



Use this Account Application to establish a regular account in an Artisan Partners Fund. Do not use this form to establish any type of Artisan IRA or Coverdell Education Savings Account.

Important Information for Opening a New Account

Federal law requires financial institutions to obtain, verify and record identification information on each individual who opens an account to help prevent money laundering and terrorism funding activities. To invest, we require your name, address, date of birth and social security number.

If no activity occurs in your account within the time frame specified by applicable state law, your account may be transferred to the appropriate state. This is called escheatment.

For Regular Mail Delivery

Artisan Partners Funds
P.O. Box 8412
Boston, MA 02266-8412

For Overnight Delivery

Artisan Partners Funds
30 Dan Road
Canton, MA 02021-2809

Questions? Call 800.344.1770 or visit www.artisanpartners.com

1. Account Type (Please type or print clearly)

Individual or Joint

Owner's Name (First, Middle, Last) Social Security Number Date of Birth (MM-DD-YYYY)

Joint Owner's Name (First, Middle, Last) Social Security Number Date of Birth (MM-DD-YYYY)

Joint accounts are registered as "Joint Tenants with Right of Survivorship" unless otherwise specified.

Gift/Transfer to Minor (UGMA/UTMA)

Custodian's Name (First, Middle, Last) Social Security Number Date of Birth (MM-DD-YYYY)

Minor's Name (First, Middle, Last) Social Security Number Date of Birth (MM-DD-YYYY) State of Residence

Trust

Trustee Name (First, Middle, Last)

Trustee Name (First, Middle, Last)

Name of Trust

Social Security Number/ Tax Identification Number Date of Trust Agreement

Please attach a copy of the title and signature pages of the trust agreement.

Corporation or Other Entity (Attach organization documents and evidence of authority to act—certified articles of incorporation/partnership agreement/officer's resolution)

Corporation/Entity Name

Social Security Number/ Tax Identification Number

Indicate New Account Type:

- Financial institution governed by a federal regulator (account is for own behalf or for benefit of its client). Omnibus accounts may only be opened with Artisan Partners Funds approval.
- Bank governed by state bank regulator (account is for own behalf or for the benefit of its client). Omnibus accounts may only be opened with Artisan Partners Funds approval.
- Foundation Endowment Estate (Certified copies of the death certificate and the court appointment file are required).
- C Corporation S Corporation Retirement Plan governed by ERISA
- Partnership Government Entity or Government Plan Other _____

2. Address

Mailing Address

City State Zip
()

Phone Email

Note: If mailing address above is a P.O. Box, a street address is required.

Street Address

City State Zip

Shares of the Funds are registered for sale to US residents only. You must provide a valid US address when opening an account. If a joint owner or minor has a different address, please provide on a separate sheet.

3. Authorized Individuals/Partners

If you are establishing an account as a Trust or Corporation or Other Entity, provide information for the individuals authorized to effect transactions.

Authorized Individual/Trustee/Partner Title Signature

Authorized Individual/Trustee/Partner Title Signature

Note: If there are more than two Authorized Individuals/Trustees/Partners, attach a separate list with full names, titles, and signatures.

4. Investment Selection

Carefully read the Fund's prospectus prior to investing. A separate account will be established for each Fund selected. Funds noted with an asterisk (*) are closed to most new investors. For more information, refer to the "Who is Eligible to Invest in a Closed Fund" section of the Fund's prospectus.

