

Enrolment Form

Brookfield Corporation Shareholder Dividend Reinvestment Plan

To: TSX Trust Company ("TSX Trust")

Please refer to the Plan Offering Circular before enrolling

I wish to enrol in Brookfield Corporation's Shareholder Dividend Reinvestment Plan (the "Plan") in order to reinvest all or 50% of cash dividends received on Brookfield Corporation's Class A Limited Voting Share (the "Shares").

Copies are available online at:

www.tsxtrust.com
or www.brookfield.com

By signing this form, I request to be enrolled in the Plan, acknowledge that I have read the Plan Offering Circular containing and describing the Plan and that my participation in the Plan will be subject to its terms and conditions. I also acknowledge that my enrolment in the Plan will remain in effect until I otherwise notify TSX Trust, in writing, in accordance with the Plan.

PLEASE PRINT CLEARLY - To avoid delays and ensure your enrolment, please complete all fields

First Shareholder Name:		Date of Birth (DD/MM/YYYY):	Occupation:
Second Shareholder Name (if applicable):		Date of Birth (DD/MM/YYYY):	Occupation:
Third Shareholder Name (if applicable):		Date of Birth (DD/MM/YYYY):	Occupation:
Address: (street number, str	eet name, appartment number and/or suit	te – P.O. boxes are not sufficient):	
Postal code or Zip:	Country	Daytime Telphone:	
S.I.N. / T.I.N.:	Shareholder Account Number Shareholder Email (opti		onal):
Your Shareholder Account Numb	er is located on your Brookfield Corporation divi	idend cheque.	
Shareholder Signature	Second Shareholder Signature	Third Shareholder Signature	Date (DD/MM/YY)

(if applicable)

TMX

(if applicable)

Instructions:

- IMPORTANT: If shares are held by a corporation, partnership, association, agency, estate or trust, this form must be signed by a duly authorized signing officer whose title must be provided. TSX Trust may require submission of satisfactory evidence of authority of the person executing the form.
- 2. If shares are jointly held, all shareholders must sign this form.
- 3. Participation in this plan is limited to Canadian and United States residents.
- 4. If your shares are held in more than one account, a separate enrolment form must be completed for each account that you wish to participate in the Plan.
- 5. Non-registered beneficial holders (i.e., shareholders who hold their shares through an intermediary, such as a financial institution, broker or other nominee) should consult with that Intermediary to determine the procedure for participation in the Plan.
- 6. For inquiries, please contact TSX Trust Company at 1-800-387-0825 or shareholderinquiries@tmx.com.
- 7. Once completed, please return the form to:

TSX Trust Company P.O. Box 4229 Station A Toronto, ON M5W 0G1 Fax: 888-488-1416

Note:

TSX Trust is soliciting this information in compliance with the Plan and Anti-Money Laundering and Anti-Terrorist Financing legislation. All information will be held in accordance with our Privacy Policy located at https://www.tsxtrust.com/privacy-policy

