Form **433-B (OIC)**

Department of the Treasury — Internal Revenue Service

(April 2022)

Collection Information Statement for Businesses

Complete this form if your business is a

CorporationPartnership

► Limited Liability Company (LLC) classified as a corporation

▶ Other LLC

Note: If your business is a sole proprietorship do not use this form. Instead, complete Form 433-A (OIC) Collection Information Statement for Wage Earners and Self-Employed Individuals. This form should only be used with the Form 656, Offer in Compromise.

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

Business physical address (street, city, state, ZIP code) County of business location Description of business and DBA or "Trade Name" Primary phone () - () - () Business website address FAX number () - () - () Federal contractor Total number of employees Frequency of tax deposits Average gross monthly payroll S Provide information about all partners, officers, LLC members, major shareholders (foreign and domestic), etc., associated with the business include attachments if additional space is needed. Last name First name
Primary phone () - Business website address FAX number () - Does the business outsource its payroll processing and tax return preparation for a fee Yes
Primary phone () - () - Business website address FAX number () - () - Business website address FAX number () - () - Business website address FAX number () -
Compared to the properties of the properties o
Compared to the properties of the properties o
FAX number (
Federal contractor
Federal contractor
Yes
Frequency of tax deposits Average gross monthly payroll \$ Provide information about all partners, officers, LLC members, major shareholders (foreign and domestic), etc., associated with the business include attachments if additional space is needed. Last name First name Title Percent of ownership and annual salary Social Security Number Primary phone () - Last name First name First name Title Percent of ownership and annual salary Social Security Number Home address (street, city, state, ZIP code) Title Percent of ownership and annual salary Social Security Number Home address (street, city, state, ZIP code)
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Percent of ownership and annual salary Social Security Number Home address (street, city, state, ZIP code)
Primary phone Secondary phone
Last name First name Title
Percent of ownership and annual salary Social Security Number Home address (street, city, state, ZIP code)
Primary phone Secondary phone

Section 2

Business Asset Information

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. Asset value is subject to adjustment by IRS. Enter the total amount available for each of the following (if additional space is needed, please include attachments).

Round to the nearest dollar. Do not enter a negative number. If any line item is a negative number, enter "0".

Cash and investments (domestic	c and foreign)				
Cash Checking	Savings Mor	ney Market Account	CD	Online Account Sto	red Value Card
Bank name and country location Account number					
					(1a) \$
Cash Checking	red Value Card				
Bank name and country location			Account n	umber	
					(1b) \$
Cash Checking	Savings Mor	ney Market Account	/CD	Online Account Sto	red Value Card
Bank name and country location			Account n	umber	
					(1c) \$
			Total bank	accounts from attachment	(1d) \$
			Add line	es (1a) through (1d) =	(1) \$
Investment account Stocks	s Bonds	Other			
Name of Financial Institution and	country location	·	Account n	umber	
Current market value		М	inus loan ba	alance	
\$	X .8 = \$		- \$	=	(2a) \$
Investment Account: Stocks					
Name of Financial Institution and					
Current market value		M	inus Ioan ba	alance	_
\$	X .8 = \$	_	- \$	=	(2b) \$
	of virtual currency	Email address use		Location(s) of virtual	
Type of virtual currency wallet, exchange or digital currency exchange (DCE) set-up with the virtual currency exchange or DCE currency					
Current market value in U.S. doll	-				
\$	(2c) \$				
Total investment accounts from attachment. [current market value minus loan balance(s)]					(2d) \$
			Add lir	nes (2a) through (2d) =	(2) \$
Notes Receivable					
Do you have notes receivable	☐ Yes ☐ No				
If yes, attach current listing which includes name, age, and amount of note(s) receivable					
Accounts Receivable		(-,	-	
, toodaino redocivable					
Do you have accounts receivable companies, and any bartering or		•	Yes	☐ No	
If yes, provide a list of name, age	e, and amount of the cu	rrent accounts recei	vable		

