

Estate of: \_\_\_\_\_ Date of Death: \_\_\_\_\_

- Jointly owned property must be disclosed on Schedule E.

1. Did the decedent, at the time of death, own any articles of artistic or collectible value in excess of \$3,000 or any collections whose artistic or collectible value combined at date of death exceeded \$3,000? If "Yes," full details must be submitted on this schedule ..... Yes  No
2. Has the decedent's estate, spouse, or any other person, received (or will receive) any bonus or award as a result of the decedent's employment or death? If "Yes," full details must be submitted on this schedule ..... Yes  No
3. Did the decedent at the time of death have, or have access to, a safe deposit box? .... Yes  No   
If "Yes," state location, and if held jointly by decedent and another, state name and relationship of joint depositor \_\_\_\_\_  
If any of the contents of the safe deposit box are omitted from the schedules in this return, explain fully why omitted \_\_\_\_\_
4. Did the decedent, at the time of death, own any other miscellaneous property not reportable under any other schedule? If "Yes," full details must be submitted on this schedule ..... Yes  No

Item Number	Description	Alternate Valuation Date	Alternate Value	Value at Date of Death

Total. Also enter on IA 706, page 2, line 31, Other Miscellaneous Property.....\$ \_\_\_\_\_

If more space is needed, include additional sheets.