Artisan Funds	Select Share Class ¹		Amount
	Investor	Advisor	
Developing World	<input type="checkbox"/> 2463	<input type="checkbox"/> 2464	\$
Emerging Markets	<input type="checkbox"/> 1674		\$
Global Discovery	<input type="checkbox"/> 2475		\$
Global Equity	<input type="checkbox"/> 1676		\$
Global Opportunities	<input type="checkbox"/> 1675	<input type="checkbox"/> 2456	\$
Global Value	<input type="checkbox"/> 1673	<input type="checkbox"/> 2457	\$
High Income	<input type="checkbox"/> 2454	<input type="checkbox"/> 2455	\$
International*	<input type="checkbox"/> 661	<input type="checkbox"/> 2458	\$
International Small Cap*	<input type="checkbox"/> 1465		\$
International Value*	<input type="checkbox"/> 1466	<input type="checkbox"/> 2459	\$
Mid Cap*	<input type="checkbox"/> 962	<input type="checkbox"/> 2460	\$
Mid Cap Value	<input type="checkbox"/> 1464	<input type="checkbox"/> 2461	\$
Small Cap*	<input type="checkbox"/> 660	<input type="checkbox"/> 2469	\$
Thematic	<input type="checkbox"/> 2470		\$
Value	<input type="checkbox"/> 1670	<input type="checkbox"/> 2462	\$
TOTAL AMOUNT			\$

Payment Method

Check payable to: Artisan Partners Funds
(**Note:** Artisan Partners Funds does not accept cash, drafts, money orders, travelers checks, credit card payments, credit card checks, starter checks, third party checks or checks drawn on non-US financial institutions.)

Wire \$

Date of Wire:

(**Note:** Wire transfers from a financial institution outside the US will generally not be accepted. Please call 800.344.1770 for wiring instructions.)

Exchange from my identically registered Artisan Partners Fund
Account Number:

Automatic Investment Plan (No minimum—Complete Sections 6 & 7)

Transfer In-Kind (Complete transfer form on www.artisanpartners.com)

¹Investor Share Class minimum investment: \$1,000 per Fund. (No minimum investment is required in the Investor Share Class if you select an Automatic Investment Plan—Section 6). Advisor Share Class minimum investment: \$250,000 per Fund. If you do not meet the minimum investment threshold for the Advisor Share Class your investment will be made into the Investor Share Class.

5. Account Options

Cost Basis

Select one of the following cost basis methods. Your election will be used when calculating the gain or loss for all future sales of shares. If no election is made, the Funds default cost basis method of Average Cost will be applied to your account(s).

- Average Cost (ACST) First In, First Out (FIFO)
 Last In, First Out (LIFO) High Cost, First Out (HIFO)
 Low Cost, First Out (LOFO) Loss/Gain Utilization (LGUT)
 Specific Lot Identification (SLID) (Complete Secondary Election)

Secondary Election: _____ (For SLID method—options: FIFO, LIFO, HIFO, LOFO, LGUT)
(Secondary Method will be used in the event of any automated transactions, or for a redemption placed without specific lot identification.)

Consult your tax advisor to determine which method best suits your individual tax situation. Your elected cost basis method will be applied to future accounts opened in the Funds with the same account type and registration. For more information regarding cost basis reporting, please visit www.artisanpartners.com or call 800.344.1770.

Distribution Options

All distributions will be automatically reinvested if no selection is made.

- Ordinary Dividends: Reinvest Pay in cash
Short Term & Long Term Capital Gains: Reinvest Pay in cash

If any distributions are to be paid in cash, specify payment method:

- Deposit to your US bank account via Automated Clearing House/Electronic Funds Transfer (EFT). You must provide bank account information in Section 7 and attach a voided check to request this option.
 Send check to mailing address listed in Section 2.

Telephone Options

Redemption

By default, you are automatically enrolled in the telephone redemption option. If you wish to decline this option, check the box below.

- I do not want the telephone redemption option.

Purchase

Check the box below to authorize the telephone purchase option (\$50 minimum; \$50,000 maximum).

- I want the telephone purchase option.
Your purchase will be effected on the business day of your call, if you call before the time as of which the Fund calculates its Net Asset Value (NAV), or on the next business day after your call if you call after the time as of which the Fund's NAV have been calculated for the day. You must provide bank account information in Section 7 and attach a voided check to request this option.

