Transfer of Ownership Or Account Re-registration

Important information:

Use this form to transfer shares to a new or existing Brookfield Real Estate Income Trust Inc. account or to update your Brookfield Real Estate Income Trust Inc. account registration. If you wish to sell or redeem shares, please contact us at 833-625-7348 for further instructions.

Current owner(s) or authorized person(s), please complete sections 1–3 and 12. New owner(s) if applicable, please complete sections 4–11, 13–14, Appendix A (if applicable) and Appendix B. Please type or print clearly.

| 1 Current account registration | | | |
|--|------------------------|--------------------|-----------------------|
| Individual owner(s) | | SSN/Tax ID(s) | |
| Trust/Corp/Partnership/Other | ; | SSN/Tax ID | |
| Account Number (if known) | | | |
| 2 Reason for transfer or re-registration (Select only one) | | | |
| ☐ Re-Registration (Change of Name, Custodian, TTEE, or Divorce ☐ Inheritance- Date of Death | YYY) | Gift- Date of Gift | (MM/DD/YYYY) |
| 3 Amount to transfer | | | |
| NOTE: For partial transfers, please indicate either an exact number of s | hares or a percentage. | | |
| FUND NAME | ALL SH | ARES | NUMBER OF SHARES |
| | 0 | OR | |
| 4 Change of cost basis method of computation (optional | l) | | |
| Please indicate the cost basis method you would like to apaccount will default to first in, first out (FIFO). You shoul Check only one option below. | oply to this transfer. | | making this election. |
| , | C | 1 | |
| 5 Transfer instructions (Select only one) | | | |
| O Transfer to a new account Please complete sections 6– O Transfer to an existing account Please skip sections 6– | | ections 11–12. | |
| Account number | | | |
| Account holder/registration | | SSN/Tax II |) |

6 Broker-Dealer/Financial Advisor Information (Required Information. All fields must be completed.)

The Financial Advisor must sign below to complete the order. The Financial Advisor hereby warrants that he/she is duly licensed and may lawfully sell Shares in the state designated as the investor's legal residence.

| Broker-Dealer | | Financial Advisor Name | |
|--------------------------|---------------|------------------------|------------------|
| | | | |
| Advisor Mailing Address | | | |
| | | | |
| City | State | | Zip Code |
| | | | |
| Financial Advisor Number | Branch Number | | Telephone Number |
| | | | |
| E-mail Address | | Fax Number | |
| | | | |

The undersigned confirm(s), which confirmation is made on behalf of the Broker-Dealer with respect to sales of securities made through a Broker- Dealer, that they (i) have reasonable grounds to believe that the information and representations concerning the investor identified herein are true, correct and complete in all respects; (ii) have discussed such investor's prospective ownership of Shares with such investor; (iii) have advised such investor of all pertinent facts with regard to the lack of liquidity and marketability of the Shares; (iv) have delivered or made available a current Prospectus and all related supplements, if any, to such investor; (v) have reasonable grounds to believe that the investor intends to hold these—Shares for his or her own account; and (vi) have reasonable grounds to believe that the ownership of Shares is a suitable investment for such investor, that such investor meets the suitability standards applicable to such investor set forth in the Prospectus and related supplements, if any, including Regulation Best Interest, as applicable, and that such investor is in a financial position to enable such investor to realize the benefits of such an investment and to suffer any loss that may occur with respect thereto. The undersigned Financial Advisor further represents and certifies that, in connection with this subscription for Shares, he or she has complied with and has followed all applicable policies and procedures under his or her firm's existing Anti-Money Laundering Program and Customer Identification Program.

If you do not have another broker-dealer or other financial intermediary introducing you to Brookfield Real Estate Income Trust Inc., then Brookfield Oaktree Wealth Solutions LLC (the "Dealer Manager") may be deemed to act as your broker of record in connection with any investment in Brookfield Real Estate Income Trust Inc. The Dealer Manager is not a full-service broker-dealer and may not provide the kinds of financial services that you might expect from another financial intermediary, such as holding securities in an account. If the Dealer Manager is your broker-dealer of record, then your Shares will be held in your name on the books of Brookfield Real Estate Income Trust Inc. The Dealer Manager will not monitor your investments, and has not and will not make any recommendation regarding your investments. If you want to receive financial advice regarding a prospective investment in the Shares, contact your broker-dealer or other financial intermediary.

| X | | | X | | | |
|---|-----------------------------|------|---|--|---|------|
| | Financial Advisor Signature | Date | | Branch Manager Signature (If required by Broker-Dealer) | L | Date |

A

Please complete section 8A & 8B.

Brookfield Real Estate Income Trust Inc.

7 Ownership (Select only one)

Please complete section 8A.

