Form **433-B (OIC)** (March 2011)

Department of the Treasury — Internal Revenue Service

Collection Information Statement for Businesses

Complete this form if your business is a

- Corporation
- Partnership
- Limited Liability Company (LLC) classified as a corporation
- Other multi-owner/multi-member LLC
- Single member LLC

If your business is a sole proprietorship (filing Schedule C), do not use this form. Instead, complete Form 433-A (OIC) Collection Information Statement for Wage Earners and Self-Employed Individuals.

Include attachments if additional space is needed to respond completely to any question.

Section 1		Busii	ness Information			
Business Name				Employer Identification Number		
Business address (street, city, state, zip code)				County of Business Location		
				Description of Business and dba or "Trade Name"		
Primary Phone	Secondary	Phone	Mailing address (if d	I ifferent from above or Post Office Box number)		
() _	()	-				
Business website address						
			Doos the business u	use a payroll service provider?		
			Yes No	ise a payroli service provider:		
Federal Contractor	Total Numb	er of Employees	If yes, list provider n	If yes, list provider name and address (Street, City, State, ZIP Code)		
☐ Yes ☐ No						
Frequency of tax deposits	Average gross monthly payroll \$					
Provide information about all pa business. Include attachments i			najor shareholders (fo	reign and domestic), etc., associated with the		
Last Name		First Name		Title		
Percent of Ownership Social Security Number		urity Number	Home address (Street	et, City, State, ZIP Code)		
Primary Phone	Secondary	Phone				
() _	()	-				
Last Name	,	First Name		Title		
Percent of Ownership	Social Sec	urity Number	Home address (Street	et, City, State, ZIP Code)		
	_					
Primary Phone	Secondary	Phone				
() _	()	-		I		
Last Name		First Name		Title		
Percent of Ownership	Social Seci	urity Number	Home address (Street	et, City, State, ZIP Code)		
Primary Phone	Secondary	Phone	\dashv			
()	()					
		-				

Section 2

Business Asset Information

If any total below results in a negative number, enter "0".

Enter the total amount available for each of the following (if additional space is needed, please include attachments). Gather the **most current** statement from banks, lenders on loans, mortgages (including second mortgages), monthly payments, loan balances, and accountant's depreciation schedules, if applicable. Also, include make/model/year/mileage of vehicles and current value of business assets. To estimate the current value, you may consult resources like Kelley Blue Book (www.kbb.com), NADA (www.nada.com), local real estate postings of properties similar to yours, and any other websites or publications that show what the business assets would be worth if you were to sell them.

Bank Account: Checking Savings Money M	arket Online Account Stored Value Card		
Bank Name	Account Number		
		(1a) \$	3
Bank Account: Checking Savings Money M	arket Online Account Stored Value Card		
Bank Name	Account Number		
		(1b) \$	3
Bank Account: Checking Savings Money M	arket Online Account Stored Value Card		
Bank Name	Account Number		
		(1c) \$	3
Total value of bank accounts from attachment		(1d) \$	}
	Add lines (1a) through (1d) =	(1) \$	3
Investment Account: Stocks Bonds Other			
Name of Financial Institution	Account Number		
Current Market Value	Less Loan Balance		
\$ X.8 = \$	=	(2a) \$	3
Investment Account: Stocks Bonds Other			
Name of Financial Institution	Account Number		
Current Market Value	Less Loan Balance		
\$ X .8 = \$	=	(2b) \$	3
Total of investment accounts from attachment. [current market value X.8 less loan balance(s)]			3
	Add lines (2a) through (2c) =	(2) \$	3
Notes receivable - Do you have notes receivable?			
If yes, attach current listing which includes name and amount of note(s) receivable.			
	Total notes receivable from attached listing =	(3) \$	3

Section 2		Business Ass	set Informati	on - (Continued)		
If the business owns more properties	s, vehicles, o	or equipment than	shown in this fo	rm, please list on an attachme	nt.	
Real Estate (Buildings, Lots, Commercial	al Property, e	tc.) If any total bel	low results in a	negative number, enter "0".		
Property Address (Street Address, City, State, ZIP Code)		Property Desc	Property Description			
			County and Country			
Current Market Value		Less L	∟oan Balance <i>(M</i>	ortgages, etc.)		
\$X.8 = \$		\$		Total Value of Real Estate =	(4a) \$	
Property Address (Street Address, City, State, ZIP Code)		Property Description				
			County and Co	ountry		
Commant Manket Value		1 1	an Delenes (4)	(. d d.)	-	
Current Market Value			₋oan Balance (M			
\$X.8 = \$				Total Value of Real Estate =	(10) +	
Total value of property(s) listed from	attachment	[current market va	lue X .8 less ar	y loan balance(s)]	(4c) \$	
			A	add lines (4a) through (4c) =	(4) \$	ı
Business Vehicles (cars, boats, moto	rcycles, trailer	rs, etc.). If additiona	al space is need	ed, list on an attachment.	_	
Vehicle Make	Year	Model		Mileage or Use Hours		
☐ Lease Monthly Lease/Loan	Amount				-	
Lease Monthly Lease/Loan	Tinodin					
Current Market Value		Less Loan E				
\$ X.8 = \$		\$		Il value of vehicle (if the vehicle ased, enter 0 as the total value) =	(5a) \$	i i
Vehicle Make	Year	Model		Mileage or Use Hours		
l ease Monthly Lease/Loan	Amount				-	
Lease Monthly Lease/Loan Amount Loan \$						
Current Market Value Less Loan Balance						
\$ X .8 = \$ \$ Total value of vehicle (if the vehicle is leased, enter 0 as the total value) =			(5b) \$	·		
Vehicle Make	Year	Model		Mileage or Use Hours		
Lease Monthly Lease/Loan	Amount				+	
Loan \$						
Current Market Value Less Loan Balance						
\$ X.8 = \$		\$		I value of vehicle (if the vehicle ased, enter 0 as the total value) =	(5c) \$	
Total value of vehicles listed from att	achment [cu	ırrent market value	X .8 less any l	oan balance(s)]	(5d) \$	
			A	dd lines (5a) through (5d) =	(5) \$	i
Other Business Equipment						
Current Market Value		Less Loan E	Balance			
\$ X .8 = \$		\$	le	Total value of equipment (if ased, enter 0 as the total value) =	(6a) \$	6
Total value of equipment listed from	attachment	[current market va	lue X .8 less an	y loan balance(s)]	(6b) \$	
IRS allowed exemption -			(6c) \$	4,120		
				of all business equipment = is less than zero, enter zero.	(6) \$	-
			ount on lines wi	th a letter beside the number. er the amount in Box 1 =	+	1 Total Available Assets

Section 3

Business Income Information

Enter the **average** gross monthly income of your business. To determine your gross monthly income use the most recent 6-12 months documentation of commissions, invoices, gross receipts from sales/services, etc.; most recent 6-12 months earnings statements, etc., from every other source of income (such as rental income, interest and dividends, or subsidies); or you may use a most recent 6-12 months Profit and Loss (P&L) to provide the information of income and expenses.

Note: If you provide a current profit and loss statement for the information below, enter the total gross monthly income in Box 2 below. Do not complete lines (7) - (11).

	Box 2 Total Business Income
Other income (Specify on attachment)	(11) \$
Dividends	(10) \$
Interest income	(9) \$
Gross rental income	(8) \$
Gross receipts	(7) \$

Add lines (7) through (11) and enter the amount in Box 2 =

Section 4

Business Expense Information

Enter the average gross monthly expenses for your business using your most recent 6-12 months statements, bills, receipts, or other documents showing monthly recurring expenses.

Note: If you provide a current profit and loss statement for the information below, enter the total monthly expenses in Box 3 below. Do not complete lines (12) - (21).

