

# Form 656 Booklet Offer in Compromise

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# **IRS contact information**

If you have questions regarding qualifications for an offer in compromise, please call our toll-free number at 1-800-829-1040. You can get forms and publications by calling 1-800-TAX-FORM (1-800-829-3676), or by visiting your local IRS office or our website at www.irs.gov.

# **Taxpayer resources**

You may also seek assistance from a professional tax assistant at a Low Income Taxpayer Clinic, if you qualify. These clinics provide help to qualified taxpayers at little or no charge. IRS Publication 4134, Low Income Taxpayer Clinic List, provides information on clinics in your area and is available through the IRS website at www.irs.gov, by phone at 1-800-TAX-FORM (1-800-829-3676), or at your local IRS office.

# WHAT YOU NEED TO KNOW

What is an offer?	An offer in compromise (offer) is an agreement between you (the taxpayer) and the IRS that settles a tax debt for less than the full amount owed. The offer program provides eligible taxpayers with a path toward paying off their debt and getting a "fresh start." The ultimate goal is a compromise that suits the best interest of both the taxpayer and the IRS. To be considered, generally you must make an appropriate offer based on what the IRS considers your true ability to pay.			
	Submitting an offer application does not ensure that the IRS will accept your offer. It begins a process of evaluation and verification by the IRS, taking into consideration any special circumstances that might affect your ability to pay. Generally, the IRS will not accept an offer if you can pay your tax debt in full via an installment agreement or a lump sum.			
	This booklet will lead you through a series of steps to help you calculate an appropriate offer based on your assets, income, expenses, and future earning potential. The application requires you to describe your financial situation in detail, so before you begin, make sure you have the necessary information and documentation.			
Are you eligible?	Before you submit your offer, you must (1) file all tax returns you are legally required to file, (2) make all estimated tax payments for the current year, and (3) make all required federal tax deposits for the current quarter if you are a business owner with employees.			
Bankruptcy	If you or your business is currently in an open bankruptcy proceeding, you are not eligible to apply for an offer. Any resolution of your outstanding tax debts generally must take place within the context of your bankruptcy proceeding.			
	If you are not sure of your bankruptcy status, contact the Centralized Insolvency Operation at 1-800-913-9358. Be prepared to provide your bankruptcy case number and/or Taxpayer Identification Number.			
Doubt as to Liability	If you have a legitimate doubt that you owe part or all of the tax debt, you will need to complete a <b>Form 656-L Offer in Compromise (Doubt as to Liability)</b> . The Form 656-L is not included as part of this package. To submit a Doubt as to Liability offer, you may request a form by calling the toll free number 1-800-829-1040, by visiting a local IRS office, or at www.irs.gov.			
Other important facts	Penalties and interest will continue to accrue during the offer evaluation process.			
	You cannot submit an offer that is only for a tax year or tax period that has not been assessed.			
	The law requires the IRS to make certain information from accepted offers available for public inspection and review. These public inspection files are located in designated IRS Area Offices.			
	A Notice of Federal Tax Lien (lien) gives the IRS a legal claim to your property as security for payment of your tax debt. Generally, if a lien is not already filed, a lien will not be filed during the offer evaluation process. If a lien was filed, it will normally not be released until the payment terms of the accepted offer are satisfied, or the tax debt is paid in full, whichever comes first.			

If your business owes trust fund taxes, and responsible individuals may be held liable for the trust fund portion of the tax, you are not eligible to submit an offer unless you pay the trust fund portion of your tax debt first. Trust fund taxes are the money withheld from an employee's wages, such as income tax, Social Security, and Medicare taxes.

The IRS will keep any refund, including interest, for tax periods extending through the calendar year that the IRS accepts the offer. For example, if your offer is accepted in 2011 and you file your 2011 Form 1040 showing a refund, IRS will apply your refund to your tax debt.

The IRS may keep any proceeds from a levy served prior to you submitting an offer. The IRS may levy your assets up to the time that the IRS official signs and accepts your offer as pending. If your assets are levied after your offer is pending, immediately contact the IRS person whose name and phone number are listed on the levy.

If you currently have an approved installment agreement with IRS and are making installment payments, then you may stop making those installment agreement payments when you submit an offer. This will allow you to make your offer payments noted below. If your offer is returned for any reason, your installment agreement with IRS will be reinstated with no additional fee.

