STATE OF SOUTH CAROLINA)
)
COUNTY OF GREENVILLE)
)
)
)
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 Appraisement 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. A Supplementary, Amended, or Corrected 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(s) he/she appraised.

RECAPITULATION

	Non-Probate (**OPTIONAL**)	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 appraisement 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_____

_____
Notary Public for South Carolina
My Commission Expires: _____

Personal Representative
Signature: _____
Print Name: _____
Address: _____
_____
Telephone (Work): _____
(Home): _____
(Cell): _____
Email: _____

Attorney: _____
Address: _____
_____
Telephone: _____
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	Full Fair Market Value of Property	% owned by Decedent	Value of Decedent's interest
1. Tax Map Number:			
2. Tax Map Number:			
3. Tax Map Number:			

☐ Check here if any of the above properties are being rented & list rented income in Schedule C

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 SCHEDULE D 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 SCHEDULE D 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 the 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 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 $_____

(also enter under recapitulation, page 1)

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