| SINGLE OWNER o Individual* | Custodian authorization required in section 12. | entity/otherac | |
|---|--|---|-------------------|
| MULTIPLE OWNERS | QUALIFIED PLAN ACCOUNT | o Corporation: S-Cor o Corporation: C-Cor | |
| o Community property | o Traditional IRA | o Profit-sharing plan | |
| o Tenants in common | o Roth IRA | o Keogh | |
| o Joint tenants with rights of survivorship | o Rollover IRA | o Partnership | |
| (JTWROS)* | o SIMPLE IRA | o 401(k) | |
| o UGMA/UTMA State of | o SEP IRA | o Estate | |
| Name of minor's custodian (required): | o Beneficial IRA | o Trust | |
| rame of minor's custodian (required). | o Other | o must | |
| | (please specify) | | |
| *Additional documentary evidence may be | required for entity or trust account ownership designation: | s. | |
| the time of account opening. This requirement | quirements, we are required to collect information about ir ent generally applies to legal entities that are required to fi ce. If this account is being opened for this type of entity, p | le registration documents v | with their |
| 3 Custodial/Brokerage account infor | mation (if applicable) | | |
| Name of custodian | Custodian phone # | | |
| Mailing address | | | |
| (stree | t) | (city, state) | (ZIP) |
| To be completed by custodian (custodian auth | orization required in section 12): | | |
| G . T . TD " | Custodian account # | | |
| Custodian tax ID # | Custodian account # | | |
| New account registration (Please co | | | |
| | | | |
| New account registration (Please co | omplete A or B) | wner(s) of the account, act | ing pursuant to a |
| New account registration (Please co OTES: The following information needs to be provided | omplete A or B) led on this Transfer Form for all individuals who will be o | | |
| New account registration (Please co OTES: The following information needs to be provided Power of Attorney or will be signing on behalf | omplete A or B) led on this Transfer Form for all individuals who will be o If of a legal entity that will own the account: name, date of | birth, residential/street add | |
| O New account registration (Please co OTES: The following information needs to be provide Power of Attorney or will be signing on behalf Security number (SSN) or Tax Identification | omplete A or B) led on this Transfer Form for all individuals who will be o lf of a legal entity that will own the account: name, date of Number (TIN). We may also ask to see government-issued | birth, residential/street add | |
| O New account registration (Please co OTES: The following information needs to be provide Power of Attorney or will be signing on behalf Security number (SSN) or Tax Identification | omplete A or B) led on this Transfer Form for all individuals who will be o lf of a legal entity that will own the account: name, date of Number (TIN). We may also ask to see government-issued | birth, residential/street add | |
| New account registration (Please co OTES: The following information needs to be provided Power of Attorney or will be signing on behalf | ded on this Transfer Form for all individuals who will be of a legal entity that will own the account: name, date of Number (TIN). We may also ask to see government-issued must be provided in section B. | birth, residential/street add | |
| O New account registration (Please co OTES: The following information needs to be provide Power of Attorney or will be signing on behalf Security number (SSN) or Tax Identification If the new owner is an estate, the estate's TIN | ded on this Transfer Form for all individuals who will be of a legal entity that will own the account: name, date of Number (TIN). We may also ask to see government-issued must be provided in section B. | birth, residential/street add | |
| O New account registration (Please co OTES: The following information needs to be provide Power of Attorney or will be signing on behalf Security number (SSN) or Tax Identification If the new owner is an estate, the estate's TIN | bed on this Transfer Form for all individuals who will be of a legal entity that will own the account: name, date of Number (TIN). We may also ask to see government-issued must be provided in section B. Suth trader (first, middle, last) | birth, residential/street add | |
| O New account registration (Please co OTES: The following information needs to be provide Power of Attorney or will be signing on behalf Security number (SSN) or Tax Identification If the new owner is an estate, the estate's TIN Individual owner/beneficial owner/minor/ttee/a | ded on this Transfer Form for all individuals who will be of a legal entity that will own the account: name, date of Number (TIN). We may also ask to see government-issued must be provided in section B. auth trader (first, middle, last) | Fbirth, residential/street add didentifying documents. | |
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| New account registration (Please co OTES: The following information needs to be provided prover of Attorney or will be signing on behalf Security number (SSN) or Tax Identification of the new owner is an estate, the estate's TIN Individual owner/beneficial owner/minor/ttee/assN Joint owner/beneficial owner SSN | ded on this Transfer Form for all individuals who will be of a legal entity that will own the account: name, date of Number (TIN). We may also ask to see government-issued must be provided in section B. The section B. Date of birth Provided (first, middle, last) Date of birth Provided (first, middle, last) Date of birth Provided (first, middle, last) | Fbirth, residential/street add identifying documents. | |
| New account registration (Please co OTES: The following information needs to be provided prover of Attorney or will be signing on behalf Security number (SSN) or Tax Identification of the new owner is an estate, the estate's TIN Individual owner/beneficial owner/minor/ttee/assN Joint owner/beneficial owner SSN | ded on this Transfer Form for all individuals who will be of a legal entity that will own the account: name, date of Number (TIN). We may also ask to see government-issued must be provided in section B. The section B. Date of birth Provided (first, middle, last) Date of birth Provided (first, middle, last) Date of birth Provided (first, middle, last) | f birth, residential/street add identifying documents. none # (city, state) | (ZIP) |
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| O New account registration (Please co OTES: The following information needs to be provided Power of Attorney or will be signing on behalf Security number (SSN) or Tax Identification If the new owner is an estate, the estate's TIN Individual owner/beneficial owner/minor/ttee/assss | ded on this Transfer Form for all individuals who will be of a legal entity that will own the account: name, date of Number (TIN). We may also ask to see government-issued must be provided in section B. Buth trader (first, middle, last) Date of birth (mm/dd/yyyy) (first, middle, last) Date of birth Promoder (mm/dd/yyyy) | f birth, residential/street add identifying documents. none # (city, state) | (ZIP) |
| O New account registration (Please co OTES: The following information needs to be provided prover of Attorney or will be signing on behalf Security number (SSN) or Tax Identification of the new owner is an estate, the estate's TIN Individual owner/beneficial owner/minor/ttee/asssssssssssssssssssssssssssssssss | ded on this Transfer Form for all individuals who will be of a legal entity that will own the account: name, date of Number (TIN). We may also ask to see government-issued must be provided in section B. The section B. Th | f birth, residential/street add identifying documents. none # (city, state) | (ZIP) |
| New account registration (Please co OTES: The following information needs to be provided prover of Attorney or will be signing on behalf Security number (SSN) or Tax Identification of the new owner is an estate, the estate's TIN Individual owner/beneficial owner/minor/ttee/asssssssssssssssssssssssssssssssss | ded on this Transfer Form for all individuals who will be of a legal entity that will own the account: name, date of Number (TIN). We may also ask to see government-issued must be provided in section B. The section B. Date of birth | f birth, residential/street add identifying documents. none # (city, state) | (ZIP) |

Please complete section 8A. Custodian required in section 7.

