



Coverdell Education Savings Account Transfer Form

Regular Mail:

Ariel Investment Trust
U.S. Bank Global Fund Services
PO Box 701
Milwaukee, WI 53201-0701

Overnight Delivery:

Ariel Investment Trust
U.S. Bank Global Fund Services
615 E. Michigan St., FL3
Milwaukee, WI 53202-5207

For additional information please call toll-free 800-292-7435 or visit us on the web at arielinvestments.com.

There may be penalties for withdrawing certain investments before their maturity (i.e., certificates of deposit or annuities). Please contact your current custodian or plan administrator prior to submitting this form to determine the applicable time frames and penalties, if any, or if you need a signature guarantee in the Signature section and to order this transfer. U.S. Bank Global Fund Services will initiate your request upon receipt of this form.

1 Name, Address and Consent of Person Who Controls the Current Account

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="XXX-XX-"/>
PARENT/GUARDIAN FIRST NAME	M.I.	LAST NAME	SOCIAL SECURITY NUMBER (LAST FOUR DIGITS)
<input type="text"/>	<input type="text"/>		<input type="text"/>
DATE OF BIRTH (MM/DD/YYYY)	STREET ADDRESS		CITY / STATE / ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/>	
EMAIL ADDRESS	DAYTIME PHONE NUMBER		EVENING PHONE NUMBER

- Mother
- Father
- Guardian - if selected, please submit proof of guardianship

2 Name of Student (For whom the education savings account is benefiting)

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="XXX-XX-"/>
FIRST NAME OF STUDENT	M.I.	LAST NAME	SOCIAL SECURITY NUMBER (LAST FOUR DIGITS)
<input type="text"/>	<input type="text"/>		<input type="text"/>
DATE OF BIRTH (MM/DD/YYYY)	STREET ADDRESS		CITY / STATE / ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/>	
EMAIL ADDRESS	DAYTIME PHONE NUMBER		EVENING PHONE NUMBER

3 Instruction to Current Education Savings Account Custodian or Trustee

Please include a copy of your current account statement.

CURRENT CUSTODIAN OR TRUSTEE		FUND NAME, IF APPLICABLE	
ACCOUNT NUMBER	CONTACT PERSON	PHONE NUMBER	
STREET ADDRESS		CITY / STATE / ZIP	

Consider this your authorization to redeem my investment and transfer my Coverdell Education Savings Account as directed below:

All Assets OR \$ or %

Please process this request:*

Immediately OR At Maturity (month / day / year)

* If no option is selected, please transfer all assets immediately.

Instructions for Delivery - indicate how you want your current Custodian/Trustee to deliver the assets to U.S. Bank Global Fund Services.

Wire - Funds available immediately upon receipt, your Custodian/Trustee may charge a fee for this service.

Please wire funds to:
U.S. Bank, N.A.
777 E. Wisconsin Avenue
Milwaukee, WI 53202
ABA No. 075000022
Credit Name: U.S. Bancorp Fund Services, LLC
Account No. 112-952-137
Further Credit: Ariel Investments [Name of Fund and Share Class]
(Shareholder Account Number, Shareholder Name)

Check - Funds may not be available for 12-15 Business days.

First Class Mail Overnight Delivery - Take the fee from my account

Overnight Delivery via Third Party – Charge the fee to my FedEx or UPS account

FedEx UPS Account/Billing Number

Send the check representing the assets payable to “Ariel Investment Trust FBO [Shareholder’s Name]” along with a copy of this form to the address at the top of page one.

4 Processing Instructions and Fund Selection

Processing Instructions - indicate how you want us to initiate your transfer/rollover.

- Standard Processing Service** - No charge, transfer form will be sent via First Class Mail.
- Overnight Delivery** - \$15.00 fee, select one of the options below; if no selection is made we will use First Class Mail.
- We will overnight your transfer form to your previous Custodian/Trustee.
 - Physical address must be provided, cannot overnight to a PO Box.
- Use the attached check made payable to U.S. Bank Global Fund Services
- Charge the \$15.00 fee to my third party billing provided below
- FedEx UPS Account/Billing Number

An Ariel Investment Trust Coverdell Education Savings Account Application must be completed to process this transfer if a new account is being established. The Fund(s) and the allocation(s) specified on the application will be used if they are different from those indicated below.

