NOTICE OF REDEMPTION

To: IQ-EQ Financial Services B.V. Hoogoorddreef 15 1101 BA Amsterdam Email: beleggingen@iqeq.com (with in cc: <u>pkrol@aescap.com</u> and fundmanagement@priviumfund.com) Fax: + 31 20 5222 500 Tel: + 31 20 5222 555

Dear Sir, Madam,

The undersigned, ______ (name Unit Holder).

We kindly request you, as per the next date available therefore under the Prospectus of Aescap Life Sciences (the "**Prospectus**"):

- (a) to redeem all Aescap Life Sciences Manager / Aescap Life Sciences Investor / Aescap Life Sciences Investor Allfunds /Aescap Life Sciences Investor <500k / Aescap Life Sciences Investor 10M+ / Aescap Life Sciences Investor 20M+ / Aescap Life Sciences Investor 30M+/ Aescap Life Sciences Investor N held by the undersigned.*</p>
- (c) to redeem for a sum of EUR _____ (amount).*

I hereby declare that I wish to redeem my units in Aescap Life Sciences and I am requesting this with the number of Units, up to 4 decimals. Redemption is allowed subject to the rules and regulations as stipulated in the prospectus. Partial redemptions are allowed up to a minimum holding of €100.000. This minimum can be lowered to EUR 10,000 for the Aescap Life Sciences Unit Holders Unit Class. This would exclusively be for the clients of wealth managers or private banks who have an executed discretionary portfolio management agreement or investment advisory services agreement with the wealth manager, family office or private bank, as the investment decision to invest in the Aescap Life Sciences is taken by or advised by the wealth manager, family office or private bank.

Redemption will be offset by an anti-dilution levy of 0.2%.

For Unit Holders that are maintaining an investment in the Aescap Life Sciences Unit Holders <500k Unit Class, a 2% early redemption fee will be applied in the first 2 years after Units have been received.

The Legal Owner shall pay such amount or deliver assets with an equivalent value in accordance with the provisions of article 15 of the Prospectus and article 11 of the Subscription Form of the undersigned.

Yours faithfully,

UNIT HOLDER

By :	By :
Title:	Title:
Date:	Date:

* please strike through as applicable and complete information if applicable