<u>BAILLIE GIFFORD WORLDWIDE FUNDS PLC (the "Company")</u> <u>an umbrella fund with segregated liability between sub-funds</u>

REDEMPTION REQUEST FORM

19 SEPTEMBER 2024

<u> 15 021 1</u>	ENDER EVE
To: Brown Brothers Harriman Fund Administration 30 Herbert Street, Dublin 2, Ireland (the "Admir	
Tel - Dublin: + 353 1 241 7156 Fax - Dublin: + 353 1 241 7157	
Tel – Hong Kong: + 852 3971 7156 Fax – Hong Kong: + 852 3971 7157	
Tel - Boston: + 1 617 310 7156 Fax - Boston: + 1 617 310 7157	
Email: BBHGlobalTA@bbh.com	
	Administrator marked for the attention of the Transfer aption request form and requested documentation may os://securetransfer.bbh.com/TAInvestorUploader
NOTE: All capitalised terms used in this redemption in the Prospectus.	request form shall have the same meaning as defined terms
Dealing Date*:	
Name of fund:	
ISIN:	
Share class to be redeemed:	
Name of shareholder:	
Shareholder account number:	
*Must be a day on which the relevant Fund is open	n for trading.
Please redeem the following from my/our holdings in number of shares or a cash amount):	the above named fund (the amount may be expressed as a
(a) Number of shares:	OR
(b) Value of shares (expressed in words):	

Value of shares:

Please forward proceeds by wire transfer, which will be at the expense of the Shareholder. Proceeds will be paid to the bank account of the shareholder as appearing on the original application form, unless the shareholder has previously advised Brown Brothers Harriman Fund Administration Services (Ireland) Limited of a change in their bank account. No third party payments will be made.

The Shareholder acknowledges that once this redemption request has been received by the Administrator it is irrevocable and binding on the Shareholder. It may be cancelled or modified only at the discretion of the Manager having received a written request for cancellation or modification prior to the Trade Cut-Off Time specified in the Company's Prospectus from time to time.

First signatory:	
Signature of applicant / authorised signatory / seal:	
Capacity of applicant or authorised signatory (if appl	icable):
Date:	
Second signatory (where required):	
Signature of applicant / authorised signatory / seal:	
Capacity of applicant or authorised signatory (if appl	icable):
Date:	
Joint applicants (in the case of joint holders, all must significants)	gn):
Name:	Signature:
Name:	Signature:
Name:	Signature: