

Renaissance

Client Profile

The information on this form will be used determine how the concept of Social Capital and how specific Social Capital tools might be used to help your client achieve their objectives; and how best Renaissance can assist you, your client, and their other advisors with the implementation of such tools. The information may be used to prepare a preliminary illustration. Any illustration provided will be designed to educate the client and their other advisors, but will not represent a formal design recommendation, nor will it represent any particular product or investment. Renaissance does not provide financial, legal or tax advice to individuals. In order to implement any strategy, the client must retain competent counsel, including an attorney, to determine the final plan design, and to proceed with implementation. Please answer all questions as completely as possible. All information will be held in strict confidence between Renaissance and the advisor providing this information.

ADVISOR INFORMATION

Advisor name: _____ Advisor phone: _____
Advisor firm: _____ Advisor fax: _____
Advisor address: _____ Advisor e-mail: _____

CLIENT INFORMATION

Client name: _____ Age / D.O.B.: _____
Spouse name: _____ Age / D.O.B.: _____
Approximate total net worth: \$ _____ Income (AGI): \$ _____

Approximate current annual cash gifts to charity: \$ _____
Overall health: _____

Other family members/heirs to be considered in the planning process: _____

Describe current estate plan: _____

Describe your relationship with the prospect: *(Client/ prospect/referral?, type of prior business dealings, strength and duration of relationship.)* _____

Describe the assets which are targeted for current planning, and the other significant components of the client's estate: *(Optional - Attach a personal balance sheet or financial statement.)*

Description of Asset	Current Value	Cost Basis	Year Acquired	Loans / Mortgage	Yield % Growth%

Are any of the assets affected by restrictions, and were any acquired through anything other than a simple purchase (ie. Exercise of option, gift, inheritance)? If yes, explain: _____

Describe and rank the client's financial objectives. Please be as specific as possible. Their objectives may include, but may not be limited to the following common objectives:

(Please number by order of importance with one (1) being most important.)

- | | | |
|--|--|--|
| <input type="checkbox"/> Increase current income | <input type="checkbox"/> Diversify assets | <input type="checkbox"/> Increase charitable gifts |
| <input type="checkbox"/> Increase future income | <input type="checkbox"/> Increase benefit to heirs | <input type="checkbox"/> Self direct personal social capital |
| <input type="checkbox"/> Avoid capital gain tax | <input type="checkbox"/> Reduce / avoid estate tax | <input type="checkbox"/> Protect assets |
| <input type="checkbox"/> Other: _____ | | |

Describe the client's primary needs and goals: _____

PROJECTED FUTURE INVESTMENT PORTFOLIO ASSUMPTIONS *(the new portfolio)*

Projected Long Term Total Return %
(We recommend using a conservative estimate.)

Please describe the future investment portfolio. What type of investment vehicles are anticipated? Income, growth or balanced mutual funds, individual stocks, bonds, modified fixed or variable annuities, other: *(please specify)*

Wealth Replacement Insurance Information *(if applicable)*

(check one) Single Life Survivorship

Death Benefit

Annual Premium

Number of Premiums

If known, describe the client's specific goals for what they want to provide or do for their heirs: _____

Describe the client's community or charitable interests / involvement / objectives: _____

If known, describe the client's specific goals for what they want to accomplish for charity or their community: _____

Current Testamentary Bequests: _____ Important Memberships: _____

ADDITIONAL COMMENTS, QUESTIONS, OR REQUESTS