

STATE OF SOUTH CAROLINA)
)
 COUNTY OF:)
)
 IN THE MATTER OF:)
)
 (Decedent))

IN THE PROBATE COURT

INVENTORY AND APPRAISEMENT

ORIGINAL

AMENDED #

(must restate the unchanged information from the original Inventory)

CASE NUMBER:

File the original Inventory and Appraisalment with the Probate Court within ninety (90) days following the fiduciary appointment.
 A copy shall be sent to each interested person who has demanded it. A Proof of Delivery must be filed with the Court. The gross fair market value of all probate assets, regardless of location (whether in this state or elsewhere), should be listed as of the date of death. Continue on additional sheets if necessary. An Amended Inventory should be utilized for correcting, adjusting or adding to an original inventory, and *must restate the unchanged information from the original Inventory*. A qualified and disinterested appraiser may be employed to ascertain the value of any asset. If an appraiser is employed, his/her name and address must be indicated with the item or items he/she appraised.

RECAPITULATION

| | Non-Probate <u>(OPTIONAL)</u> | Probate |
|--|----------------------------------|-----------------|
| Schedule A - Real Estate | | \$ _____ |
| Schedule B - Stocks and Bonds | | \$ _____ |
| Schedule C - Notes Due Decedent and Cash | | \$ _____ |
| Schedule D - Insurance on Decedent's Life - Part 1 - Payable to Estate | | \$ _____ |
| Part 2 - Payable to Beneficiary..... | \$ _____ | |
| Schedule E - Jointly Owned Property | \$ _____ | |
| Schedule F - Other Miscellaneous Assets Payable to Estate..... | | \$ _____ |
| Schedule G - Transfers During Decedent's Life | \$ _____ | \$ _____ |
| Schedule H - Powers of Appointment..... | \$ _____ | \$ _____ |
| Schedule I - Annuities and Retirement Accounts | \$ _____ | \$ _____ |
| GROSS VALUE OF PROBATE ESTATE | | \$ _____ |

The undersigned, being sworn, states: That the following schedules contain a complete and accurate inventory and appraisalment of all probate real and personal property of this estate so far as the undersigned is informed; that he/she has estimated and/or appraised all listed property at its fair market value, according to the best of his/her knowledge and ability.

SWORN to before me this _____ day of _____, 20 _____

Personal Representative

Signature: _____
 Print Name: _____
 Address: _____

Notary Public for South Carolina
 My Commission Expires: _____

Telephone (Work): _____
 (Home): _____
 (Cell): _____
 (Email): _____

Co-Personal Representative

Signature (if applicable) _____
 Name: _____
 Address: _____

Attorney: _____
 Address: _____
 Telephone: _____
 Email: _____

Telephone (Work): _____
 Telephone (Home): _____
 (Cell): _____
 (Email): _____

WHEN COMPLETING THE FOLLOWING SCHEDULES LIST ALL PROBATE ASSETS, REGARDLESS OF LOCATION. ALL OUT-OF-STATE PROBATE ASSETS MUST BE DISCLOSED. NON-PROBATE PROPERTY NEED NOT BE DISCLOSED.

SCHEDULE A – REAL ESTATE. List below any real estate in Decedent’s name alone or tenants in common (not as joint with right of survivorship or tenants in the entirety). Describe each property by listing its full address, tax map number, deed book and page, and description consistently (for example: house, lot, buildings, acreage). Also list oil/mineral rights and time shares if it is real property. If none, so state. If the property is encumbered, list the full fair market value of the property here and the encumbrance on the Encumbrance Schedule below. (For jointly owned property **with right of survivorship**, you may list in Schedule E.)

| Item No. | Description | % owned by Decedent | Fair Market Value | Value of Decedent's interest |
|----------|-----------------|---------------------|-------------------|------------------------------|
| 1. | Tax Map Number: | | | |
| 2. | Tax Map Number: | | | |
| 3. | Tax Map Number: | | | |

TOTAL SCHEDULE A \$ _____
(also enter under recapitulation, page 1)

SCHEDULE B – STOCKS AND BONDS. List below all stocks and bonds in the Decedent’s name alone or tenants in common (not as joint with right of survivorship). Identify each type of security and the number of shares. If none, so state. (For jointly owned property **with right of survivorship**, you may list in Schedule E.)

| Item No. | Description | Face Value | Appraised Value |
|----------|-------------|------------|-----------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |

TOTAL SCHEDULE B \$ _____
(also enter under recapitulation, page 1)

SCHEDULE C – CASH, BANK ACCOUNTS, NOTES RECEIVABLES. List all bank accounts owned by Decedent alone or as tenants in common (checking, savings, CDs, money market, brokerage, employment bonus, cash award, final paycheck, etc.), cash on hand, notes payable to Decedent, and survival action proceeds. If none, so state. List each separate account type and institution and last two digits of the account. (For jointly owned property **with right of survivorship**, you may list in Schedule E.)

| Item No. | Description | Value |
|----------|-------------|-------|
| 1. | | |
| 2. | | |
| 3. | | |

TOTAL SCHEDULE C \$ _____
(also enter under recapitulation, page 1)

SCHEDULE D - LIFE INSURANCE (If none, so state.)