# PAYING FOR YOUR OFFER

Application fee	All offers require a \$150 application fee.			
	EXCEPTION: If you are submitting an individual offer and meet the Low Income Certification guidelines (see page 2 of Form 656, Offer in Compromise), you will not be required to send the application fee.			
Payment options	Submitting an offer requires the selection of a payment option as well as sending an initial payment with your application. The amount of the initial payment and subsequent payments will depend on the total amount of your offer and which of the following payment options you choose.			
	<b>Payment option 1:</b> This option requires 20% of the total offer amount to be paid with the offer and the remaining balance paid in five or fewer payments.			
	<b>Payment option 2:</b> This option requires the first payment with the offer and the remaining balance paid in accordance with your proposed offer terms. Under this option, <b>you must continue to make all subsequent payments while the IRS is evaluating your offer. Failure to make these payments will cause your offer to be returned.</b>			
	The length of the payment option you choose may affect the amount of the offer we will accept. Generally, an offer paid within five months of acceptance will require a lesser amount. Your offer amount cannot include a refund we owe you.			
	If you meet the Low Income Certification guidelines, you will not be required to send the initial payment, or make the monthly payments during the evaluation of your offer but you will still need to choose one of the payment options.			
	If your offer is returned or not accepted, any required payment(s) made with the filing of your offer and thereafter, will not be refunded. Your payment(s) will be applied to your tax debt.			

Future tax obligations	If you do not have sufficient cash to pay for your offer, you may need to consider borrowing money from a bank, friends, and/or family. Other options may include borrowing against or selling other assets. NOTE: If retirement savings from an IRA or 401k plan are cashed out, there will be future tax liabilities owed as a result. Contact the IRS or your tax advisor before taking this action. If your offer is accepted, you must continue to timely file and pay your tax obligations. If you fail to file and pay your required tax returns, before your offer is paid in full, or for five years after your offer is accepted, which ever is longer, your offer may be defaulted. If your offer is defaulted, all compromised tax debts will be reinstated.
HOW TO APPLY	
Application process	The application involves filling out Form 433-A (OIC), Collection Informa- tion Statement for Wage Earners and Self-Employed Individuals <b>and/or</b> Form 433-B (OIC), Collection Information Statement for Businesses, filling out a Form 656, (Offer in Compromise), attaching an initial payment, and attaching a \$150 application fee for each offer you send in.
If you and your spouse owe joint and separate tax debts	If you have joint tax debt(s) with your spouse and also have an individual tax debt(s), you and your spouse will send in one Form 656 with all of the joint tax debt(s) and a second Form 656 with your individual tax debt(s), for a total of two Forms 656.
	If you and your spouse have joint tax debt(s) and you are also each respon- sible for an individual tax debt(s), you will each need to send in a separate Form 656. You will complete one Form 656 for yourself listing all your joint and separate tax debts and your spouse will complete one Form 656 listing all his or her joint and individual tax debts, for a total of two Forms 656.
	If you and your spouse/ex-spouse has a joint tax debt and your spouse/ ex-spouse does not want to submit a Form 656, you on your own may submit a Form 656 to compromise the joint debt.
	Each Form 656 will require the \$150 application fee and initial down payment unless your household meets the Low Income Certification guide- lines (See page 2 of Form 656, Offer in Compromise).

# COMPLETING THE APPLICATION PACKAGE

<u>Step 1</u> – Gather your information

To calculate an offer amount, you will need to gather information about your financial situation, including cash, investments, available credit, assets, income, and debt.

You will also need to gather information about your average gross monthly household income and expenses. The entire household includes spouse, significant other, children, and others that reside in the household. This is necessary for the IRS to accurately evaluate your offer. In general, the IRS will not accept expenses for tuition for private schools, college expenses, charitable contributions, credit card payments, and other unsecured debt payments as part of the expenses calculation.

