## TENNESSEE DEPARTMENT OF REVENUE INHERITANCE TAX RETURN SCHEDULE JOINTLY OWNED PROPERTY

## SCHEDULE E INH 301



| ESTATE OF | DECEDENT'S SOCIAL SECURITY NUMBER |  |  |
|-----------|-----------------------------------|--|--|
|           |                                   |  |  |
|           |                                   |  |  |

| PART I Qualified joint interests - Interests held by the decedent and his or her spouse as the only joint tenants |             |                             |                    |                           |  |  |  |  |
|---|-------------|-----------------------------|--------------------|---------------------------|--|--|--|--|
| Item No.  | Description | Alternate<br>Valuation Date | Alternate<br>Value | Value at<br>Date of Death |  |  |  |  |
|   |             |                             |                    |                           |  |  |  |  |
|   |             |                             |                    |                           |  |  |  |  |
|   |             |                             |                    |                           |  |  |  |  |
|   |             |                             |                    |                           |  |  |  |  |
| 1. (a) Total  |             |                             |                    |                           |  |  |  |  |
| 1. (b) Amounts included in gross estate (1/2 of line 1(a) )   |             |                             |                    |                           |  |  |  |  |
| (-)   |             |                             |                    |                           |  |  |  |  |

| PART II All Other Joint Interests  |                                 |   |                          |                                  |   |  |  |  |  |
|--|---------------------------------|---|--------------------------|----------------------------------|---|--|--|--|--|
| (a) State the name and address of each surviving co-tenant. If there are more than (3) surviving co-tenants list the additional co-tenants on an attached sheet. |                                 |   |                          |                                  |   |  |  |  |  |
| Name Add   |                                 | ddress (Number, Street, City, State & Zip Code)                               |                          |                                  |   |  |  |  |  |
|  |                                 |   |                          |                                  |   |  |  |  |  |
|  |                                 |   |                          |                                  |   |  |  |  |  |
| C  |                                 |   |                          |                                  |   |  |  |  |  |
| Item No.   | Enter Letter<br>of<br>Co-tenant | Description (Include Alternate valuation date if any)                         | Percentage<br>Includible | Includible<br>alternate<br>value | Includible<br>value at<br>Date of Death |  |  |  |  |
|  |                                 |   |                          |                                  |   |  |  |  |  |
|  |                                 |   |                          |                                  |   |  |  |  |  |
|  |                                 |   |                          |                                  |   |  |  |  |  |
| 2. (1  | b) Total                        |   |                          |                                  |   |  |  |  |  |
| 2. (c) Total (From any attached sheets)  |                                 |   |                          |                                  |   |  |  |  |  |
| 3. T   | otal includible                 | joint interests (Add Lines, 1(b), and 2(b), and 2<br>also on Page 3 Line 5-E) | 2(c),                    |                                  |   |  |  |  |  |
|  |                                 |   |                          |                                  |   |  |  |  |  |

RV-F1400501 INTERNET (1-98)