Department of the Treasury — Internal Revenue Service

Form **433-B (OIC)** (Rev. May 2012)

# **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	Business	sinformation		
Business Name		Employer Identification Number		
Business address (street, city, state, zip code)		County of Business Location		
		Description of Bu	usiness and dba or "Trade Name"	
Primary Phone	Secondary Phone Mailing address (if different from above or Post Office Box numb		(if different from above or Post Office Box number)	
( ) <u>-</u>	_			
Business website address				
Fax Number			ss outsource its payroll processing and tax return	
_		preparation for a		
Federal Contractor	Total Number of Employees	Ţ ∐ Yes ∐ N	No If yes, list provider name and address in box below (Street, City, State, ZIP Code)	
Yes No			(±, <b>y</b> ,,	
Frequency of tax deposits	Average gross monthly payroll			
	\$			
Provide information about all partners business. Include attachments if addit		shareholders (fo	reign and domestic), etc., associated with the	
Last Name	First Name		Title	
Percent of Ownership and annual salary	nd annual salary Social Security Number		Home address (Street, City, State, ZIP Code)	
Primary Phone	Secondary Phone	1		
( ) _	_			
Last Name	First Name	1	Title	
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	nd annual salary Social Security Number		Home address (Street, City, State, ZIP Code)	
Primary Phone	Secondary Phone	1		
_	_			
		1		

## Section 2

### **Business Asset Information**

If any line item is zero or less, enter "0". Do not enter negative numbers on this form.

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).

☐ Cash ☐ Checking ☐ Savings ☐ Money Market	t Online Account Stored Value Card		
Bank Name	Account Number		
		(1a) \$	
☐ Checking ☐ Savings ☐ Money Market ☐ Onli	ne Account Stored Value Card		
Bank Name	Account Number		
		(1b) \$	
☐ Checking ☐ Savings ☐ Money Market ☐ Onli	ne Account Stored Value Card		
Bank Name	Account Number		
		(1c) \$	
Total value of bank accounts from attachment		(1d) \$	
	Add lines (1a) through (1d) =	(1) \$	
Investment Account: Stocks Bonds Other			
Name of Financial Institution	Account Number		
Current Market Value	Less Loan Balance		
\$ X.8 = \$	=	(2a) \$	
Investment Account: Stocks Bonds Other			
Name of Financial Institution	Account Number		
Current Market Value	Less Loan Balance		
\$ X .8 = \$	=	(2b) \$	
Total of investment accounts from attachment. [current market value X.8 less loan balance(s)]		(2c) \$	
	Add lines (2a) through (2c) =	(2) \$	
Notes receivable			
Do you have notes receivable?			
If yes, attach current listing which includes name and amount			
Accounts Receivable			
Do you have accounts receivable?			
If yes, you may be asked to provide a list of name and amount			

## Section 2 (Continued)

## **Business Asset Information**

	s owns more propertie	es, vehicles, o	r equipment than show	vn in this form,	please list on an attachme	ent.	
Real Estate	Buildings, Lots, Commerc	cial Property, et					Do not use negative numbers
Property Add	roperty Address (Street Address, City, State, ZIP Code) Property Description Date Purchased						
						_	
			County and Cou	ntry			
Current Mark	et Value		Less Loan	Balance (Mortg	yages, etc.)	1	
\$	X .8 = \$_		\$	To	otal Value of Real Estate =	= (3a)	) \$
Property Address (Street Address, City, State, ZIP Code)   Property Description   Date Purchased							
						_	
			County and Cou	ntry			
Current Market Value Less Loan Balance (Mortgages, etc.)			-				
\$	X .8 = \$_		- \$	To	otal Value of Real Estate =	= (3b)	) \$
			current market value X			(3c)	) \$
				Add lin	es (3a) through (3c) =	(3)	
Business Ve	hicles (cars. boats. mot	orcycles, trailers	s, etc.). If additional spa		., .,	1(0)	
Vehicle Make		Year	Date Purchased		ileage or Use Hours	T	
Lease	Monthly Lease/Loan	Amount					
Loan Current Mark	\$ et Value		Less Loan Balan			-	
\$	X .8 = \$		- \$	Total val	ue of vehicle (if the vehicle l, enter 0 as the total value) =		\ <b>¢</b>
Vehicle Make		Year	Date Purchased	Mi	leage or Use Hours	(4a)	<u>,</u> φ
Lease Monthly Lease/Loan Amount							
Less Loan Balance			-				
\$	Total value of vehicle (if the vehicle \$ X .8 = \$ - \$ is leased, enter 0 as the total value) =				) \$		
Vehicle Make	& Model	Year	Date Purchased	Mi	leage or Use Hours	(12)	· •
	1						
Lease Monthly Lease/Loan Amount							
Less Loan Balance			-				
\$	X .8 = \$		\$		ue of vehicle (if the vehicle , enter 0 as the total value) =	(4c)	ı \$
Total value of	vehicles listed from a	ttachment [cu	rrent market value X .8	less any loan	balance(s)]	(4d)	
				Add lin	es (4a) through (4d) =	(4)	\$
Other Busine	ess Equipment					1 . ,	
Current Mark			Less Loan Balan	nce			
\$	X .8 = \$		- \$	(if leased,	Total value of equipment enter 0 as the total value) =	t (5a)	) \$
Total value of equipment listed from attachment [current market value X .8 less any loan balance(s)]			(5b)	•			
	<u> </u>	IRS allo	wed exemption for p	rofessional bo	ooks and tools of trade -	<u> </u>	) \$ [4,290]
	المامة	Eo) and /54) :	minus line (Es) if more		all business equipment =	:	· · · · ·
	Add lines (		minus line (5c), if num			(5) B	क Box 1 Available Equity in Assets
					a letter beside the number e amount in Box 1 =	· s	