Brookfield Real Estate Income Trust Inc.

| 9 New account registration | Please complete A or B (continued) | | | |
|---|--|---|---|--|
| B Trust/Corp/Partnership/Other | | | | |
| SSN/Tax ID | | Date of | formation | |
| U.S. street address | | | (mm/dd/yyyy | |
| Mailing address | and an War address on the comp | | (city, state) | (ZIP) |
| (Leave blank if your U.S. street addres | s and mailing address are the same) | | (city, state) | (ZIF) |
| Paperless e-delivery (Please | check box if you wish to elect this option) | Email | | |
| sponsored by Brookfield Real E investor communications, annual request a paper copy of a sharel Real Estate Income Trust Inc. Claddress. Costs associated with a materials delivered electronicall electronic delivery program may | requests to receive all shareholder commustate Income Trust Inc. or its affiliates. Co., semi-annual and/or quarterly reports, tax solder communication, update an email act anages may take up to 30 days to take effectivesing the internet may be incurred and y. Timely access to materials may not be be changed or discontinued and the terms are receive paper copies of all shareholder continued. | ommunications inc forms, proxy mate ldress or change th ect. Consent to elect certain software r available in the even s may be amended | clude, but are not limited to rials and other required reposition at any time by the tronic delivery is terminated may need to be downloaded there of a system failure or | o, account statement orts. The investor ma contacting Brookfiel d by an invalid ema d in order to view the network outage. Th |
| 10 Change of distribution ins | tructions Custodial accounts require custo | dial authorization | | |
| (street) | e distribution reinvestment plan(s) of the c | (city, state) | (Z | (P) |
| O I choose not to participate in | the distribution reinvestment plan(s) of the | ne company(ies) inc | dicated in section 3. | |
| (street) | | (city, state) | (Z | (P) |
| 11 Financial representative i | nformation If no selection is made, the | ere will be no advis | or on the account | |
| Broker-dealer or RIA firm na | nme | | | |
| Financial representative nam | e (first, middle, last) | | | |
| Mailing address | (street) | | (site -t-t-) | |
| All CDD | | | (city, state) | (ZIP) |
| Advisor/CRD number | Branch number | | Phone # | |
| Email address | | Fax # | | |

Brookfield Real Estate Income Trust Inc.

12 Authorization and signature(s) of current owner(s) Required

Only one medallion signature guarantee is required for Transferor's signature. If shares are held by a custodian, custodian authorization is also required.

Signatures must be guaranteed by a bank, savings association, credit union, member firm of a domestic stock exchange or the Financial Industry Regulator Authority that is an eligible guarantor institution. A notary public is not an acceptable guarantor. The guarantee must be in the form of a stamp or a typewritten or handwritten guarantee that is accompanied by a raised corporate seal. A medallion signature guarantee is acceptable in place of a signature guarantee.

The Transferor(s) acknowledges his or her agreement to the transfer of shares. The Transferor(s) further agrees that none of the Company, its board of directors/trustees, or any of their respective affiliates shall be responsible for any loss incurred as a result of such transfer. The Transferor(s) has received no representations or warranties from the Company, its board of directors/trustees or any of their respective affiliates.

| Signature of Transferor or authorized person | Date (mm/dd/yyyy) | Signature of joint transferor or authorized person Date (mm/dd/yyyy) |
|--|-------------------|--|
| | | |
| Medallion signature guarantee (Required) | | Custodian authorization (Required for transfers of custodial accounts) |
| | | |
| | | |

13 Authorization and signature(s) of new owner(s)

The Company is required by law to obtain, verify and record certain personal information from the Transferee(s) or persons on the Transferee's behalf in order to establish the Transferee's account. Required information includes the Transferee's name, date of birth, permanent residential address and Social Security number/taxpayer identification number. The Company may also ask the Transferee(s) to provide other identifying documents. If the Transferee(s) does not provide the requested information, the Company may not be able to open the Transferee's account. The Transferee(s) agrees to provide this information and confirm that this information is true and correct. By signing this Transfer Form, the Transferee(s) further agrees that the Company may discuss the Transferee's personal information and the Transferee's investment in the Shares at any time with the Transferee's then-current financial advisor. If the Company is unable to verify the Transferee's identity, or that of another person(s) authorized to act on the Transferee's behalf, or if the Company believes that it has identified potentially criminal activity, the Company reserves the right to take action as it deems appropriate, which may include closing the Transferee's account.

MY SIGNATURE(S) BELOW INDICATES I HAVE READ THE FOREGOING AND AGREE TO THE TERMS HEREIN. I acknowledge that the information and distributions made and/or sent prior to the date that this Transfer Form becomes effective (generally up to 30 days after receipt of this properly completed Transfer Form) will be made in the manner previously provided for and arranged. This Transfer Form supersedes all prior instructions regarding the subject matter hereof.

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

| Signature of Transferee or authorized person | Date (mm/dd/yyyy) | Signature of joint transferee or authorized person | Date (mm/dd/yyyy) |
|--|-------------------|--|---------------------|
| | | | |
| Custodian authorization (Required for transfers of custodial accounts) | | Signature guarantee* (Required for TOD accounts transferring to multiple | beneficiaries only) |
| | | | • / |
| | | | |

ORIGINAL MEDALLION SIGNATURE GUARANTEES ARE REQUIRED.

