SEC Form 4											
FORM 4 UNI	FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB APPROVAL	
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	Pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940										
1. Name and Address of Reporting Person* <u>COXE TENCH</u> (Last) (First) (Middle)		2. Issuer Name and Ticker or Trading Symbol <u>Artisan Partners Asset Management Inc.</u> [APAM]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title Other (specify below) below)			
C/O ARTISAN PARTNERS ASSET MANAGEMENT	3. Date of Earliest Transaction (Month/Day/Year) 01/27/2021										
875 EAST WISCONSIN AVENUE, SU (Street) MILWAUKEE WI 5320	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)											
Table I -	Non-Derivat	tive Securities A	cquire	ed, C)isposed o	of, or E	Benefic	ially Owned			
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Ye	Execution Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(IIISU: 4)	
Class A Common Stock, par value \$0.01 per share	01/26/202	1	A		3,345	A	\$ <mark>0</mark>	86,148	D		
Class A Common Stock, par value								22,411	Ι	By trust ⁽¹⁾	

Class A Common Stock, par value

Class A Common Stock, par value

2. Conversion

or Exercise Price of

Derivative

Security

3. Transaction Date

(Month/Day/Year)

\$0.01 per share

\$0.01 per share

1. Title of

Derivative

Security (Instr. 3)

Explanation of Responses:

1. The securities are held by a trust of which the reporting person is a trustee. The reporting person disclaims beneficial ownership in these securities except as to the reporting person's pecuniary interest therein

Date

Exercisable

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

6. Date Exercisable and

Expiration

Date

Expiration Date

(Month/Day/Year)

5. Number

Derivative Securities

Acquired (A) or Disposed of (D) (Instr. 3, 4

and 5)

(A) (D)

Transaction

Code (Instr. 8)

Code v

2. The securities are held by a limited partnership of which the reporting person is a trustee of a trust that is the general partner. The reporting person disclaims beneficial ownership in these securities except as to the reporting person's pecuniary interest therein.

3. The securities are held by the SHV Profit Sharing Plan, a retirement trust, for the benefit of the reporting person.

3A. Deemed Execution Date,

if any (Month/Day/Year)

/s/ Lisa A. Moran, attorney-in-01/27/2021

50,000

50,000

8. Price of

Derivative

Security (Instr. 5)

By limited

By profit

sharing

plan⁽³⁾

10. Ownership

Form: Direct (D)

or Indirect (I) (Instr. 4)

partnership(2)

11. Nature

of Indirect

Beneficial Ownership

(Instr. 4)

T

I

9. Number of

Securities Beneficially

derivative

Owned Following Reported

Transaction(s) (Instr. 4)

fact for Mr. Coxe

7. Title and

Amount of

Securities Underlying

Derivative

Security (Instr. 3 and 4)

Amount or Number

Shares

of

Title

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.