Renaissance Charitable

Any donor. Any gift. Any charity.

ACCOUNT INFORMATION CHANGE

Please complete all information in this application form. This form may be completed by any Current Grant Advisor. Sign, and then email, fax, or mail.

Return completed forms to:

Email: capitalgroup@reninc.com, Fax: 877-736-4620
Renaissance Charitable Foundation Inc., 8888 Keystone Crossing, Suite 1222 Indianapolis, IN 46240

Donor-advised fund information

Renaissance Charitable Foundation DAF Name	
Renaissance Charitable Foundation DAF Number	

You may find your Renaissance Charitable Foundation DAF Number on the Account Details page when you log in to https://RCF.DonorFirstX.com .

Please tell us the name, SSN, and contact information for the Current Grant Advisor completing this form.

Title		First Name	
Middle Initial		Last Name	
Suffix		SSN	
Phone		Email	

What would you like to update? Check all that apply.

Questions or need assistance? Call 833-815-9484.

☐ Change Renaissance Charitable Foundation DAF Name.	See Section 1
☐ Name Change	See Section 2
☐ Update Contact Information and Communication Preference	See Section 3
☐ Add or Update an Active Grant Advisor(s)	See Section 4
☐ Add or Update Successor Grant Advisor(s) or Charitable Beneficiary(ies)	See Section 5
☐ Add, Remove, or Update your Financial Advisor Information	See Section 6

1. Change DAF name

To update the name of your DAF/Donor Advised Fund, enter the name below.

New Giving Fund Name	

Questions or need assistance? Call 833-815-9484.

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2. Name change

Please tell us the current name we have on record, and the new name you would like us to use. Please include a copy of the official name change document.*

Former name 1*

Title		First Name	
Middle Initial		Last Name	
Suffix			

New name 1

Title		First Name	
Middle Initial		Last Name	
Suffix			

Former name 2*

Title		First Name	
Middle Initial		Last Name	
Suffix			

New name 2

Title		First Name	
Middle Initial		Last Name	
Suffix			

Former name 3*

Title		First Name	
Middle Initial		Last Name	
Suffix			

New name 3

Title		First Name	
Middle Initial		Last Name	
Suffix			

NOTE: In order for Renaissance Charitable Foundation to accept a name change, we must receive a copy of the official name change document. Please include the official name change document along with the completed form.
*Former Name (Name as it currently appears in RCF records)

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3. Update contact information and communication preference

Contact update 1: for whom are you updating information?

First Name		Middle Initial	
Last Name			

Indicate what type of information you are changing and then complete the relevant items below:

☐ Mailing Address ☐ Phone Number ☐ Email Address

Address		City/State/Zip	
Country of Address		Country of Residence	
Country of Citizenship		Phone Number	
Email			

Contact update 2: for whom are you updating information?

First Name		Middle Initial	
Last Name			

Indicate what type of information you are changing and then complete the relevant items below:

☐ Mailing Address ☐ Phone Number ☐ Email Address

Address		City/State/Zip	
Country of Address		Country of Residence	
Country of Citizenship		Phone Number	
Email			

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4. Add or update an active grant advisor(s)

An Active Grant Advisor (unless also named as a Successor Grant Advisor) will not retain rights and/or access to the DAF upon the original donor's death. They will retain grantee rights/access to the account only while the original donor(s) are living and their access may be removed at any point.

4A. Active grant advisor(s)

Check one:

☐ Add ☐ Remove ☐ Update

Title		SSN	
Relationship to Original Donor		Name of Active Grant Advisor #1	
DOB		Street Address	
City/State/Zip		Country of Address	
Country of Residence		Country of Citizenship	
Phone Number		Email*	

Check one:

☐ Add ☐ Remove ☐ Update

Title		SSN	
Relationship to Original Donor		Name of Active Grant Advisor #1	
DOB		Street Address	
City/State/Zip		Country of Address	
Country of Residence		Country of Citizenship	
Phone Number		Email*	

*Email is required to gain access to the online donor portal.