Return to: Brookfield Real Estate Income Trust Inc. c/o DST Systems Inc. • P.O. BOX 219663 • Kansas City, MO • 64121-9731 Overnight delivery: Brookfield Real Estate Income Trust Inc. c/o DST Systems Inc. • 430 W 7th St • Kansas City, MO • 64105 833-625-7348

Fax: 833-742-3080

 $\frac{Brookfield.ai@dstsystems.com}{www.brookfieldREIT.com}$

^{*}For existing TOD accounts with multiple beneficiaries claiming shares, by signing you are acknowledging there are no known disputes as to the persons entitled to a distribution under the non-probate transfer or the amounts to be distributed to each beneficiary, and no known claims affecting the distribution requested. For TOD accounts with multiple beneficiaries, a signature guarantee is required for the signature(s) of the new owner(s).

14(i) Subscriber Signatures

Brookfield Real Estate Income Trust Inc. is required by law to obtain, verify and record certain personal information from you or persons on your behalf in order to establish the account. Required information includes name, date of birth, permanent residential address and social security/taxpayer identification number. We may also ask to see other identifying documents. If you do not provide the information, Brookfield Real Estate Income Trust Inc. may not be able to open your account. By signing this Subscription Agreement, you agree to provide this information and confirm that this information is true and correct. If we are unable to verify your identity, or that of another person(s) authorized to act on your behalf, or if we believe we have identified potentially criminal activity, we reserve the right to take action as we deem appropriate which may include closing your account.

Please separately initial each of the representations below. Except in the case of fiduciary accounts, you may not grant any person a power of attorney to make the representations on your behalf.

| Please | e Note: Items (a)-(g) Must Be Read and Initialed by all Investors. | Primary Investor | Co- Investor |
|--------|--|---------------------|-----------------|
| I here | by represent and warrant to you as follows: | Initials | Initials |
| (a) | I have received a copy of the final Prospectus. | | |
| | | Initials | Initials |
| (b) | I/We have (i) a minimum net worth (not including home, home furnishings and automobiles) of at least \$250,000, or (ii) a minimum net worth (as previously described) of at least \$70,000 and a minimum annual gross income of at least \$70,000. | | |
| | | Initials | Initials |
| (c) | In addition to the general suitability requirements described above in 14(i)(b), I/we meet the higher suitability requirements, if any, imposed by my state of primary residence as set forth in the Prospectus under "SUITABILITY STANDARDS." | | |
| | | Initials | Initials |
| (d) | I acknowledge that there is no public market for the Shares and, thus, my investment in Shares is not liquid. | | |
| | | Initials | Initials |
| (e) | I am purchasing the Shares for my own account. | | |
| | | Initials | Initials |
| (f) | I understand that the transaction price per share at which my investment will be executed will be made available at www.brookfieldREIT.com and in a Prospectus supplement filed with the SEC, available at www.sec.gov. | | |
| | | Initials | Initials |
| (g) | I understand that my subscription request will not be accepted before the later of (i) two business days before the first calendar day of the month and (ii) three business days after the transaction price is made available. I understand that I am not committed to purchase shares at the time my subscription order is submitted and I may cancel my subscription at any time before the time it has been accepted as described in the previous sentence. I understand that I may withdraw my purchase request by notifying the transfer agent, through my financial intermediary or directly on Brookfield Real Estate Income Trust Inc.'s toll-free, automated telephone line, 833-625-7348. | | |
| | | Initials | Initials |
| (h) | <u>IF I AM NOT</u> an Alabama, Idaho, Kansas, Kentucky, Maine, Maryland, Massachusetts, Nebraska, New Jersey, North Carolina, Ohio, Oregon, Texas, Vermont or Washington resident, <u>I acknowledge</u> that I will be automatically enrolled in the distribution reinvestment plan unless I elect in Section 10 of this Transfer / Re-registration Form. | | |
| | - - | Initials | Initials |

Pennsylvania Texas

Vermont

Puerto Rico

Tennessee

North Dakota

Ohio

Oregon

<u>Alabama</u>

California

<u>Idaho</u>

<u>Iowa</u>

Kansas

Kentucky

14(ii) Additional Investor Acknowledgements (Investors in Applicable States Must Complete)

Maine

<u>Missouri</u>

Massachusetts

If your primary residence is one of the below states, please complete and inital items (a-t) where applicable. Otherwise, please proceed to Section 14.(iii).

