in Section 4. The new Custodian must provide a signature in Section 3. Name of New Custodian Social Security Number Date of Birth Please select one: ☐ U.S. Citizen ☐ Resident Alien (must attach a copy of Alien ID, Green Card or Passport) Please complete the below if you would like to change the address and/or telephone numbers of the account: Mailing Address State Zip **Email Address** Evening Phone Daytime Phone

3 SIGNATURE(S) AND OTHER REQUIRED INFORMATION

Important: Please read before signing.

- (a) By execution of this application, the account owner represents and warrants that (i) he has the full right, power and authority to make the investment applied for and (ii) he is a natural person of legal age in his state of residence. The account owner certifies that the Social Security or Taxpayer Identification Number and tax status set forth in the application is correct. The person or persons, if any, signing on behalf of the account owner represent and warrant that they are duly authorized to sign this application and purchase or redeem shares of the Fund on behalf of the account owner. Each person named in the registration must sign below.
- (b) I have read the applicable prospectus(es) and this application and agree to all their terms. If I am purchasing shares of the State Street Institutional U.S. Government Money Market Fund, I understand I will receive the prospectus with the confirmation of my purchase. I also agree that any shares purchased now or later are and will be subject to the terms of the Fund's prospectus as in effect from time to time. I hereby consent to the delivery of one copy of prospectuses, financial reports and other regulatory materials to all investors who share my same address. I understand that if I want to receive individual copies of materials, I can call 800.292.7435.
- (c) I acknowledge that Ariel is required by law to obtain and verify certain information. The account may not be opened if I do not provide this information. I further acknowledge that Ariel reserves the right to close my account, or take other reasonable steps, if it is unable to verify the accuracy of the information provided.
- (d) I acknowledge that this account is not being established for a foreign financial institution to receive deposits from, or to make payments or other disbursements on behalf of, the foreign financial institution, or to handle other financial transactions related to such foreign financial institution. Foreign financial institutions include: (1) a foreign bank; (2) a foreign branch of a U.S. bank; (3) a business organized under a foreign law that, if it were located in the United States, would be a securities broker/dealer, futures commission merchant, introducing broker in commodities, or a mutual fund; and (4) a money transmitter or currency exchanger organized under foreign law.
- (e) I acknowledge under certain circumstances, if no activity occurs in an account within a time period specified by state law, my shares in the Fund(s) may be transferred to that state.
- (f) Under penalty of perjury, I certify that:
 - (I) The Social Security or taxpayer identification number shown on this form is my correct taxpayer identification number, and
 - (2) I am not subject to backup withholding as a result of either being exempt from backup withholding, not being notified by the IRS of a failure to report all interest or dividends, or the IRS has notified me that I am no longer subject to backup withholding, and
 - (3) I am a U.S. person (including a U.S. resident alien), and
 - (4) I am exempt from FATCA reporting.

(Cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding due to a failure to report all interest and dividends.)

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Please sign exactly as name(s) appear on the current account registration.				
X				
X Signature (PRINT FORM AND SIGN)	Title, if applicable	Date		
Check one: ☐ Account Owner ☐ Trustee ☐	Custodian Authorized Signer	□ Other		
X Signature, if applicable (PRINT FORM AND SIGN)				
Signature, if applicable (PRINT FORM AND SIGN)	Title, if applicable	Date		
Check one: ☐ Joint Account Owner ☐ Trustee	☐ Authorized Signer ☐ Other			
If Section 2C was completed, the new Trustee(s) m the New Custodian must sign below.	nust sign below. If Section 2D was com	npleted, the new Joint Account Owner must sign below. npleted, the Former Minor must sign below. If Section 2E was completed,		
X Signature (PRINT FORM AND SIGN)	Title, if applicable	Date		
Check one: ☐ New Joint Account Owner ☐ New Joint Account ☐ New Joint Account Owner ☐ New Joint Account ☐ New Joint Account Owner ☐ New Joint Account ☐ New Joint Account Owner ☐ New Joint Account Owner ☐ New Joint Owner ☐ New Joint Account ☐ New Joint Account ☐ New Joint Accoun	ew Trustee	☐ Former Minor		
X Signature of Additional Trustee, if applicable (PRINT				
Signature of Additional Trustee, if applicable (PRINT	FORM AND SIGN) Title, if applica	ble Date		
SIGNATURE GUARANTEE				
,		al securities exchange, savings and loan associations, credit Notary Public stamp or seal will not be accepted.		
		Place Signature Guarantee Stamp Here		
Name of Institution Providing Signature Guarantee				
X Officer Signature (PRINT FORM AND SIGN)				
Officer Signature (PRINT FORM AND SIGN)	Date			