



Change of Address Form

Regular Mail:
Ariel Investment Trust
c/o U.S. Bank Global Fund Services
PO Box 219227
Kansas City, MO 64121-9227

Overnight Delivery:
Ariel Investment Trust
c/o U.S. Bank Global Fund Services
801 Pennsylvania Ave., Suite 219227
Kansas City, MO 64105-1307

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

By completing this form you authorize U.S. Bank Global Fund Services to amend our records to update your address to current. Please complete all appropriate sections, including the name of the fund(s) you own. **Sign and return the form to one of the addresses above.** If you have any questions, please call toll-free 800-292-7435.

1 Investor Information

	XXX-XX-	
NAME OF TAXABLE OWNER / TRUST / CORPORATION / ENTITY	SOCIAL SECURITY / TAX ID NUMBER	PHONE NUMBER

STREET ADDRESS	CITY / STATE / ZIP

	XXX-XX-	
NAME OF JOINT OWNER / TRUSTEE / CUSTODIAN / AUTHORIZED SIGNER	SOCIAL SECURITY / TAX ID NUMBER	PHONE NUMBER

STREET ADDRESS	CITY / STATE / ZIP

Please indicate account(s) that require change:

FUND NAME	FUND NUMBER	ACCOUNT NUMBER

FUND NAME	FUND NUMBER	ACCOUNT NUMBER

FUND NAME	FUND NUMBER	ACCOUNT NUMBER

2 Old Address

STREET ADDRESS

CITY / STATE / ZIP CODE

3 New Address

Note: The USA PATRIOT Act requires us to obtain your street address. Please complete this section with your Permanent Street Address (PO Box is not acceptable). If you wish to use a PO Box or other address as your mailing address, complete this section and the Mailing Address section.

STREET ADDRESS

CITY / STATE / ZIP CODE

DAYTIME TELEPHONE NUMBER

EVENING TELEPHONE NUMBER

E-MAIL ADDRESS

4 Mailing Address

Complete only if different than your Permanent Address (in the New Address section). If you complete this section, all mailings (including checks, if any) will be sent to the address you provide.

STREET ADDRESS OR PO BOX

CITY / STATE / ZIP CODE

DAYTIME TELEPHONE NUMBER

EVENING TELEPHONE NUMBER

5 Signature & Certification

All registered owners must sign.

I/We authorize this change of address for the account(s) listed in the Investor Information section. I/We have read and understood the prospectus restrictions on accounts with a recently changed address.

PRINTED NAME OF OWNER / TRUSTEE / CUSTODIAN / AUTHORIZED SIGNER

SIGNATURE OF OWNER / TRUSTEE / CUSTODIAN / AUTHORIZED SIGNER

DATE (MM/DD/YYYY)

PRINTED NAME OF OWNER / TRUSTEE / CUSTODIAN / AUTHORIZED SIGNER

SIGNATURE OF JOINT OWNER / CO-TRUSTEE / AUTHORIZED SIGNER

DATE (MM/DD/YYYY)