<u>Nebraska</u>

New Jersey

New Mexico

| | Please initial where applicable based on primary residence. For purposes of determining whether you sat your (i) "net worth" is calculated excluding the value of your home, home furnishings and automobiles, a is that portion of your net worth that consists of cash, cash equivalents and readily marketable investment | nd (ii) "liqui | |
|-----|--|----------------|------------|
| (a) | If I am an <u>Alabama</u> resident, my investment in Brookfield Real Estate Income Trust Inc. and its affiliates may not exceed 10% of my liquid net worth. | | |
| | | Initials | Initials |
| (b) | If I am a <u>California</u> resident, my investment in Brookfield Real Estate Income Trust Inc. may not exceed 10% of my liquid net worth. | | |
| | | Initials | Initials |
| (c) | If I am an <u>Idaho</u> resident, I have either (a) a liquid net worth of \$85,000 and annual gross income of \$85,000 or (b) a liquid net worth of \$300,000. In addition, my total investment in Brookfield Real Estate Income Trust Inc. may not exceed 10% of my liquid net worth. | | |
| | | Initials | Initials |
| (d) | If I am an <u>Iowa</u> resident, I have either (a) an annual gross income of at least \$100,000 and a net worth of at least \$100,000, or (b) a net worth of at least \$350,000. In addition, if I am not an accredited investor as defined in Regulation D under the Securities Act of 1933, as amended, my aggregate investment in this offering and in the securities of other non-publicly traded real estate investment trusts (REITs) does not exceed 10% of my net worth. | | |
| | | Initials | Initials |
| (e) | If I am <u>Kansas</u> resident, I understand that it is recommended by the Office of the Kansas Securities Commissioner that I limit my total investment in this offering and other non-traded real estate investment trusts to not more than 10% of my liquid net worth. For this purpose, "liquid net worth" is that portion of net worth (total assets minus total liabilities) which consists of cash, cash equivalents and readily marketable securities. | | |
| | securities. | Initials | Initials |
| (g) | If I am a Kentucky resident, my investment in Brookfield Real Estate Income Trust Inc. and its affiliated non-publicly traded real estate investment trusts may not exceed 10% of my liquid net worth. | | |
| | | Initials | Initials |
| (h) | If I am a <u>Maine</u> resident, I acknowledge that the Maine Office of Securities recommends that my aggregate investment in this offering and other similar direct participation investments not exceed 10% of my liquid net worth. | | |
| | | Initials | Initials |
| (i) | If I am a <u>Massachusetts</u> resident, my investment in Brookfield Real Estate Income Trust Inc. and other illiquid direct participation programs may not exceed 10% of my liquid net worth. | Initials | In iti ala |
| (j) | If I am a <u>Missouri</u> resident, no more than 10% of my liquid net worth may be invested in the securities of Brookfield Real Estate Income Trust Inc. | initials | Initials |
| | | Initials | Initials |

| (k) | If I am a New Jersey resident, I have either (a) a minimum liquid net worth of at least \$100,000 and a minimum annual gross income of not less than \$85,000, or (b) a minimum liquid net worth of \$350,000. For these purposes, "liquid net worth" is defined as that portion of net worth (total assets exclusive of home furnishings, and automobiles, minus total liabilities) that consists of cash, cash equivalents and readily marketable securities. In addition, my investment in Brookfield Real Estate Income Trust Inc., and its affiliates, and other non-publicly traded direct investment programs (including real estate investment trusts, business development companies, oil and gas programs, equipment leasing programs and commodity pools, but excluding unregistered, federally and state exempt private offerings) may not exceed 10% of my liquid net worth. | Initials | Initials |
|-----|--|----------|----------|
| | New Jersey investors are advised that the Class T and Class S shares will, with limited exceptions, be subject to upfront selling commissions and/or dealer manager fees of up to 3.5% and Class D shares will, with limited exceptions, be subject to upfront selling commissions of up to 1.5%, which, in each case, will reduce the amount of the purchase price that is available for investment. | | |
| | New Jersey investors are also advised that Brookfield Real Estate Income Trust Inc. will pay stockholder servicing fees, subject to certain limits, with respect to outstanding Class T, Class S and Class D shares in an annual amount equal to 0.85%, 0.85% and 0.25%, respectively, of the aggregate NAV of the outstanding Class T, Class S or Class D shares. The stockholder servicing fees will reduce the NAV or, alternatively, the amount of distributions that are paid with respect to Class T, Class S and Class D shares. Stockholder servicing fees allocable to a specific class of shares will only be included in the NAV calculation for that class, which may cause the NAV per share for our share classes to be different. No upfront selling commissions, dealer manager fees or ongoing stockholder servicing fees are paid with respect to Class I shares. Your financial advisor may charge a separate wrap account or similar fee with respect to Class I shares or Class D shares. | • | |
| (1) | If I am a <u>New Mexico</u> resident I must limit my investment in Brookfield Real Estate Income Trust Inc., its affiliates and other non-traded real estate investment trusts to 10% of my net worth. | Initials | Initials |
| (m) | If I am a North Dakota resident, I have a net worth of at least 10 times my investment in Brookfield Real Estate Income Trust Inc. | Initials | Initials |
| (n) | If I am an <u>Ohio</u> resident, my investment in Brookfield Real Estate Income Trust Inc., its affiliates and other non-traded real estate investment programs may not exceed 10% of my liquid net worth. For these purposes, "liquid net worth" is defined as that portion of net worth (total assets exclusive of home, home furnishings, and automobiles minus total liabilities) that is comprised of cash, cash equivalents, and readily marketable securities. | | |
| | | Initials | Initials |
| (o) | If I am an <u>Oregon</u> resident, my investment in Brookfield Real Estate Income Trust Inc. and its affiliates may not exceed 10% of my liquid net worth. | | |
| | | Initials | Initials |
| (p) | If I am a Pennsylvania resident, my investment in Brookfield Real Estate Income Trust Inc. may not exceed 10% of my net worth. | | |
| | · | Initials | Initials |
| (q) | If I am a Puerto Rico resident, my investment in Brookfield Real Estate Income Trust Inc., its affiliates and other non-traded real estate investment programs may not exceed 10% of my liquid net worth. For these purposes, "liquid net worth" is defined as that portion of net worth (total assets exclusive of primary residence, home furnishings, and automobiles minus total liabilities) consisting of cash, cash equivalents, and readily marketable securities. | | |
| | | Initials | Initials |
| (r) | If I am a <u>Tennessee</u> resident, I have a liquid net worth of at least 10 times my investment in Brookfield Real Estate Income Trust Inc. | | |
| | | Initials | Initials |