### 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 (6) - (10).

	Box 2 Total Business Income
Other income (Specify on attachment)	(10) \$
Dividends	(9) \$
Interest income	(8) \$
Gross rental income	(7) \$
Gross receipts	(6) \$

# 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 (11) - (20).

Materials purchased (e.g., items directly related to the production of a product or service)	(11) \$
Inventory purchased (e.g., goods bought for resale)	(12) \$
Gross wages and salaries	(13) \$
Rent	(14) \$
Supplies (items used to conduct business and used up within one year, e.g., books, office supplies, professional equipment, etc.)	(15) \$
Utilities/telephones	(16) \$
Vehicle costs (gas, oil, repairs, maintenance)	(17) \$
Insurance (other than life)	(18) \$
Current taxes (e.g., real estate, state, and local income tax, excise franchise, occupational, personal property, sales and employer's portion of employment taxes, etc.)	(19) \$
Other expenses (e.g., secured debt payments. Specify on attachment. Do not include credit card payments)	(20) \$
	Box 3 Total Business Expenses
Add lines (11) through (20) 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, multiply "Remaining Monthly Income" (Box 4) by 12 to get "Future Remaining Income."

Enter the amount from Box 4 here \$	X 12 = Box 5 Future Remaining Income
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If you will pay your offer in more than 5 months, multiply "Remaining Monthly Income" (from Box 4) by 24 to get "Future Remaining Income."

Enter the amount from Box 4 here

\$ X 24 = 

Box 6 Future Remaining Income \$

Determine your minimum offer amount by adding the total available assets from Box 1 to amount in either Box 5 or Box 6.

Enter the amount from Box 1 here\*
Do not enter a number less than zero

\*

Enter the amount from either Box 5 or Box 6

\*

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, "Explanation of Circumstances."

\*You may exclude any equity in income producing assets shown in Section 2 of this form.

Section 6	Other Information
Additional information IRS needs to	Is the business currently in bankruptcy?
consider settlement of your tax debt. If this business is currently in a bankruptcy	Yes No
proceeding, the business is not eligible to	Has the business ever filed bankruptcy?
apply for an offer.	☐ Yes ☐ No
	If yes, provide:
	Date Filed (mm/dd/yyyy) Date Dismissed or Discharged(mm/dd/yyyy)
	Petition No Location Filed
	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
	Is the business currently, or in the past, a party to a lawsuit?
	Yes No If applicable, date the lawsuit was resolved:
	In the past 10 years, has the business transferred any assets for less than their full value?
	Yes No If applicable, provide date and type of asset transferred:
	Has the business been located outside the U.S. for 6 months or longer in the past 10 years?
	Yes No
	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?
	a. property essence the mile of creat.

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)		
Remember to include all applicable attachme	nts from list below.			
A current Profit and Loss statement covering at	t least the most recent 6-12 month	period, if appropriate.		
Copies of the most recent statement for each b	eank, investment, and retirement ac	ccount.		
If an asset is used as collateral on a loan, inclu payments, loan payoffs, and balances.	de copies of the most recent state	ment from lender(s) on loans, monthly		
Copies of the most recent statement of outstan	ding 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 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.				
Privacy Act Statement				

The information requested on this Form is covered under Privacy Act and Paperwork Reduction Act Notices which have already been provided to the taxpayer.