<u>Step 2</u> – Fill out the Form 433-A (OIC), Collection Information State- ment for Wage Earners and Self- Employed Individuals)	Fill out the Form 433-A(OIC) if you are an individual wage earner and/or a self-employed individual. This will be used to calculate an appropriate offer amount based on your assets, income, expenses, and future earning potential. You will have the opportunity to provide a written explanation of any special circumstances that affect your financial situation.				
<u>Step 3</u> – Fill out Form 433-B(OIC), Collection Information Statement for Businesses	Fill out the Form 433-B(OIC) if your business is a Corporation, Partnership, Limited Liability Company (LLC) classified as a corporation, single member LLC, or other multi-owner/multi-member LLC. This will be used to calcu- late an appropriate offer amount based on your business assets, income, expenses, and future earning potential. If you have assets that are used to produce income (for example, a tow truck used in your business for towing vehicles), you may be allowed to exempt the equity in these assets.				
<u>Step 4</u> – Attach required documenta- tion	You will need to attach supporting documentation with Form(s) 433-A(OIC) and 433-B(OIC). A list of the documents required will be found at the end of each form. Include copies of all required attachments, as needed. Do not send original documents.				
<u>Step 5</u> – Fill out Form 656, Offer in Compromise	Fill out Form 656. The Form 656 identifies the tax years and type of tax you would like to compromise. It also identifies your offer amount and the payment terms.				
	The Low Income Certification guidelines are included on Form 656. If you are an individual and meet the guidelines, check the Low Income Certification box in Section 4, on Form 656.				
<u>Step 6</u> – Include initial payment and \$150 application fee	Include a check, cashier's check, or money order for your initial payment based on the payment option you selected (20% of offer amount or first month's installment).				
	Include a separate check, cashier's check, or money order for the applica- tion fee (\$150).				
	Make both payments payable to the "United States Treasury."				
	If you meet the Low Income Certification guidelines, the initial payment and application fee are not required.				
Step 7 – Mail the application pack-	Make a copy of your application package and keep it for your records.				
age	Mail the application package to the appropriate IRS facility. See page 23 for details, Application Checklist.				

# **IMPORTANT INFORMATION**

After you mail your application, continue to:	File all federal tax returns you are legally required to file.				
	Make all federal estimated tax payments and tax deposits that are due for current taxes.				
	Reply to IRS requests for additional information within the timeframe speci- fied. Failure to reply timely to requests for additional information could result in the return of your offer without appeal rights.				

Form <b>433-A</b>	(OIC)
(March 2011)	. ,

# (

## Department of the Treasury - Internal Revenue Service

# **Collection Information Statement for Wage Earners and** Self-Employed Individuals

## Use this form if you are

- An individual who owes income tax on a Form 1040, U.S. Individual Income Tax Return
- · An individual with a personal liability for Excise Tax
- · An individual responsible for a Trust Fund Recovery Penalty
- · An individual who is personally responsible for a partnership liability

- An individual member of a limited liability company (LLC) that is a disregarded entity
- · An individual who is self-employed or has self-employment income. You are considered to be self-employed if you are in business for yourself, or carry on a trade or business.

Wage earners Complete sections 1, 3, 6, and 7 including signature line on page 7. Self-employed individuals Complete all sections and signature line on page 7

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

Section 1 Personal and Household Information								
Last Name			First Name			Date	of Birth <i>(mm/dd/yyyy)</i>	Social Security Number
Marital status     Home Address (Street, City, State, ZIP Code)       Married     Unmarried			Do you: Own your home Rent Other (specify e.g., share rent, live with relative, etc.)					
County of Resident	ce				Mailing Address (if d	lifferent f	rom above or Post Office Bo	x number)
Primary Phone		Secondary	Phone					
()	-	()	-					
Occupation					Employer's Address	(Street,	City, State, ZIP Code)	
Employer's Name								
Provide information	on about your s	pouse.						
Spouse's Last Nam	ie		First Name			Date of Birth (mm/dd/yyyy) Social Security Number		
Occupation					Employer's Address (Street, City, State, ZIP Code)			
Employer's Name								
Provide information	on for all other	persons in	the househo	old or clain	ned as a dependent.			
	Name		Age		Relationship		Claimed as a depender on your Form 1040?	t Contributes to household income?
							🗌 Yes 🗌 No	🗌 Yes 🗌 No
							🗌 Yes 🗌 No	Yes No
							Yes No	Yes No
							Yes No	Yes No
Section 2				Self-emp	loyed Informatic	on		
lf you or your spo	use is self-emp	loyed, com						
Is your business a	sole proprietorsh	ip (filing Sch	edule C)?		Address of Business	S (If othe	r than personal residence)	
Yes No								
Name of Business								
Business Telephone Number Employer Identification Number		on Number	er Business Website Trade Name		Trade Name or dba			
Description of Business Total Number of Employees		Frequency of Tax D	eposits	Average Gross Monthl Payroll \$	у			

