

Non-IRA Redemption Form

Use this form to redeem shares from your Artisan Partners Funds non-IRA account. **Do not use this form to request a distribution from any type of Artisan** Partners Funds IRA account. Instead, please use the IRA Distribution Request Form available at www.artisanpartners.com/individual-investors/resources/applications-forms.html.

Please complete this entire Non-IRA Redemption Form, sign it, and mail it along with any applicable additional documentation to Artisan Partners Funds. Failure to complete all required sections will result in processing delays. Please retain a copy of the completed form for your records.

We encourage you to consult with your legal counsel and tax advisor in completing this form regarding the tax consequences and tax requirements of your fund redemptions.

For Regular Mail Delivery

Artisan Partners Funds P.O. Box 219322 Kansas City, MO 64121-9322 For Overnight Delivery

Artisan Partners Funds 430 W. 7th Street, Suite 219322 Kansas City, MO 64105-1407

Questions? Call 800.344.1770 or visit www.artisanpartners.com

1. Account Registration (Please type or print clearly)

Owner, Trust or Other Entity's Name (First, Middle, Last)	Social Security Number / Tax Identification Number	
oint Owner, Trustee or Other Entity's Name (First, Middle, Last)	Social Security Number / Tax Identification Number	
Mailing Address or P.O. Box		
	State	Zip

2. Amount of Distribution

Please specify the accounts from which yo	u want to withdraw.		
Fund Name	Account Number	Amount (\$) or Shares	
Fund Name	Account Number	Amount (\$) or Shares	
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Fund Name	Account Number	Amount (\$) or Shares	
Your shares will be redeemed at the next Net Asset Value (NAV) calculated after your request has been received and accepted.			

3. Payment Instructions Indicate how you wish to receive your redemption. Please check only one option. If no option is selected, a check will be sent to your address of record. ☐ Name & Address of Record: Choose this if you would like your check issued to the name and address in which the account is registered. ☐ Federal Wire: Complete Section 4 if selected. A Medallion Signature Guarantee may be required. See Section 6. Automated Clearing House (ACH): Complete Section 4 if selected. A Medallion Signature Guarantee may be required. See Section 6. Payment by ACH usually will arrive at your bank two banking days after your redemption is processed. ☐ Special Name or Address: Choose this if you would like your check issued to a name and/or address other than the name and address of record. Indicate name and address below. Medallion Signature Guarantee required. See Section 6. Name (First, Middle, Last) Mailing Address or P.O. Box City State 4. Bank Instructions If you choose to use Federal Wire or Automated Clearing House (ACH) for your redemption, please provide the appropriate US bank information or attach a voided check. Depending on size or recipient of transaction, a Medallion Signature Guarantee may be required, see below. Name of Bank or Federal Credit Union Name(s) on Bank Account Bank Account Number Bank Routing Number Address of Bank City State 7ip Attach Blank, Voided Check or Deposit Slip 5. Cost Basis The cost basis method that is currently on your account will be utilized to deplete the shares for this transaction unless you provide specific share lots below or choose another cost basis method. Should you wish to change your cost basis election, you can do so by completing a new Shareholder Options Form or contacting a Shareholder Services representative for instructions at 800.344.1770. Date of Purchase (MM-DD-YYYY) Number of Shares Number of Shares Date of Purchase (MM-DD-YYYY) Date of Purchase (MM-DD-YYYY) Number of Shares

If you have shares transferred that were purchased prior to January 1, 2012 (uncovered shares), we may be able to provide you an average cost for these shares upon depletion. This information will be provided to you on your Cost Basis Statement and you may choose to use the information for your taxes.

6. Signature

This section is to be completed by all authorized registered owners of the the account.				
Note: You must provide a STAMP 2000 Medallion Signature Guarantee if:				
5) You have changed your address or bank instruction 6) You are requesting that we change your address at lagree to indemnify and hold Artisan Partners Limited employees, and agents harmless for elections I have a Medallion Signature Guarantee may be obtained from	ess that is different than your address of record. Wire or ACH using bank instructions that were not prons within the past 30 days.	nd any affiliate and/or any of their directors, trustees, mation and instructions I have provided. If needed, a arantor). A Notary Public cannot provide a Medallion		
Owner's Signature (Name as it appears in Section 1)		Date (MM-DD-YYYY)		
Joint Owner's Signature (Name as it appears in Section 1)		Date (MM-DD-YYYY)		
Name of Bank or Firm				
Authorized Signature and Stamp		Date (MM-DD-YYYY)		
	Stamp			