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5. Add or update successor grant advisor(s) or charitable beneficiary(ies)

Your succession plan specifies how your DAF assets will be handled upon your death. Please copy this page to add or update additional successors.

5A. Successor grant advisor(s)

Check One:

☐ Add ☐ Remove ☐ Update

Title		SSN	
Relationship to Original Donor		Name of Successor Grant Advisor #1	
DOB		Street Address	
City/State/Zip		Country of Address	
Country of Residence		Country of Citizenship	
Phone number		Email*	

Check One:

☐ Add ☐ Remove ☐ Update

Title		SSN	
Relationship to Original Donor		Name of Successor Grant Advisor #2	
DOB		Street Address	
City/State/Zip		Country of Address	
Country of Residence		Country of Citizenship	
Phone Number		Email*	

*Email is required to gain access to the online donor portal.

Successor Grant Advisors must be 18 or older to provide grant or investment recommendations. If a DAF succession plan includes successor Grant Advisors, and no successor has reached the age of 18 at the time of the death, incapacitation or resignation of the last surviving Grant Advisor, RCF will proceed as follows:

- If no successor is at least age 15, RCF will make charitable grants from the DAF until the oldest successor Grant Advisor reaches the age of 18.
- If at least one successor is age 15 or older, RCF will maintain the DAF until the oldest successor Grant Advisor reaches the age of 18.

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5. Add or update successor grant advisor(s) or charitable beneficiary(ies) - continued

5B. Recommend updates to charitable beneficiary(ies)

If an Annual Grant is Recommended, the annual grant to Charitable Organization 2 shall be either _____% of the Annual Value, or

$_____

Check One:

☐ Add ☐ Remove ☐ Update

Name of Charitable Beneficiary #1		EIN	
Mailing Address		Daytime Phone Number	
City/State/Zip		Email	
Purpose *If left blank, the default* purpose will be "Use as Needed."			

If an Annual Grant is Recommended, the annual grant to Charitable Organization 2 shall be either _____% of the Annual Value, or

$_____

Check One:

☐ Add ☐ Remove ☐ Update

Name of Charitable Beneficiary #1		EIN	
Mailing Address		Daytime Phone Number	
City/State/Zip		Email	
Purpose *If left blank, the default* purpose will be "Use as Needed."			

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6. Add, remove, or update your financial advisor information

By providing RCF with the name of your current Financial Advisor, you are authorizing RCF to share with such Financial Advisor, any information relating to the Renaissance Charitable Foundation. You may use this section to grant a Financial Advisor access to your DAF, or remove an Advisor who currently has access to your DAF

Financial advisor 1

☐ Add Financial Advisor ☐ Remove Financial Advisor ☐ Update Financial Advisor Information

First Name		Last Name	
Company Name		Company Address	
City/State/Zip		Phone	
Email			

Financial advisor 2

☐ Add Financial Advisor ☐ Remove Financial Advisor ☐ Update Financial Advisor Information

First Name		Last Name	
Company Name		Company Address	
City/State/Zip		Phone	
Email			

Signature to authorize updates

I acknowledge that I have read the Renaissance Charitable Foundation Program Guidelines: Program Circular and agree to the terms set forth there in. All recommendations are subject to the full and exclusive legal authority, control, and discretion of Renaissance Charitable Foundation Inc.

I hereby certify that, to the best of my knowledge, all information presented in connection with this form is accurate, and I will promptly notify Renaissance Charitable Foundation in writing of any changes.

Signature		Date	
Printed Name			

Return completed forms to:

Email: captialgroup@reninc.com, Fax: 877-736-4620
Renaissance Charitable Foundation Inc., 8888 Keystone Crossing, Suite 1222 Indianapolis, IN 46240

Questions or Need Assistance? Please call Renaissance Charitable Foundation at 833-815-9484

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