Instructions for Donations of Stock to the Brain Injury Association (Effective 8/18/20)

Step 1: Complete Transfer

- If the shares are held at a securities firm or other brokerage account, instruct your broker to transfer the shares to the Brain Injury Association of America - Gift Clearing Account:

  SEI Private Trust Company  
  DTC Participant Number: 2663  
  Agent Internal Account Number: 20075-D  
  Interested Party A/C#: 882325601

  Instruct your broker to enter identifying information (i.e., your name and address, phone number, account number, broker information) into the "Text Comment" field of the DTC screen.

  If your broker requires information about the recipient, please provide the following contact information:

  Brain Injury Association of America, Inc.  
  C/O Susan H. Connors, President & CEO  
  3057 Nutley Street #805  
  Fairfax, VA 22031-1931  
  703-761-0750  
  development@biausa.org

- If certificates/shares are in your physical possession, you must send the certificates and a completed/signed Irrevocable Stock or Bond Power form (see instructions and blank below).

  The Brain Injury Association of America recommends these items be sent by a tracked mail system for security purposes (i.e. UPS, Federal Express, Registered Mail, etc.) to our broker at the following address:

  TIAA, FSB  
  Attn: Lisa Butler  
  211 North Broadway, Suite 1000  
  St. Louis, MO 63102  
  FBO: 882325601 BIAA-Gift Clearing

- Mutual Funds
  If you would like to transfer shares of mutual funds that are not DTC eligible, please contact BIAA’s TIAA Trust Administrator, Lisa Butler, at (314) 244-5073 or toll-free at (888) 842-9001 ext. 45-5073 for assistance. Her e-mail address is lisa.butler@tiaa.org. She will provide a mutual fund account number for delivery.

- Cash Balances
  Please contact BIAA’s TIAA Trust Administrator, Lisa Butler, prior to wiring funds or transferring funds via ACH. She may be reached at (314) 244-5073 or toll-free at (888) 842-9001 ext. 45-5073 for assistance. Her e-mail address is lisa.butler@tiaa.org.

(See next page)
Via Wire
Wells Fargo Bank, NA
420 Montgomery St.
San Francisco, CA 94104
ABA #: 121000248
A/C Name: SEI Private Trust ACF TIAA Client Dep
1 Freedom Valley Dr., Oaks, PA 19456
DDA #: 2020050840078
Acct FFC: 882325601 BIAA – Gift Clearing Acct

By ACH
Wells Fargo Bank, NA
San Francisco, CA
ABA #: 026012881
A/C Name: SEI Private Trust ACF TIAA Client Dep
DDA #: 2020050840078
FFC: 882325601 BIAA – Gift Clearing Acct

By Check
Payable To: Brain Injury Association of America
C/O TIAA, FSB
Attn: Lisa Butler
211 North Broadway, Suite 1000
St. Louis, MO 63102
FBO: 882325601 BIAA – Gift Clearing

Step 2: Notify the Brain Injury Association of your Gift

Please provide the following information so that the Brain Injury Association of America can acknowledge your generosity and send a tax receipt to you:

Donor Name(s)______________________________________________________________

Address_______________________________________________________________________

City_________________________ State__________ Zip Code__________

Telephone ___________________ E-mail________________________________________

Type of Stock______________________________ Number of Shares____________

Approximate Transfer Date______________ Your Brokerage Firm_____________________

You may mail this form to the address below, fax the form to 703-761-0755, send an e-mail with the details to development@biausa.org, or contact us by phone at 703-761-0750.

Mail to: Brain Injury Association of America, 3057 Nutley Street #805, Fairfax, VA 22031-1931
Sample Letter of Authorization

[Current Date]

To Whom It May Concern:

I am making a donation to the Brain Injury Association of America, Inc. (BIAA) Gift Clearing Account of _____ shares of ________________________ stock. Please transfer these shares to DTC# 2663, Account# 20075-D, FFC: 882325601.

Please enter my name and address, phone number, account number and/or broker information into the "Text Comment" field of the DTC screen so that the Brain Injury Association of America can identify these shares and acknowledge my gift to the organization.

The contacts for the association and its broker are as follows:

Susan H. Connors, President & CEO
Brain Injury Association of America, Inc.
3057 Nutley Street #805
Fairfax, VA 22031-1931
703-761-0750
development@biausa.org

Lisa Butler, Institutional Trust Administrator
TIAA, FSB
211 North Broadway, Suite 1000
St. Louis, MO 63102
(314) 244-5073
Toll Free (888) 842-9001, Ext. 45-5073
lisa.butler@tiaa.org

Thank you for your attention to this matter. Please call me with any questions or problems.

Sincerely,

[Signature]
[Name of donor]
[Donor phone number]
Irrevocable Stock or Bond Power <Instructions>

For Value Received, the undersigned does (do) hereby sell, assign and transfer to <Leave Blank>

*IF STOCK - COMPLETE THIS SECTION

<# of Shares> shares of the <common, preferred, etc.> stock of <Company Name>
represented by Certificates(s) No(s). <Certificate Number on Physical Certificate>
inclusive, standing in the name(s): <Name(s) on physical certificate (how certificate is currently registered>.

*IF BONDS - COMPLETE THIS SECTION

<Type: Muni, Corporate, etc.> bonds of <Company Name> in the principal amount of $ <Par Value> represented by Certificate(s) No(s). <Certificate Number on Physical Certificate>
inclusive, standing in the name(s): <Name(s) on physical certificate (how certificate is currently registered>.

The undersigned does (do) hereby irrevocably constitute and appoint SEI Private Trust Company Attorney to transfer the said stock or bond(s), as the case may be on the books of said Company, with full power of substitution in the premises.

Dated ___________________________  <Signature of Current Registered Owner>

<Signature of Current Registered Owner>

<Signature of Current Registered Owner>
Irrevocable Stock or Bond Power

For Value Received, the undersigned does (do) hereby sell, assign and transfer to ________________

*IF STOCK - COMPLETE THIS SECTION

_______ shares of the ______________________ stock of ______________________
represented by Certificates(s) No(s). ____________________________
inclusive, standing in the name(s): ________________________________
__________________.

*IF BONDS - COMPLETE THIS SECTION

_____________ bonds of ___________________________ in the principal amount of
$ _______ represented by Certificate(s) No(s). ____________________________
inclusive, standing in the name(s): ________________________________
__________________.

The undersigned does (do) hereby irrevocably constitute and appoint SEI Private Trust Company
Attorney to transfer the said stock or bond(s), as the case may be on the books of said Company, with
full power of substitution in the premises.

Dated ___________________________    ___________________________