| (s) | If I am a <u>Texas</u> resident, my investment in Brookfield Real Estate Income Trust Inc. and in other illiquid direct participation programs may not exceed 10% of my liquid net worth. | | |
|-----|---|--|---|
| | | Initials | Initials |
| (t) | If I am a <u>Vermont</u> resident and I am not an "accredited investor" as defined in 17 C.F.R. § 230.501, my investment in this offering may not exceed 10% of my liquid net worth. For these purposes, "liquid net worth" is defined as an investor's total assets (not including home, home furnishings, or automobiles) minus total liabilities. | Initials | Initials |
| | For the purposes of these suitability standards, an "affiliate" of Brookfield Real Estate Income Trust Inc. shall mean (i) any person or entity directly or indirectly owning, controlling or holding, with the power to vote, 10% or more of the outstanding voting securities of Brookfield Real Estate Income Trust Inc.; (ii) any person or entity 10% or more of whose outstanding voting securities are directly or indirectly owned, controlled or held, with the power to vote, by Brookfield Real Estate Income Trust Inc.; (iii) any person or entity directly or indirectly controlling, controlled by or under common control with Brookfield Real Estate Income Trust Inc., including any partnership in which Brookfield Real Estate Income Trust Inc. is a general partner or the sole member of a general partner; and (iv) any executive officer, director, trustee or general partner of the Brookfield Real Estate Income Trust Inc. | muus | muus |
| 14(| iii) Subscriber Signatures (All Investors Must Complete) | | |
| | If you do not have another broker-dealer or other financial intermediary introducing you to Brook Income Trust Inc., then the Broker Dealer may be deemed to be acting as your broker of reco with any investment in Brookfield Real Estate Income Trust Inc. For important information in this res 6 above. I declare that the information supplied above is true and correct and may be relied upon by Estate Income Trust Inc. I acknowledge that the Broker-Dealer/Financial Advisor (Broker Advisor of record) indicated in Section 6 of this Subscription Agreement and its designated clearing have full access to my account information, including the number of shares I own, tax inform the Form 1099) and repurchase information. Investors may change the Broker-Dealer/Financial Adamy time by contacting Brookfield Real Estate Income Trust Inc. at the number indicated below. | rd in conn spect, see S Brookfield Dealer/Fin agent, if an nation (incl | ection ection d Real ancial y, will luding |
| | | | |
| X | X | | |
| | Signature of Investor Date Signature of Co-Investor or Custodian (If applicable) | Da | te |



Appendix A: Supplemental Ownership Information for Legal Entity Accounts

Fill out the information in the table below for the following individuals (note that it is your responsibility to inform us of updates to the information in the table):

- A. Control person: Provide the name of an individual with significant responsibility to control, manage, or direct the legal entity customer (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, or Treasurer).
- B. Beneficial owners: Provide the names of all individuals who own directly or indirectly 25% or more of the legal entity for which this account is being established. If no individual meets this definition, please reflect "NONE." If appropriate, an individual listed under this section may also be listed as the Control person.

| | Full Name/Title | Physical Address* | Birth | Identification Number** | Daytime Phone # | % Ownership |
|----------------------|-----------------|-------------------|-------|-------------------------|--------------------|----------------|
| Control person | | | | | | |
| | | | | | | |
| | | | | | | |
| 25% or more Owner | | | | | | |
| Owner | | | | | | |
| | | | | | | |
| 25% or more | | | | | | |
| Owner | | | | | | |
| | | | | | | |
| 25% or more Owner | | | | | | |
| Owner | | | | | | |
| | | | | | | |
| 25% or more Owner | | | | | | |
| Owner | | | | | | |
| | | | | | | |

^{*}We cannot accept a P.O. Box as a residential address; APO/FPO addresses are accepted.

^{**}Foreign persons can provide a copy of their passport, alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence that bears a photograph or similar safeguard (a photocopy of the foreign identification document must accompany this form). If the entity for which this account is being established is owned or controlled by another legal entity, these same requirements apply for individuals associated with that other

Brookfield Real Estate Income Trust Inc.

Appendix B: Tax Information

This section summarizes certain U.S. Federal income tax restrictions applicable to Brookfield Real Estate Income Trust Inc., an entity that has elected to be a real estate investment trust under the Code (a "REIT") and includes information for the Subscriber and the Subscriber's tax adviser to review and complete with regard to the tax status of the individual or entity in whose name the investment will be held.

An entity formed as a REIT cannot maintain its REIT status if it is "closely held." A REIT will be treated as closely held if, during the last half of a taxable year, five or fewer investors classified as "individuals" are treated as the beneficial owners of more than 50% of the equity of the REIT. In the case of a Subscriber that is an entity (an "Entity Subscriber"), the beneficial owners of the Entity Subscriber may, in turn, be considered beneficial owners of Brookfield Real Estate Income Trust Inc. Although Brookfield Real Estate Income Trust Inc.expects that the number of Subscribers and the tax status of the Entity Subscribers will enable Brookfield Real Estate Income Trust Inc.to avoid being treated as closely held, Brookfield Real Estate Income Trust Inc.needs to understand the tax status of each Subscriber in order to confirm that Brookfield Real Estate Income Trust Inc.will not be closely held.

The following is a description of the rules defining the terms "**Individual**" and "**Beneficial Ownership**" as used in this Appendix B and a brief summary of how such rules may apply to most typical Subscribers. The term "**Individual**" means an individual within the meaning of Code Section 542(a)(2), as modified by Code Section 856(h)(3). Natural persons and the following organizations are treated as Individuals for these purposes:

- A pension trust under Code Section 501(c)(17) (a trust that provides for payment of supplemental unemployment compensation);
- A private foundation under Code Section 509(a); and
- A trust permanently set aside or used for charitable purposes as described in Code Section 642(c) (charitable trusts for estate planning purposes).