Materials purchased (e.g., items directly related to the production of a product or service)	(12) \$
Inventory purchased (e.g., goods bought for resale)	(13) \$
Gross wages and salaries	(14) \$
Rent	(15) \$
Supplies (items used to conduct business and used up within one year, e.g., books, office supplies, professional equipment, etc.)	(16) \$
Utilities/telephones	(17) \$
Vehicle costs (gas, oil, repairs, maintenance)	(18) \$
Insurance (other than life)	(19) \$
Taxes (e.g., real estate, state, and local income tax, excise franchise, occupational, personal property, sales and employer's portion of employment taxes, etc.)	(20) \$
Other expenses (e.g., secured debt payments. Specify on attachment. Do not include credit card payments)	(21) \$
	Box 3 Total Business Expenses
Add lines (12) through (21) and enter the amount in Box 3 =	\$
Subtract Box 3 from Box 2 and enter the amount in Box 4 = If number is less than zero, enter zero.	Box 4 Remaining Monthly Income \$

Section 5

Calculate Your Minimum Offer Amount

The next steps calculate your minimum offer amount. The amount of time you take to pay your offer in full will affect your minimum offer amount. Paying over a shorter period of time will result in a smaller minimum offer amount.

If you will pay your offer in 5 months or less (Payment Option 1), multiply "I	Remaining Monthly Income" (Box 4) by 48 to get "Future Remaining Income."
Enter the amount from Box 4 here \$	X 48 = Box 5 Future Remaining Income
If you will pay your offer in more than 5 months (Payment Option 2), multip Income."	oly "Remaining Monthly Income" (from Box 4) by 60 to get "Future Remaining
Enter the amount from Box 4 here	Box 6 Future Remaining Income
\$] ^ 60 - [\$
Determine your minimum offer amount by adding the total available assets	from Box 1 to amount in either Box 5 or Box 6.
	from either Box 5 or Box 6 Minimum Offer Amount
\$	= Must be more than zero
	\$
If you have special circumstances that would hinder you from paying	this amount, explain them on Form 656, Offer in Compromise, Page 2,

If you have special circumstances that would hinder you from paying this amount, explain them on Form 656, Offer in Compromise, Page 2 "Explanation of Circumstances."

*You may exclude any equity in income product	ing assets shown in Section 2 of this form.			
Section 6	Other Information			
Additional information IRS needs to consider settlement of your tax debt. If this business is currently in a bankruptcy proceeding, the business is not eligible to apply for an offer.	Is the business currently in bankruptcy? Yes No Has the business ever filed bankruptcy? Yes No If yes, provide:			
	Date Filed (mm/dd/yyyy) Date Dismissed or Discharged(mm/dd/yyyy)			
	Petition No. Location			
	Does this business have other business affiliations (e.g., subsidiary or parent companies)? Yes No If yes, list the Name and Employer Identification Number:			
	Do any related parties (e.g., partners, officers, employees) owe money to the business?			
	Yes No			
	Has the business been party to a lawsuit?			
	Yes No If yes , date the lawsuit was resolved:			
	In the past 10 years, has the business transferred any assets for less than their full value?			
	☐ Yes ☐ No			
	Has the business been located outside the U.S. for 6 months or longer in the past 10 years?			
	Does the business have any funds being held in trust by a third party?			
	Yes No If yes, how much \$ Where:			
	Does the business have any lines of credit?			
	Yes No If yes, credit limit \$ Amount owed \$			
	What property secures the line of credit?			
Section 7	Signatures			
Under penalties of perjury, I declare that I have is true, correct, and complete.	examined this offer, including accompanying documents, and to the best of my knowledge			
Signature of Taxpayer	Title Date (mm/dd/yyyy)			

Catalog Number 55897B

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(GIII)	ember to include an applicable attachments from his below.
	A current Profit and Loss statement covering at least the most recent 6-12 month period, if appropriate.
	Copies of the most recent statement for each bank, investment, and retirement account.
	If an asset is used as collateral on a loan, include copies of the most recent statement from lender(s) on loans, monthly payments, loan payoffs, and balances.
	Copies of the most recent statement of outstanding notes receivable.
	Copies of the most recent statements from lenders on loans, mortgages (including second mortgages), monthly payments, loan payoffs, and balances.
	Copies of accountant's depreciation schedules, if applicable.
	Copies of relevant supporting documentation of the special circumstances described in the "Explain special circumstances" section on page 2 of Form 656, if applicable.
	Attach a Form 2848, Power of Attorney, if you would like your attorney, CPA, or enrolled agent to represent you and you do not have a current form on file with the IRS.