Electronic Documents

Website Access available at www.artisanpartners.com

Offering shareholders easy-to-use, 24 hours a day, 7 days a week access to Fund and account information. You can obtain a prospectus, additional applications and more. Additionally, once your account has been established, online Account Access can provide you with immediate, secure access to your account information.

Consent to E-Delivery

Reduce clutter in your mailbox and help the environment by signing up for E-Delivery. Indicate if you would like to receive your statements and other important documents online. You will receive a notification to the email address provided in Section 1 informing you that the documents are available for viewing online. You can change this election at any time. Confidential account information will not be sent via email.

- All Available Documents*

OR select document type(s):

- Fund Reports, Prospectus, Privacy Statements, Proxies and Special Announcements
 Account Statements
 Confirmations*
 Tax Forms*

*We currently do not offer online delivery of confirmations or tax statements. However, we may commence operations of online delivery of these documents in the near future. In such case, you will automatically be enrolled for E-Delivery notifications if you make this election.

Escheatment

If no activity occurs in your account within the time frame specified by applicable state law, your account may be transferred to the appropriate state. This is called escheatment. Escheatment laws vary state by state. Please consult your legal advisor.

6. Automatic Investment Plan (AIP)

Establish automatic investments in your account(s) through deductions from your bank account. (\$50.00 minimum investment required per month)

Frequency: Monthly Quarterly Semi-annually Annually

Fund Name	Amount	Start Date	Day(s) of Month
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Fund Name	Amount	Start Date	Day(s) of Month
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Fund Name	Amount	Start Date	Day(s) of Month
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Fund Name	Amount	Start Date	Day(s) of Month
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Complete Section 7, Bank Information, to establish an Automatic Investment Plan.

An AIP normally becomes active 15 days after this form is processed. Designate a date between the 3rd and 28th day of the month only. If you are establishing an AIP and no start date is provided, the AIP will begin as soon as the option is established in accordance with the instructions provided. If no day or frequency is provided, investments will be made on or about the 15th business day of every month.

7. Bank Information

Your US bank account information must be on file in order to receive distributions or redemptions by Automated Clearing House (ACH)/Electronic Funds Transfer (EFT) directly to your bank account, purchase additional shares by telephone or establish an AIP. If you do not provide bank information, any dividends and distributions not reinvested and the proceeds of any redemption will be paid by check mailed to your mailing address of record. At least one name on the bank account must match exactly the name in Section 1. For checking accounts, a blank voided check is necessary to provide account and bank routing information and must accompany this Account Application (mutual fund money market checks may not be used). For savings accounts provide a pre-printed deposit slip to indicate account and bank routing number. Your bank must be a US bank and a member of the ACH to effect EFT transactions.

Checking (If selected, attach a voided check below) Savings (If selected, attach a pre-printed deposit slip below)

The following authorization is required for EFT transactions: By signing Section 8, I authorize Artisan Partners Funds to initiate (i) credit entries (deposits) (for telephone redemption, payment of distributions or systematic withdrawals with payment by EFT), (ii) debit entries (withdrawals) (for the AIP or telephone purchases with payment by EFT) and (iii) debit or credit entries and adjustments for any entries made in error to my bank account identified above. This authorization will remain effective until I notify Artisan Partners Funds in writing or by telephone of its termination and until Artisan Partners Funds has reasonable time to act on that termination. To discontinue or change an AIP, please notify us at least 14 days prior to the next scheduled withdrawal date.

Attach Blank, Voided Check or Deposit Slip

8. Signatures

By signing this form, I certify that:

I have received and read the current Artisan Partners Funds prospectus and agree to be bound by its terms and by the terms and conditions of this Account Application. I have full authority and legal capacity to purchase Fund shares and establish and use any related privileges. I acknowledge that I have sole responsibility for my investment choices. All information and certifications on this application are true and correct.