In general, all other entities are not treated as Individuals.

The term "Beneficial Ownership" means the ownership of shares of stock of Brookfield Real Estate Income Trust Inc., directly or indirectly, by an entity or Individual for purposes of Code Section 542(a)(2), taking into account the constructive ownership rules of Code Section 544, as modified by Code Section 856(h)(1)(B). In general, this means that shares of stock of Brookfield Real Estate Income Trust Inc. held, directly or indirectly, by or for (i) a corporation, partnership, estate, or trust shall be considered as owned directly proportionately by its shareholders, partners or beneficiaries, and (ii) a natural person's spouse, brothers, sisters, ancestors and lineal descendants are treated as owned by that person. In addition, if any entity or Individual has an option to acquire shares of stock of Brookfield Real Estate Income Trust Inc. (or an option to acquire such an option or one of a series of such options), such shares of stock of Brookfield Real Estate Income Trust Inc. shall be treated as owned by such entity or Individual. Under these rules, each Subscriber will be treated as Beneficially Owning its proportionate share of the stock of Brookfield Real Estate Income Trust Inc.. Moreover, in the case of a Subscriber that is not an Individual, each beneficial owner of the Subscriber will be treated as Beneficially Owning its proportionate share of Brookfield Real Estate Income Trust Inc. stock held, directly or indirectly, by the Subscriber. As used in this Appendix B, the terms "Beneficial Owner," "Beneficially Owner" have correlative meanings.

A. SUBSCRIBER TAX STATUS

| Please confirm with a tax adviser the status and Beneficial Ownership of the Individual or entity making the investment in Brookfield Real Estate Income Trust Inc. and then check the category applicable to your status: |
|--|
| (a) \square The Subscriber is a natural person and either: |
| (i) ☐ none of the Subscriber's spouse, brothers or sisters (whether by whole or half-blood), ancestors or lineal descendant Beneficially Owns an interest in Brookfield Real Estate Income Trust Inc.; or |
| (ii) ☐ the name of each related person described in clause (i) are disclosed in Section (C) below. |
| (b) The Subscriber is a trust described in Code Section 401(a) and exempt from tax under Code Section 501(a) and either: |
| (i) □ no beneficiary holds an actuarial interest in the Subscriber in excess of 1%; or |
| (ii) □ a beneficiary holds an actuarial interest in the Subscriber of more than 1% but not in excess of 10%. |
| (c) The Subscriber is a private foundation within the meaning of Code Section 509(a). |
| (d) \Box The Subscriber is a trust described in Code Section 501(c)(17) (a trust providing for payment of supplemental unemployment compensation benefits). |
| (e) ☐ The Subscriber is a trust permanently set aside for a charitable or other purpose as described in Code Section 642(c). |
| (f) \Box The Subscriber is a public charity exempt from tax under Code Section 501(c)(3). |
| |

(g) The Subscriber is a governmental plan within the meaning of Code Section 414(d) and either:

(i) □ no beneficiary holds an actuarial interest in the Subscriber in excess of 1%; or

| | | (ii) | \square a beneficiary holds an actuarial interest in the Subscriber of more than 1% but not in excess of 10%. | | | | |
|---------------------|---|-----------------------|--|--|--|--|--|
| (h) | □Т | he Si | ubscriber is a voluntary employees' beneficiary association described in Code Section 501(c)(9) and either: | | | | |
| | | (i) | □ no beneficiary holds an interest in the Subscriber in excess of 1%; or | | | | |
| | | (ii) | \Box a beneficiary holds an interest in the Subscriber of more than 1% but not in excess of 10%. | | | | |
| | ☐ T | | ubscriber is a corporation, limited liability company or partnership not otherwise described in paragraphs (a) through (h) | | | | |
| | | (i) | ☐ no Individual Beneficially Owns more than 1% of the interests in the Subscriber; | | | | |
| | | (ii) | □ an Individual Beneficially Owns more than 1% of the interests in the Subscriber, but no Individual Beneficially Owns more than 10% of the interests in the Subscriber; or | | | | |
| | | (iii) | □ neither (i) nor (ii) applies, in which case the Subscriber must complete Section (B) below. | | | | |
| | | | ubscriber is a trust or estate not otherwise described in paragraphs (a) through (h) and the statements in clause (i), (ii), (iii) ed below apply: | | | | |
| | (i) | (a | each beneficiary of the Subscriber (a "Beneficiary") and, if the Subscriber is a grantor trust, each grantor of the Subscriber a "Grantor") is a natural person and at least two of such Beneficiaries and/or Grantors are related persons as described in aragraph (a)(i) of this Section (A); and either | | | | |
| | | | A) \square no Beneficiary or Grantor described in clause (i) is a related person within the meaning of paragraph (a)(i) of this ection (A) with respect to another Subscriber, Beneficiary of another Subscriber or Grantor of another Subscriber; or | | | | |
| | | | B) \square the names of all related persons described in clause (A), their status as Beneficiary or Grantor and such persons' elationship to the Subscriber, the Beneficiary and/or the Grantor (as applicable) are disclosed in Section C below; | | | | |
| | (ii) | | no Individual will Beneficially Own, directly or indirectly, more than 1% of the interests in the Subscriber; | | | | |
| | (iii) | | if an Individual will Beneficially Own, directly or indirectly, more than 1% of the interests in the Subscriber, no Individual will Beneficially Own, directly or indirectly, more than 10% of the interests in the Subscriber; or | | | | |
| | (iv) | | neither (i), (ii) nor (iii) applies, in which case the Subscriber must complete Section (B) below. | | | | |
| В. | SUI | BSC | RIBER TAX STATUS NOT DESCRIBED IN SECTION (A) ABOVE | | | | |
| Sub para Esta | scrib igrap ite In | er in hs (a com | iber is not classified in any of the categories set forth in paragraphs (a) through (j) of Section (A) above, or if the dicated that paragraph (i)(iii) or paragraph (j)(iv) of Section A applies to the Subscriber, the Subscriber must complete and (b) of this Section B below. In addition, the Subscriber must provide any additional information that Brookfield Real e Trust Inc. may request in order to ascertain whether more than 50% of the equity of Brookfield Real Estate Income Trust need by five or fewer Individuals. | | | | |
| | | (a) | Please describe the Subscriber's tax status under the Code (e.g., corporation, partnership, grantor trust): | | | | |
| If the Sub- | | | Please attach a statement describing the number of Beneficial Owners of the Subscriber, such Beneficial Owners' relative prests in the Subscriber, and the relationships, if any, among the Subscriber's beneficial owners. | | | | |
| | (c) To the best of the Subscriber's knowledge, as of the date hereof, are the Beneficial Owners of the Subscriber (disregarding the current investment) currently investors in Brookfield Real Estate Income Trust Inc. either directly indirectly? | | | | | | |
| | | | □ Yes □ No | | | | |
| | | suc | Yes," on the statement required pursuant to clause (b) above, please identify any such other investor and describe each h Beneficial Owners' cumulative interest in Brookfield Real Estate Income Trust Inc. (disregarding the current investment) ed on such direct and indirect ownership. | | | | |
| c. | AF | FILI | ATES | | | | |
| | | | To the best of the Subscriber's knowledge, is the Subscriber affiliated with or related to any other investor in Brookfield Real ate Income Trust Inc.? | | | | |
| | | | If "Yes," please identify any such other investor and provide details of the affiliation: | | | | |
| | | | | | | | |