	NEW	EXISTING	ACCOUNT # (IF APPLICABLE)	AMOUNT		%
<input type="checkbox"/> Ariel Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 150px; height: 25px;" type="text"/>	<input style="width: 150px; height: 25px;" type="text"/>	OR	<input style="width: 40px; height: 25px;" type="text"/>
<input type="checkbox"/> Ariel Appreciation Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 150px; height: 25px;" type="text"/>	<input style="width: 150px; height: 25px;" type="text"/>	OR	<input style="width: 40px; height: 25px;" type="text"/>
<input type="checkbox"/> Ariel Focus Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 150px; height: 25px;" type="text"/>	<input style="width: 150px; height: 25px;" type="text"/>	OR	<input style="width: 40px; height: 25px;" type="text"/>
<input type="checkbox"/> Ariel International Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 150px; height: 25px;" type="text"/>	<input style="width: 150px; height: 25px;" type="text"/>	OR	<input style="width: 40px; height: 25px;" type="text"/>
<input type="checkbox"/> Ariel Global Fund	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 150px; height: 25px;" type="text"/>	<input style="width: 150px; height: 25px;" type="text"/>	OR	<input style="width: 40px; height: 25px;" type="text"/>
<input type="checkbox"/> State Street Institutional U.S. Government Money Market Fund**	<input type="checkbox"/>	<input type="checkbox"/>	<input style="width: 150px; height: 25px;" type="text"/>	<input style="width: 150px; height: 25px;" type="text"/>	OR	<input style="width: 40px; height: 25px;" type="text"/>

The undersigned acknowledges having sole responsibility for the foregoing investment choices and having received a current prospectus for each Fund selected. Please read the prospectus(es) for Ariel Investment Trust selected, including the privacy notice. The undersigned understands that the requirements for a valid transfer between Education Savings Accounts are complex and acknowledges having responsibility for complying with all requirements and for the tax results of any such transfer.

**In order to invest in the State Street Institutional U.S. Government Money Market Fund, an account in one of our Funds must be established prior to, or in conjunction with, opening an account containing the State Street Institutional U.S. Government Money Market Fund. An investment in the State Street Institutional U.S. Government Money Market Fund is not a deposit of any bank and is not insured or guaranteed by the FDIC or any other government agency. If you are purchasing shares of the State Street Institutional U.S. Government Money Market Fund, you will receive the prospectus with the confirmation of your purchase.

5 Signature

I certify that I have established a Coverdell Education Savings Account with Ariel Investment Trust, of which U.S. Bank, N.A., is the Custodian. I agree to contact my present Custodian from whom I am transferring to determine if specific documentation or a signature guarantee is required. I understand that I am responsible for determining my eligibility for all transfers or direct rollovers. I agree to hold the Custodian harmless against any and all situations arising from an ineligible transfer or direct rollover. I acknowledge that the Custodian or its agent cannot provide legal advice and I agree to consult with my own tax professional for advice.

I authorize U.S. Bank Global Fund Services, to act on my behalf in contacting the current custodian or plan administrator to facilitate the transfer of assets.

X

SIGNATURE OF STUDENT / PARENT / GUARDIAN (PLEASE CIRCLE ONE)

DATE (MM/DD/YYYY)

SPECIAL NOTE: If Student is a minor under the law of Student's state of residence, the parent or guardian must execute this Education Savings Account Transfer of Assets Form.

SIGNATURE GUARANTEE (FOR TRANSFERS FROM ANOTHER CUSTODIAN)

IMPORTANT: Please contact your current Custodian to determine if a signature guarantee is required.

If required, a signature guarantee or a signature validation may be obtained from an officer of a bank, savings association, credit union, a member firm of a domestic stock exchange, or the Financial Industry Regulatory Authority, that is an eligible guarantor institution. A notary public from a financial institution is able to provide an acceptable guarantee. The notary public's business card or a signed letter from the notary public on the financial institution's letterhead must accompany the form.

We suggest you contact your financial institution to verify the documentation required to obtain a signature guarantee or notary stamp for your specific situation.

6 Acceptance by New Custodian

U.S. Bank, N.A. agrees to accept transfer of the above amount for deposit to the Student's U.S. Bank, N.A. Coverdell Education Savings Account, and requests the liquidation and transfer of assets as indicated above.

Appointment as Custodian accepted:
U.S. BANK, N.A.



Gregory Farley
Senior Vice President-Mutual Fund Operations