							Page
Section 2	(Continued)		Business As	set Informa	ntion		
If the busines	s owns more propertie	s, vehicle:	s, or equipment than shown in	n this form, plea	ase list on a separate a	attachment.	
Real estate (buildings, lots, commercia	I property,	etc.)				
ls your real pr	roperty currently for sal	e or do yo	ou anticipate selling your real	property to fun	d the offer amount		
Yes (listing price)		No				
	ess (street address, city, county, and country)	Prope	rty description (indicate if renta	l property, vacan	t, etc.) Date purchased	t	
olato, En oodo	, county, and country)						
		Month	lly mortgage payment		Date of final payment		
		Name	of lender/contract holder				
Current mark	et value		Minus loan balance	e (mortgages etc		_	
\$	X .8 = \$		- \$		al value of real estate	= (3a) \$	
_	ess (street address, city,	Prope	rty description (indicate if renta			· , ,	
state, ZIP code	, county, and country)						
		Month	lly mortgage payment		Date of final payment	 :	
		Name	of lender/contract holder				
Current mark	et value	·	Minus loan balance	e (mortgages, etc	c.)		
\$X .8 = \$ Total va				al value of real estate	= (3b) \$		
Total value of property(s) listed from attachment [current market value X .8 minus any loan balance(s)]							
Add lines (3a) through (3c) =						= (3) \$	
Business vel	hicles (cars, boats, moto	rcycles, tra	ilers, etc.). If additional space	is needed, list o	on an attachment	•	
Vehicle make	& model	Year	Date purchased	N	Mileage or use hours		
Lease	Monthly lease/loan a	mount	Name of creditor	[Date of final payment		
Own	\$						
Current mark	et value		Minus loan balance				
\$ X .8 = \$			- \$		e of vehicle (if the vehic nter 0 as the total value)	/ 4 \ 🚓	
Vehicle make		Year	Date purchased		Mileage or use hours		
Lease	Monthly lease/loan a	mount	Name of creditor		Date of final payment		
Own	\$						
Current mark	et value		Minus loan balance	<u> </u>			
\$	X .8 = \$		- \$		e of vehicle (if the vehic nter 0 as the total value)	(AL) A	
Vehicle make		Year	Date purchased		Mileage or use hours	_ (.~) \$	
					· ·		
Lease	Monthly lease/loan a	mount	Name of creditor	1	Date of final payment		
Own	\$						
Current market value Minus loan balance							
¢	V O _ fr		¢		e of vehicle (if the vehicle		
\$	X .8 = \$			is leased, e	nter 0 as the total value)	= (4c) \$	

(4d) \$ (4) \$

Add lines (4a) through (4d) =

Total value of vehicles listed from attachment [current market value X .8 minus any loan balance(s)]

Sectio	n 2 (Continued)	Business As	set Information	
	usiness equipment			
		ment, please list on a separate at	tachment and put the total of all equipm	nent in box (5b)]
rype or	equipment			
Current	market value	Minus loan balance		
Current	market value	Willius Ioan balance	Total value of equipment (if leased or used in the production of	
\$	X .8 = \$		income enter 0 as the total value) =	(5a) \$
	Total value of equipment listed	from attachment [current market	value X .8 minus any loan balance(s)]	(5b) \$
			Total value of all business equipment Add lines (5a) and (5b) =	(5) \$
		ive number. If any line item is a n	e number. Round to the nearest dollar. egative number, enter "0" on that line. and enter the amount in Box A =	Box A Available Equity in Assets \$
Sectio	n 3	Business Inco	ome Information	
rental inc expenses Note: If y	ions, invoices, gross receipts from s come, interest and dividends, or sub- s.	ales/services, etc.; most recent 6-1: sidies); or you may use the most recent	oss monthly income use the most recent of 2 months earnings statements, etc., from cent 6-12 months Profit and Loss (P&L) to below, enter the total gross monthly in	every other source of income (such as provide the information of income and
	rovided beginning	through		
Gross re		unougn		(6) \$
	ental income			(7) \$
Interest				(8) \$
Dividend				(9) \$
	come (specify on attachment)			(10) \$
Other in	come (specify on attachment)			Box B
	Do not enter a negat		Round to the nearest dollar. egative number, enter "0" on that line. and enter the amount in Box B =	Total Business Income
Sectio	n 4		ense Information	•
Enter the			ost recent 6-12 months statements, bills	s, receipts, or other documents
	you provide a current profit and te lines (11) - (20).	l loss statement for the informa	ation below, enter the total monthly e	expenses in Box C below. Do not
Period p	rovided beginning	through		
Materials	s purchased (e.g., items directly re	elated to the production of a prod	uct or service)	(11) \$
Inventor	y purchased (e.g., goods bought t	or resale)		(12) \$
Gross w	ages and salaries			(13) \$
Rent				(14) \$
Supplies equipme	•	and used up within one year, e.g	., books, office supplies, professional	(15) \$
Utilities/1	telephones			(16) \$
Vehicle	costs (gas, oil, repairs, maintenan	ce)		(17) \$
Insuranc	ce (other than life)			(18) \$
	taxes (e.g., real estate, state, and ad employer's portion of employme		e, occupational, personal property,	(19) \$
Other ex	spenses (e.g., secured debt paym	ents. Specify on attachment. Do i	not include credit card payments)	(20) \$
			Round to the nearest dollar. egative number, enter "0" on that line. and enter the amount in Box C =	Box C Total Business Expenses \$
			Round to the nearest dollar. egative number, enter "0" on that line. and enter the amount in Box D =	Box D 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.

