

Form 433-B (OIC)

(April 2024)

Department of the Treasury
Internal Revenue Service

Collection Information Statement for Businesses



Form 433-B (OIC) (Rev.4 2024) Catalog Number 93031T
Department of the Treasury **Internal Revenue Service** www.irs.gov



Visit the Accessibility
Page on IRS.gov

This page intentionally left blank

Form 433-B (OIC) (April 2024)		Department of the Treasury — Internal Revenue Service Collection Information Statement for Businesses	
Complete this form if your business is a			
<ul style="list-style-type: none">• Corporation• Partnership		<ul style="list-style-type: none">• 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.			
Section 1 Business Information (Domestic and Foreign)			
Business name		Employer Identification Number	
Business physical address (street, city, state, ZIP code)		County of business location	
		Description of business and DBA or "Trade Name"	
Primary phone () -	Secondary phone () -	Business mailing address (if different from above or post office box number)	
Business website address			
FAX number () -		Does the business outsource its payroll processing and tax return preparation for a fee <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list provider name and address in box below (street, city, state, ZIP code)	
Federal contractor <input type="checkbox"/> Yes <input type="checkbox"/> No	Total number of employees <input type="checkbox"/> Check here if you are the only employee		
Frequency of tax deposits	Average gross monthly payroll \$		

Provide information about all partners, officers, LLC members, major shareholders (domestic and foreign), 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 - -	Home address (<i>street, city, state, ZIP code</i>)
Primary phone () -	Secondary phone () -	
Last name	First name	Title
Percent of ownership and annual salary	Social Security Number - -	Home address (<i>street, city, state, ZIP code</i>)
Primary phone () -	Secondary phone () -	
Last name	First name	Title
Percent of ownership and annual salary	Social Security Number - -	Home address (<i>street, city, state, ZIP code</i>)
Primary phone () -	Secondary phone () -	

Section 2 Business Asset Information (Domestic and Foreign)

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 and foreign)

<input type="checkbox"/> Cash <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market Account/CD <input type="checkbox"/> Online Account <input type="checkbox"/> Stored Value Card		
Bank name and country location	Account number	(1a) \$
<hr/>		
<input type="checkbox"/> Cash <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market Account/CD <input type="checkbox"/> Online Account <input type="checkbox"/> Stored Value Card		
Bank name and country location	Account number	(1b) \$
<hr/>		
<input type="checkbox"/> Cash <input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market Account/CD <input type="checkbox"/> Online Account <input type="checkbox"/> Stored Value Card		
Bank name and country location	Account number	(1c) \$
<hr/>		
Total bank accounts from attachment		(1d) \$
Add lines (1a) through (1d) =		(1) \$
<hr/>		
Investment account <input type="checkbox"/> Stocks <input type="checkbox"/> Bonds <input type="checkbox"/> Other		
Name of Financial Institution and country location	Account number	
<hr/>		
Current market value	Minus loan balance	
\$ _____ X .8 = \$ _____ – \$ _____ =		(2a) \$

Investment Account: <input type="checkbox"/> Stocks <input type="checkbox"/> Bonds <input type="checkbox"/> Other			
Name of Financial Institution and country location		Account number	
Current market value		Minus loan balance	
\$ _____ X .8 = \$ _____		– \$ _____ = (2b) \$	
<input type="checkbox"/> Digital asset	Number of units	Location of digital asset (<i>exchange account, self-hosted wallet</i>)	Account number for assets held by a custodian or broker
Description of digital asset			
Digital asset address for self-hosted digital assets		US dollar equivalent of the digital asset as of today	
		\$ _____ = (2c) \$	
Total investment accounts from attachment. [current market value minus loan balance(s)]			(2d) \$
Add lines (2a) through (2d) =			(2) \$
Notes Receivable			
Do you have notes receivable <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, attach current listing which includes name, age, and amount of note(s) receivable			
Accounts Receivable			
Do you have accounts receivable, including e-payment, factoring companies, and any bartering or online auction accounts <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, provide a list of name, age, and amount of the current accounts receivable			

Section 2 (Continued) Business Asset Information (Domestic and Foreign)

If the business owns more properties, vehicles, or equipment than shown in this form, please list on a separate attachment.

Real estate (buildings, lots, commercial property, etc.)

Is your real property currently for sale or do you anticipate selling your real property to fund the offer amount

☐ Yes (listing price) _____ ☐ No

Property address (street address, city, state, ZIP code, county, and country)	Property description (indicate if rental property, vacant, etc.)	Date purchased	
	Monthly mortgage payment	Date of final payment	
	Name of lender/contract holder		
Current market value		Minus loan balance (mortgages, etc.)	
\$ _____ X .8 = \$ _____		– \$ _____ Total value of real estate =	(3a) \$
Property address (street address, city, state, ZIP code, county, and country)	Property description (indicate if rental property, vacant, etc.)	Date purchased	
	Monthly mortgage payment	Date of final payment	
	Name of lender/contract holder		
Current market value		Minus loan balance (mortgages, etc.)	
\$ _____ X .8 = \$ _____		– \$ _____ Total value of real estate =	(3b) \$
Total value of property(s) listed from attachment [current market value X .8 minus any loan balance(s)]			(3c) \$
Add lines (3a) through (3c) =			(3) \$

Business vehicles (cars, boats, motorcycles, trailers, etc.). Include those located in foreign countries or jurisdictions. If additional space is needed, list on an attachment.