I agree that Artisan Partners, Artisan Partners Funds and any affiliate and/or any of their directors, employees and agents will not be liable for any loss, liability, cost, or expense for acting or refusing to act upon any written or telephonic instructions or inquiries received pursuant to any privileges, services or plans offered by the Funds and adopted by me, if such instructions or inquiries are reasonably believed to be genuine. Accordingly, I understand that I bear the risk of loss. I understand that any privileges, services, and/or plans offered by the Funds are subject to the terms and conditions set forth in the Artisan Partners Funds prospectus. This authorization and indemnification is a continuing one and the authorization shall remain in full force and effect until Artisan Partners Funds receives and has had a reasonable amount of time to act upon written notice from me. If an account has multiple owners, the Funds may rely on the instructions of any one account owner. The Funds may, in its sole discretion and for its own protection, require written authorization from all owners/parties to act on the account for certain transactions (for example, to transfer ownership). I will review all statements upon receipt and will notify the Funds immediately if there is a discrepancy.

Taxpayer Identification Number Certification

I certify under penalties of perjury:

I am a US citizen I am a resident alien

I certify that under penalties of perjury that: (1) the Social Security Number or Taxpayer Identification Number provided in Section 1 is correct and (2) I am not subject to backup withholding due to failure to report interest and dividend income.

OR

I am a non-resident alien and certify under penalties of perjury that I am not a US citizen or resident alien, and that I am an "exempt foreign person" as defined under IRS regulations. I have attached a completed W-8BEN form and a copy of my government-issued ID as proof of my foreign tax status.

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

Signature(s) Required. Signature must match name(s) listed in Section 1. If a joint account, all owners must sign.

Individual/Joint Tenant, Custodian or Trustee

Signature Date

Signature of Joint Owner, if any Date

Note: If shares are to be registered in (1) joint names, all persons should sign, (2) custodian's name (for a minor), the custodian should sign, (3) a trust, the trustee(s) should sign, (4) an estate, the executor(s) should sign, or (5) a corporation or other entity, an officer should sign, print name and title, and date on space provided below.

Corporation or Other Entity

Signature Name/Title Date

Note: Corporations, Organizations, or Partnerships should complete Section 9 to authorize additional individuals to perform transactions.

9. For Corporations, Organizations or Partnerships Only

Certification by Officer

Section 9 serves as a certified corporate/organization/partnership resolution with a list of officers authorized to transact in the account(s) established with this form. It eliminates the need to provide a resolution with each written transaction request. The Funds will keep this Resolution on file, where it will remain in full force and effect until a written revocation of the Resolution is delivered to the Funds, and the Funds have had a reasonable amount of time to act upon it.

If the account will be registered with a bank or brokerage firm listed as trustee and the bank or brokerage firm will be providing all instructions on the account(s), do not complete Section 9.

Provide the name of the corporation, organization, or partnership and the name, title, and signature of the authorized officers below. If you want to authorize more than four officers, write "see attached" on the first line, and attach a separate sheet with each officer's name, title, and signature. If you have a separate Resolution which lists the authorized officers, provide the name of the corporation, organization, or partnership below and attach the Resolution to this form.

As an authorized officer of:

Corporation/Organization/Partnership's Name

I hereby certify that the officer(s) listed below:

Name/Title Signature

Name/Title Signature

Name/Title Signature

Name/Title Signature

are duly authorized by resolution to act on behalf of the Corporations/Organizations/Partnership specified above in connection with the account(s) established with this Account Application. The above-named officer(s) are authorized to invest the assets of the Corporation/Organization/Partnership; to give instructions for the purchase, sale, exchange, or transfer of shares; and to execute and deliver any forms or instructions in connection with those shares.

The Corporation/Organization/Partnership listed agrees to indemnify and hold Artisan Partners Funds and Artisan Partners, and any affiliate and/or any of their directors, employees, and agents, harmless from acting upon instructions believed by the Funds to have originated from the officer(s) named above. This Resolution is to remain in effect until revoked in writing by one of the officers named above and delivered to the Funds. The revocation will not affect any liability resulting from transactions initiated before the Funds have had a reasonable amount of time to act upon the revocation. I am authorized and directed to certify the above and that these provisions conform with the charter of the Corporation/Organization/Partnership.