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Section 2	Self-employed In	nformation - (Continued)				
Do you or your spouse have any other busin	ness interests?	Business Address (Street, City, State, ZIP code)				
Yes (Percentage of ownership:	) 🗌 No					
Business Name						
Business Telephone Number Busin	ness Identification Number					
( ) <u>-</u>						
Type of business (Select one)						
Partnership     Single member LLC	LLC Corporati	on 🗌 Other				

## Section 3

**Personal Asset Information** 

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

### Cash and Investments (domestic and foreign)

Enter the total amount available for each of the following (*if additional space is needed include attachments*). Use the **most current** statement for each type of account, such as checking, savings, money market and online accounts, stored value cards (*such as, a payroll card from an employer*), investment and retirement accounts (*IRAs, Keogh, 401(k) plans, stocks, bonds, mutual funds, certificates of deposit*), life insurance policies that have a cash value, and safe deposit boxes.

Bank Account: Checking Savings Money Market Onl	ine Account 🗌 Stored Value Card
Bank Name Account Num	ber
	(1a) \$
Bank Account: Checking Savings Money Market Onl	ine Account Stored Value Card
Bank Name Account Num	
	(1b) \$
Total value of bank accounts from attachment	(1c) \$
	Add lines (1a) through (1c) = (1) \$
Investment Account: Stocks Bonds Other	
Name of Financial Institution Account Num	ber
Current Market Value	Less Loan Balance
\$ X.8 = \$	\$= (2a) \$
Investment Account: Stocks Bonds Other	
Name of Financial Institution Account Num	ber
Current Market Value	Less Loan Balance
\$ X .8 = \$	= (2b) \$
Total of investment accounts from attachment. [current market value X.8 le	ss loan balance(s)] (2c) \$
	Add lines (2a) through (2c) = (2) \$
Retirement Account: 401k IRA Other	
Name of Financial Institution Account Num	ber
Current Market Value	Less Loan Balance
\$ X.7 = \$	= (3a) \$
Retirement Account: 401k IRA Other	
Name of Financial Institution Account Num	ber
Current Market Value	Less Loan Balance
\$ X.7 = \$	\$ = (3b) \$
Total of investment accounts from attachment. [current market value X .7 le	ess loan balance(s)] (3c) \$
	Add lines (3a) through (3c) = (3) \$

				Page 3 of 7
Section 3 Pers	sonal Ass	et Information - (Continued)		
Cash value of life insurance policies				
Name of Insurance Company		Policy Number		
Current Cash Value		n Balance	-	
\$	- \$		= (4a) \$	;
Total of life insurance policies from attachment.	Less Any	Loan Balance(s)		
\$	- \$		= (4b) \$	
		Add lines (4a) through (4b)	= (4) \$	i
Real Estate (Enter information about any house, co	ondo, co-op,	time share, etc. that you own or are buyi	ng)	
Property Address (Street Address, City, State, ZIP Code)		Primary Residence Yes No		
		County and Country	_	
How is property titled? (joint tenancy, etc.)?		Description of Property		
Current Market Value	Less L	oan Balance <i>(Mortgages, etc.)</i>	_	
\$ X .8 = \$	\$	Total Value of Real Estate	= (5a) \$	i
Property Address (Street Address, City, State, ZIP Code)		Primary Residence Yes No		
		County and Country		
How is property titled? (joint tenancy, etc.)?		Description of Property	_	
Current Market Value	Less L	oan Balance <i>(Mortgages, etc.)</i>	_	
\$X.8 = \$	\$	Total Value of Real Estate	= (5b) \$	i
Property Address (Street Address, City, State, ZIP Code)		Primary Residence Yes No		
		County and Country		
How is property titled? /ioint tenancy etc.)?		Description of Property	_	