Vehicle make & model		Year	Date purchased	Mileage or use hours	License/Tag number	
<input type="checkbox"/> Lease	Monthly lease/loan amount		Name of creditor		Date of final payment	
<input type="checkbox"/> Own	\$					
Current market value		Minus loan balance		Total value of vehicle (if the vehicle is leased, enter 0 as the total value) =		(4a) \$
\$		X .8 = \$	– \$			
Vehicle make & model		Year	Date purchased	Mileage or use hours	License/Tag number	
<input type="checkbox"/> Lease	Monthly lease/loan amount		Name of creditor		Date of final payment	
<input type="checkbox"/> Own	\$					
Current market value		Minus loan balance		Total value of vehicle (if the vehicle is leased, enter 0 as the total value) =		(4b) \$
\$		X .8 = \$	– \$			
Vehicle make & model		Year	Date purchased	Mileage or use hours	License/Tag number	
<input type="checkbox"/> Lease	Monthly lease/loan amount		Name of creditor		Date of final payment	
<input type="checkbox"/> Own	\$					
Current market value		Minus loan balance		Total value of vehicle (if the vehicle is leased, enter 0 as the total value) =		(4c) \$
\$		X .8 = \$	– \$			
Total value of vehicles listed from attachment [current market value X .8 minus any loan balance(s)]						(4d) \$
Add lines (4a) through (4d) =						(4) \$

Section 2 (Continued) Business Asset Information (Domestic and Foreign)

Other business equipment

[If you have more than one piece of equipment, please list on a separate attachment and put the total of all equipment in box (5b)]

Type of equipment	
Current market value	Minus loan balance
Total value of equipment (if leased or used in the production of income enter 0 as the total value) =	
\$ _____ X .8 = \$ _____	– \$ _____
(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) \$ _____	
Do not include amount on the lines with a letter beside the number. Round to the nearest dollar. Do not enter a negative number. If any line item is a negative number, enter "0" on that line. Add lines (1) through (5) and enter the amount in Box A =	
Box A Available Equity in 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 the 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 B below. Do not complete lines (6) - (10).

Period provided beginning	through
Gross receipts	(6) \$ _____
Gross rental income	(7) \$ _____
Interest income	(8) \$ _____
Dividends	(9) \$ _____
Other income (specify on attachment)	(10) \$ _____
Round to the nearest dollar. Do not enter a negative number. If any line item is a negative number, enter "0" on that line. Add lines (6) through (10) and enter the amount in Box B =	
Box B Total Business Income \$ _____	

Section 4Business 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. **Deductions for non-cash expenses (e.g., depreciation, depletion, etc.) are not permitted as an expense for offer purposes.**

Note: If you provide a current profit and loss statement for the information below, enter the total monthly expenses in Box C below. Do not complete lines (11) - (20).

Period provided beginning	through	
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)	\$
Round to the nearest dollar. Do not enter a negative number. If any line item is a negative number, enter "0" on that line. Add lines (11) through (20) and enter the amount in Box C =		Box C Total Business Expenses \$
Round to the nearest dollar. Do not enter a negative number. If any line item is a negative number, enter "0" on that line. Subtract Box C from Box B 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.

Round to the nearest whole dollar.

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.

Enter the total from Box D

\$

X 12 =

Box E Future Remaining Income

\$

If you will pay your offer in 6 to 24 months, multiply "Remaining Monthly Income" (Box D) by 24 to get "Future Remaining Income". Do not enter a number less than zero.

Enter the total from Box D

\$

X 24 =

Box F Future Remaining Income

\$

Determine your minimum offer amount by adding the total available assets from Box A to the amount in either Box E or Box F. Your offer amount must be more than zero.

Enter the amount from Box A*

\$

+

Enter the amount from either
Box E or Box F

\$

=

Offer Amount

Your offer must be more than zero (\$0).
Do not leave blank. Use whole dollars only.
Place your offer amount on Form 656
Section 4, Payment Terms.

\$

*You may exclude any equity in income producing assets (except real estate) 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 filed bankruptcy in the past 10 years

☐ 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, party to litigation

☐ Yes ☐ No

If yes, answer the following

<input type="checkbox"/> Plaintiff	Location of filing	Represented by	Docket/Case number
<input type="checkbox"/> Defendant			
Amount in dispute \$	Possible completion date (mmddyyyy)	Subject of litigation	

Are you or have you been party to litigation involving the IRS/United States (including any tax litigation)

☐ Yes ☐ No

If yes and the litigation included tax debt, provide the types of tax and periods involved.

Section 6 (Continued) Other Information

In the past 10 years, has the business transferred any asset with a fair market value of more than \$10,000, including real property, for less than its full value

☐ Yes ☐ No

If yes, provide date, value, and type of asset transferred

In the past 3 years have you transferred any real property (*land, house, etc.*)

☐ Yes ☐ No

If yes, list the type of property, value, and date of the transfer

Has the business been located outside the U.S. for 6 months or longer in the past 10 years

☐ Yes ☐ No

Do you have any assets or own any real property outside the U.S.

☐ Yes ☐ No

If yes, please provide description, location, and value

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 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 attachments from the list below.

- ☐ A current Profit and Loss statement covering at least the most recent 6–12 month period, if appropriate.
- ☐ Copies of the six most recent complete bank statements for each business account and copies of the three most recent statements for each investment 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 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 supporting documentation of special circumstances described in the Section 3 on Form 656, if applicable.
- ☐ Attach a Form 2848, *Power of Attorney and Declaration of Representative*, 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. Ensure all years and forms involved in your offer are listed on Form 2848 and include the current tax year. Check the appropriate box to ensure copies of communications are sent to your representative.
- ☐ Completed and current signed Form 656.