Part 1 - Life Insurance – List the insurance on the life of the Decedent which is payable to the Estate.

| Item No. | Description | Value |
|----------|-------------|-------|
| 1. | | |
| 2. | | |
| 3. | | |

TOTAL PART 1 \$ _____
(also enter under recapitulation, page 1)

(If more space is required, insert additional sheets of same size.)

Part 2 (OPTIONAL) - You may list here the insurance on the life of the Decedent which is payable to beneficiaries.

| Item No. | Description | Beneficiary | Value |
|----------|-------------|-------------|-------|
| 1. | | | |
| 2. | | | |
| 3. | | | |

TOTAL PART 2 \$ _____
(also enter under recapitulation, page 1)

SCHEDULE E - (OPTIONAL) JOINT WITH RIGHT OF SURVIVORSHIP– You may list below any non-probate property jointly owned by the Decedent with another **with right of survivorship**. List each separate account type and institution and the last two digits of each account.

| Item No. | Description | Joint Owner(s) | Percentage Includible | Value of Decedent's Interest |
|----------|-------------|----------------|-----------------------|------------------------------|
| 1. | | | | |
| 2. | | | | |
| 3. | | | | |

\$ _____

TOTAL SCHEDULE E \$ _____
(also enter under recapitulation, page 1)

SCHEDULE F – OTHER MISCELLANEOUS ASSETS PAYABLE TO ESTATE. List below any tangible personal property, including household goods & furnishings, vehicles, boats/motors/trailers, mobile homes that are not de-titled (Include year/make/model/VIN, if applicable), airplanes, equipment, interest in a partnership or unincorporated business, articles or collections having either artistic or intrinsic value, including coins, guns, artwork, jewelry, etc., and any other miscellaneous probate items not listed elsewhere, including any digital assets. If none, so state. (For jointly owned tangible personal property **with right of survivorship**, you may list in Schedule E.)

| Item No. | Description | Value |
|----------|-------------|-------|
| 1. | | |
| 2. | | |
| 3. | | |
| 4. | | |
| 5. | | |

TOTAL SCHEDULE F \$ _____
(also enter under recapitulation, page 1)

NOTE: FOR SCHEDULES G, H, AND I. LIST VALUES ONLY IF PAYABLE TO ESTATE.

SCHEDULE G – TRANSFERS DURING DECEDENT'S LIFE. List any transfers intended to take effect at death if such property is payable to the Estate. You may list in the "Optional" section below any non-probate transfers intended to take effect at death not payable to the Estate, including United States Government Bonds "Payable on Death," accounts which are "Transfer on Death," a trust created by Decedent in which income for life was retained by the Decedent, power to revoke or other incidents of ownership retained by the Decedent, lifetime transfers of real property in which Decedent retained life estate, etc. If none, so state.

List date and type of transfer and list total amount **payable to estate**:

| | | |
|----|--|--|
| 1. | | |
| 2. | | |

(OPTIONAL) describe and list amounts **not** payable to estate:

| | | |
|----|--|--|
| 1. | | |
| 2. | | |

TOTAL SCHEDULE G \$ _____
(also enter under recapitulation, page 1)

(If more space is required, insert additional sheets of same size.)

SCHEDULE H – POWERS OF APPOINTMENT. List property, both real and personal, over which Decedent possessed a Power of Appointment whether testamentary or otherwise, if such property is payable to the Estate. You may list property subject to such power if it was not payable to the Estate in the "Optional" section below. If none, so state.

Describe and list total amount **payable to estate**:

| | | |
|----|--|--|
| 1. | | |
| 2. | | |

(OPTIONAL) describe and list amounts **not** payable to estate:

| | | |
|----|--|--|
| 1. | | |
| 2. | | |

TOTAL SCHEDULE H \$ _____
(also enter under recapitulation, page 1)

SCHEDULE I – ANNUITIES AND RETIREMENT ACCOUNTS (IRA's, 401(K), etc.). List any annuities or retirement accounts owned by the Decedent and payable to the Estate. You may list in the "Optional" section below any accounts payable to a beneficiary which is not payable to the Estate.

Describe and list total amount **payable to estate**:

| | | |
|----|--|--|
| 1. | | |
| 2. | | |
| 3. | | |

(OPTIONAL) describe and list amounts **not** payable to estate:

| | | |
|----|--|--|
| 1. | | |
| 2. | | |
| 3. | | |

TOTAL SCHEDULE I \$ _____
(also enter under recapitulation, page 1)

ENCUMBRANCES (e.g., mortgages, liens, judgments, etc., **but not general debts of the estate**). List debts of the Decedent secured by assets on the above Schedules and describe the debt and the specific asset encumbered.

| Item No. | Schedule & Item Number Encumbered Thereby | Description & Amount |
|----------|---|----------------------|
| 1. | | |
| 2. | | |
| 3. | | |

TOTAL ENCUMBRANCES \$ _____

(If more space is required, insert additional sheets of same size.)