\$	X .8 = \$	\$	Total Value of Real Estate =	(5b) \$
Property Address (S	Street Address, City, S	State, ZIP Code)	Primary Residence Yes No	
			County and Country	
How is property title	ed? (joint tenancy, etc	c.)?	Description of Property	
Current Market Valu	ue	Less	Loan Balance <i>(Mortgages, etc.)</i>	-
\$	X .8 = \$	\$	Total Value of Real Estate =	(5c) \$
Total value of prope	erty(s) from attachr	nent [current market value X	.8 less any loan balance(s)]	(5d) \$
			Add lines (5a) through (5d) =	(5) \$
Vehicles (Enter info	ormation about any o	cars, boats, motorcycles, etc.	that you own or lease)	
Vehicle Make	Year Mode	el Mileage	Lease Monthly Lease/Loan	
			Loan Amount \$	
Current Market Val				
\$	X .8 = \$	\$	Total value of vehicle (if the vehicle is leased, enter 0 as the total value) =	(6a) \$
Vehicle Make	Year Mode	el Mileage	Lease Monthly Lease/Loan	
			Loan Amount \$	
Current Market Val	ue	Less Loan		
\$	X.8 = \$	_ \$	Total value of vehicle (if the vehicle is leased, enter 0 as the total value) =	(6b) \$
Vehicle Make	Year Mode	el Mileage	Lease Monthly Lease/Loan	
			Loan Amount \$	
Current Market Val				
\$	X.8 = \$	- \$	Total value of vehicle (if the vehicle	

\_ is leased, enter 0 as the total value) = (6c) \$

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Section 3 Personal Asset Information - (Continued)	
Total value of vehicles listed from attachment [current market value X .8 less any loan balance(s)]	(6d) \$
Add lines (6a) through (6d) =	(6) \$
Other valuable items (artwork, collections, jewelry, items of value in safe deposit boxes, etc).	•
Description of asset:	
Current Market Value Less Loan Balance	-
\$ X .8 = \$ \$=	(7a) \$
Description of asset:	
Current Market Value Less Loan Balance	
\$ X .8 = \$ \$=	(7b) \$
Total value of valuable items listed from attachment [current market value X .8 less any loan balance(s)]	(7c) \$
Add lines (7a) through (7c) =	(7) \$
Section 4 Business Asset Information (for Self-Employed)	
List business assets such as bank accounts, tools, books, machinery, equipment, business vehicles and owned/leased/rented. If additional space is needed, attach a list of items.	real property that is
Bank Account: Checking Savings Money Market Online Account Stored Value Card	
Bank Name Account Number	
	(8a) \$
Bank Account: Checking Savings Money Market Online Account Stored Value Card	-
Bank Name Account Number	(8b) \$
Total value of bank accounts from attachment	(8c) \$
Add lines (8a) through (8c) for total bank account(s) =	(8) \$
Description of asset:	
Current Market Value Less Loan Balance	
\$ X .8 = \$ \$ =	(9a) \$
Description of asset:	
Current Market Value Less Loan Balance	
\$ X .8 = \$ \$=	(9b) \$
Total value of assets listed from attachment [current market value X .8 less any loan balance(s)]	(9c) \$
Add lines (9a) through (9c) =	(9) \$
IRS allowed deduction (2011 allowance) –	(10) \$ 4,180
Enter the value of line (9) minus line (10). If less than zero enter zero. =	(11) \$
Notes Receivable	
Do you have notes receivable? Yes No	
If yes, attach current listing which includes name and amount of note(s) receivable. Enter the total value of notes receivable from attached listing	(12) \$
Do not include amount on the lines with a letter beside the number.	Box 1 Total Available Assets
Add lines (1) through (8), line (11), and line (12) and enter the amount in Box 1 =	φ

Section 5

### Business Income and Expense Information (for Self-Employed)

Note: If you provide a current profit and loss (P&L) statement for the information below, enter the total gross monthly income on line 18 and your monthly expenses on line 29 below. Do not complete lines (13) - (17) and (19) - (29). You may use the amounts claimed for income and expenses on your most recent Schedule C; however, if the amount has changed significantly within the past year, a current P&L should be submitted to substantiate the claim.