Number of Signatures Required to Transact

Enter the number of signatures required to transact in the account(s). If a number is not given, all signatures will be required on written transaction requests.

Note: Telephone requests may be made by any one of the officers listed above.

Signature of Authorized Individual

To the above I set my signature and seal of the Corporation/Organization/Partnership.

Secretary/Officer/Partner's Signature

Name/Title

Date

Affix Corporation/Organization/Partnership Seal

Note: If separate Resolution is attached, "see attached" may be written in this space. If the Corporation/Organization/Partnership does not have a seal, the word "seal" may be written in this space.



FACTS		WHAT DOES ARTISAN PARTNERS DO WITH YOUR PERSONAL INFORMATION?
Why?	Financial companies choose how they share your personal information. Federal law gives consumers the right to limit some but not all sharing. Federal law also requires us to tell you how we collect, share, and protect your personal information. Please read this notice carefully to understand what we do.	
What?	<p>The types of personal information we collect and share depend on the product or service you have with us. This information can include:</p> <ul style="list-style-type: none"> ■ Social Security number ■ account balances, transaction history and assets ■ checking account information and wire transfer instructions <p>When you are <i>no longer</i> our customer, we continue to share your information as described in this notice.</p>	
How?	All financial companies need to share customers' personal information to run their everyday business. In the section below, we list the reasons financial companies can share their customers' personal information, the reasons Artisan Partners chooses to share, and whether you can limit this sharing.	

Reasons we can share your personal information	Does Artisan Partners share?	Can you limit this sharing?
For our everyday business purposes— such as to process your transactions, maintain your account(s), respond to court orders and legal investigations, or report to credit bureaus	Yes	No
For our marketing purposes— to offer our products and services to you	Yes	No
For joint marketing with other financial companies	No	We don't share
For our affiliates' everyday business purposes— information about your transactions and experiences	Yes	No
For our affiliates' everyday business purposes— information about your creditworthiness	No	We don't share
For nonaffiliates to market to you	No	We don't share

Questions?	Call 800.344.1770
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Who we are

Who is providing this notice?

- Artisan Partners Limited Partnership and Artisan Partners Distributors LLC and their affiliates
- Pooled vehicles sponsored by Artisan Partners, including, without limitation, Artisan Partners Funds, Inc.

What we do

How does Artisan Partners protect my personal information?

To protect your personal information from unauthorized access and use, we use security measures that comply with federal law. These measures include computer safeguards and secured files and buildings.

Within Artisan Partners, access to information about you is restricted to those employees who need to know the information to service your account.

How does Artisan Partners collect my personal information?

We collect your personal information, for example, when you

- open an account or give us your contact information
- make a wire transfer or provide account information
- make deposits or withdrawals from your account

We also collect your personal information from other companies.

Why can't I limit all sharing?

Federal law gives you the right to limit only

- sharing for affiliates' everyday business purposes— information about your creditworthiness
- affiliates from using your information to market to you
- sharing for nonaffiliates to market to you

State laws and individual companies may give you additional rights to limit sharing.

Definitions

Affiliates

Companies related by common ownership or control. They can be financial and nonfinancial companies.

- *Artisan Partners Funds, Inc., Artisan Partners Distributors LLC, Artisan Partners Limited Partnership, Artisan Partners Asset Management Inc., Artisan Partners UK LLP and their affiliates may share information among each other.*

Nonaffiliates

Companies not related by common ownership or control. They can be financial and nonfinancial companies.

- *Artisan Partners does not share with nonaffiliates so they can market to you.*

Joint marketing

A formal agreement between nonaffiliated financial companies that together market financial products or services to you.

- *Artisan Partners does not jointly market.*