

Unless otherwise agreed by the Manager in its discretion, Participants may redeem Units on any date which is a Valuation Date for the Fund ('Trade date') at the Series Net Asset Value per Unit by giving written notice to the Manager as follows:

- By 4pm EST, at least five Business Days prior to the Trade Date on which the Units are to be redeemed in respect of Baillie Gifford Emerging Markets Fund; and
- By 4pm EST, at least two Business Days prior to the Trade Date on which the Units are to be redeemed in respect of all other Funds.

If you would like to make a redemption from your fund:

- Fill out the form ensuring you complete all fields.
- Return this form to BGCanadaTrading@bailliegifford.com
- The redemption shall be made upon the terms and conditions set out in the current Offering Memorandum of the Fund.
- Subject to written notice being made in accordance with the above timescales, payment of redemption proceeds shall be made two business days after the relevant Trade Date¹.

Name of Shareholder

Shareholder Account Number

Name of Fund

Trade Date¹ (MM/DD/YY)

Redemption Amount (CAD or Number of Units)

¹ All payments of redemption monies shall be made two Business Days after the relevant Trade Date. If you want to specify a later date for payment of redemption monies please do so. The date you specify must be a day on which the Toronto Stock Exchange is open for business. If it is not then the payment of your redemption monies will be delayed until the next Valuation Date. Once a redemption request has been received by the Manager, it is irrevocable and binding on the Participant, forms a legally binding contract between the Participant and the Manager and may be cancelled or modified only at the discretion of the Manager. All capitalised terms used in this further redemption request form shall have the same meaning as defined terms in the Offering Memorandum for the Funds, a current version of which is available on request.

Bank Account Information

Bank Name*

Bank Account Name*

Bank Account Number*

ABA Number/Swift Number*

Beneficiary Bank Address*

For Further Credit
Account Name (if applicable)

For Further Credit
Account Number (if applicable)

*Mandatory.

Shareholder Authorised Signatories

Please sign as per your most up to date authorised signatory instructions.

Signature

Signature

Print Name

Print Name

Job Title

Job Title

Signature

Signature

Print Name

Print Name

Job Title

Job Title

THIS SECTION IS FOR BAILLIE GIFFORD USE ONLY

Settlement Date
(MM/DD/YY)

Baillie Gifford Internal Approval

Signature:

Signature:

Print Name:

Print Name:

Job Title:

Job Title:

Baillie Gifford Authorised Signatories

Signature:

Signature:

Print Name:

Print Name:

Job Title:

Job Title:

Please refer to the current authorised signatory list and instructions for Baillie Gifford Canadian Pooled Funds.