Name Affiliation

Signature of Investor

X

Date

| Brookfi | eld Real Estate Income Trust Inc. | fransier/ke-registration request | | | | | | |
|--|--|--|---|--|--|----------------------------|--|--|
| | Name | | | | Affiliation | | | |
| | Name | | | | Affiliation | | | |
| | (If the space provided is insuffi | ficient, please refer to and attach a separate list in response.) | | | | | | |
| | the Subscriber certifies that no "disqua | lified perso | on" (as defi | ned in | on 401(a) and exempt from tax under Code Section Code Section 4975(e)(2), without regard to sub or indirectly, any interest in Brookfield Real Es | paragraph s | | |
| | ERTAIN CERTIFICATIONS RELATE rposes of this Part D: | ED TO DO | MESTIC | ALLY | CONTROLLED REIT STATUS: | | | |
| | | | | | of this Subscription Agreement, the portion of lirectly or indirectly through any one or more U | | | |
| (the "C United | Code"), and includes (i) any nonresident al | ien individ | ual, (ii) an y state (un | y corpo less, in | 4)(B) of the Internal Revenue Code of 1986, as oration or partnership that is not created or orga the case of a partnership, applicable Treasury Formstic Trust. | nized in the | | |
| "U.S. I | Individual" means an individual that is a | U.S. Person | n. | | | | | |
| United State (1 | States, (ii) a corporation or partnership cr | eated or or | ganized in | the Ur | 701(a)(30) and includes (i) a citizen or resident nited States or under the law of the United State by regulations), (iii) any estate other than a Fore | es or of any | | |
| Under | penalties of perjury, I certify that: (check | only one) | | | | | | |
| (a) 🗆 | The Subscriber is a Foreign Person. | | | | | | | |
| (b) 🗆 | The Subscriber is U.S. Person. If the S | ubscriber i | s a U.S. Pe | rson an | nd not a U.S. Individual, the Subscriber represer | its that: | | |
| | (i) the Subscriber's Foreign Ownership Percentage does not (and will not) exceed% (please provide your Foreign Ownership Percentage); and | | | | | | | |
| | (ii) the Subscriber will promptly notify Brookfield Real Estate Income Trust Inc. in writing upon any change in its F Ownership Percentage | | | | | | | |
| E. C ! | ERTAIN FIRPTA CERTIFICATIONS | (required | for U.S. ir | vestoi | rs): | | | |
| Under individ | penalties of perjury, I certify that the addrual) or office address (in the case of an er | ess shown tity) and th | on this Sul hat I am no | oscripti t a fore | ion Agreement is my home address (in the case eign person. | of an | | |
| F. SU | UBSTITUTE IRS FORM W-9 CERTIF | ICATION | S (require | d for U | J.S. investors): | | | |
| (1) The be issue (2) I a Internation IRS (3) I a (4) The Certific backup | ed to me); am not subject to backup withholding becaul Revenue Service (IRS) that I am subject has notified me that I am no longer subject am a U.S. citizen or other U.S. person (inche FATCA code(s) entered on this form (inche instructions. You must cross out in withholding because you have failed to result in the subject to the subje | to backup ect to back luding a ref f any) indi tem 2 above eport all in | am exempt withholdir up withhold esident alie- cating that we if you hat terest and | from bag as a ding; n) (define a ding) I am ende a divider | xempt from FATCA reporting is correct. en notified by the IRS that you are currently sub | ied by the ends, or (c) | | |
| | | | | χΓ | | | | |
| | | | | X | | | | |

Signature of Co-Investor or Custodian

(If applicable)

Date