Note: The multipliers below (12 and 24) and the calculated offer amount do not apply if IRS determines you have the ability to pay your tax debt in full within the legal period to collect.

If you will pay your offer in 5 or fewer payments within 5 months or less, multiply "Remaining Monthly Income" (Box D) by 12 to get "Future Remaining Income." Do not enter a number less than zero.

Round to the nearest whole dollar.

					Rouna to	the hearest whole dollar
Enter the total from E	Box D		X 12 =	Box E	Future Remaining I	ncome
If you will pay your offer in number less than zero.	6 to 24 months, r	multiply "Remaining M	Monthly Income" (Box D) by	y 24 to get	Future Remaining Incor	me". Do not enter a
Enter the total from E	Box D		X 24 =	Box F	Future Remaining I	ncome
Determine your minimum of the more than zero.	offer amount by a	dding the total availat	ole assets from Box A to the	ne amount i	n either Box E or Box F.	Your offer amount must
Enter the amount from \$	m Box A*	Enter the a Box E or B + \$	mount from either ox F	=	Offer Amount Your offer must be m Do not leave blank. U	nore than zero (\$0). Ise whole dollars only.
You must offer an amou *You may exclude any ed Section 6		producing assets (ex	xcept real estate) shown Other Information	in Section		
Additional information IF business is not eligible t			your tax debt. If this bus	siness is c	urrently in a bankruptc	y proceeding, the
Is the business currently in						
☐ Yes ☐ No						
Has the business filed ban	kruptcy in the pas	st 10 years				
Yes No	. , .	,				
If yes, provide						
Date filed (mm/dd/yyyy)	Da	ate dismissed or disch	arged (mm/dd/yyyy)			
Petition no.		cation filed				
Does this business have o	ther business affi	liations (e.g., subsidiar)	y or parent companies)			
Yes No						
If yes, list the name and E	mployer Identifica	ation Number				
Do any related parties (e.g	g., partners, office	rs, employees) owe n	noney to the business			
Yes No						
Is the business currently, o	or in the past, part	ty to litigation				
∐ Yes ∐ No						
If yes, answer the followin			15			D 1 1/0
	Location of filing		Represented by			Docket/Case number
Defendant						
	Possible complet	tion date (mmddyyyy)	Subject of litigation			
\$						
Are you or have you been	party to litigation	involving the IRS/Uni	ted States (including any tax	(litigation)		
∐ Yes ∐ No		ti di a				
If yes and the litigation inc	luded tax debt, pi	rovide the types of tax	c and periods involved.			

Section 6 (Continued)	0	ther Information				
In the past 10 years, has the busine	ss transferred any assets for le	ss than their full value				
Yes No						
If yes, provide date, value, and type	of asset transferred					
In the past 3 years have you transfe	rred any real property (land, hou	use, etc.)				
Yes No						
If yes, list the type of property, value	e, and date of the transfer					
Has the business been located outs	ide the U.S. for 6 months or lor	nger in the past 10 yea	rs			
Yes No						
Do you have any assets or own any	real property outside the U.S.					
Yes No						
If yes, please provide description, lo	cation, and value					
Does the business have any funds b	peing held in trust by a third par	rty				
Yes No If yes, how mu	ch \$ Where					
Does the business have any lines o	fcredit					
Yes No If yes, credit lin	mit \$ Amou	nt owed \$				
What property	secures the line of credit					
Section 7		Signatures				
Under penalties of perjury, I declare that I have examined this offer, including accompanying documents, and to the best of my knowledge it is true, correct, and complete.						
Signature of Taxpayer		Title		Date (mm/dd/yyyy)		
<u>/</u>						
Remember to include all ap	oplicable attachments f	rom the list below	N.			
A current Profit and Loss	statement covering at leas	t the most recent 6-	12 month period, if appropriate.			
Copies of the six most re statements for each inve	-	ents for each busine	ess account and copies of the thre	ee most recent		
If an asset is used as copayments, loan payoffs,		ppies of the most rec	ent statement from lender(s) on l	oans, monthly		
Copies of the most recent statement of outstanding accounts and notes receivable.						
Copies of the most recent statements from lenders on loans, mortgages (including second mortgages), monthly payments, loan payoffs, and balances.						
Copies of relevant support Form 656, if applicable.	Copies of relevant supporting documentation of the special circumstances described in the "Explanation of Circumstances" on Form 656, if applicable.					
have a current form on fi	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. Make sure the current tax year is included and you check the appropriate box to ensure copies of communications are sent to your representative.					
Completed and current s	igned Form 656.					