Irrevocable Bequest

Pledge Letter Agreement

On \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(date) I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name), established/amended my Will/Revocable Living Trust. The Will/Trust provides that at my death

AXYS (Association for X and Y Chromosome Variations) is to receive a bequest of

$\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (specific amount) or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_% of my estate.

This sum, when paid from my estate, shall be designated for unrestricted use (if restricted use is identified, state the fund and purpose of the bequest gift). If multiple purposes are identified, specify the amount for each program, service or fund.

Specifically, my Will/Trust includes the following terms: (Insert verbatim language appearing in the Will/Trust that sets forth the terms of the bequest to AXYS, OR make reference to copies of

the Will/Trust that shall be attached to this Letter of Agreement.) I will not create any new Will/Trust, or codicils that omits or changes the language cited. Heretofore, I have retained the right to change my Will/Trust at any time, and for any purpose. However, to enable AXYS to formally document my intended philanthropic support for the benefit of the agency through my estate, I am establishing this irrevocable bequest pledge.

I acknowledge that, once signed by all representatives identified below, AXYS may document my Irrevocable Bequest Pledge as a contribution receivable on its ledger, which is subject to external audit. Moreover, I acknowledge that the agency’s promise to use the amount pledged for the purposes specified, which shall constitute full and adequate consideration for this pledge.

This pledge may also be satisfied in part or in full by payments made by me at my discretion during my lifetime and so designated by me in writing to AXYS at the time of said gift(s). Any amounts paid by me from the date of this Agreement to the date of my death which are so designated as pledge payments applicable to this Irrevocable Bequest Pledge shall reduce the amount my estate is obligated to pay under the terms of this Agreement.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Donor Name] Date

Acknowledged and accepted on behalf of AXYS by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AXYS Executive Director Date