Business Income (You may average 6-12 months income/receipts to determine your Gross monthly income/receipts.)				
Gross receipts		(13) \$		
Gross rental income		(14) \$		
Interest income		(15) \$		
Dividends		(16) \$		
Other income		(17) \$		
	Gross Monthly Business Income - Add lines (13) through (17) =	(18) \$		

#### Business Expenses (You may average 6-12 months expenses to determine your average expenses.)

Subtract line (30) from line (18) and enter the amount in Box 2 =	Box 2 Net Business Income \$
Total Monthly Business Expenses - Add lines (19) through (29) =	(30) \$
Other business expenses (include a list)	(29) \$
Other secured debts (not credit cards)	(28) \$
Current Business Taxes (e.g., Real estate, excise, franchise, occupational, personal property, sales and employer's portion of employment taxes)	(27) \$
Business Insurance	(26) \$
Vehicle costs (gas, oil, repairs, maintenance)	(25) \$
Utilities/telephones	(24) \$
Supplies (items used to conduct business and used up within one year, e.g., books, office supplies, professional equipment, etc.)	(23) \$
Rent	(22) \$
Gross wages and salaries	(21) \$
Inventory purchased (e.g., goods bought for resale)	(20) \$
Materials purchased (e.g., items directly related to the production of a product or service)	(19) \$

#### Section 6

#### Monthly Household Income and Expense Information

Enter your household's gross monthly income. The information below is for yourself, your spouse, and anyone else who contributes to your household's income. The entire household includes spouse, significant other, children, and others who contribute to the household. This is necessary for the IRS to accurately evaluate your offer.

Monthly house	hold income					
Primary taxpay Wages	Social Security	Pension(s)	_	Total primary taxpayer	(24)	¢
\$	+ \$	+ \$	=	income	(31)	<b>þ</b>
Spouse/Other of	contributors to the household					
Wages	Social Security	Pension(s)				
\$	+ \$	+ \$	=	Total spouse/other contributors income	(32)	\$
Interest and divid	dends				(33)	\$
Distributions (suc	ch as, income from partnerships, sub	-S Corporations, etc.)			(34)	\$
Net rental income					(35)	\$
Net business income from Box 2					(36)	\$
Child support received by the household					(37)	\$
Alimony received by the household					(38)	\$
Additional household income					(39)	\$
Add lines (31) through (39) and enter the amount in Box 3 =					В \$	ox 3 Total Household Income

## Monthly Household Income and Expense Information

# Section 6

#### Monthly Household Expenses

Enter your average monthly expenses. Note: Expenses may be adjusted based on IRS Collection Financial Standards.

Food, clothing, and miscellaneous (e.g., housekeeping supplies, personal care products). A reasonable estimate of these expenses may be used.	(41) \$
Housing and utilities (e.g., rent or mortgage payment and average monthly cost of property taxes, home insurance, maintenance, dues, fees and utilities including electricity, gas, other fuels, trash collection, water, cable, telephone, and cell phone).	(42) \$
Vehicle loan and/or lease payment(s)	(43) \$
Vehicle operating costs (e.g., average monthly cost of maintenance, repairs, insurance, fuel, registrations, licenses, inspections, parking, tolls, etc.). A reasonable estimate of these expenses may be used.	(44) \$
Public transportation costs (e.g., average monthly cost of fares for mass transit such as bus, train, ferry, taxi, etc.). A reasonable estimate of these expenses may be used.	(45) \$
Health insurance premiums	(46) \$
Out-of-pocket heath care costs (e.g. average monthly cost of prescription drugs, medical services, and medical supplies like eyeglasses, hearing aids, etc.)	(47) \$
Court-ordered payments (e.g., monthly cost of any alimony, child support, etc.)	(48) \$
Child/dependent care payments (e.g., daycare, etc.)	(49) \$
Life insurance premiums	(50) \$
Taxes (e.g., monthly cost of federal, state, and local tax, personal property tax, etc.)	(51) \$
Other secured debts (e.g., any loan where you pledged an asset as collateral not previously listed). Do not include unsecured debt such as credit cards.	(52) \$
Add lines (41) through (52) and enter the amount in Box 4 =	Box 4 Household Expenses \$
Subtract Box 4 from Box 3 and enter the amount in Box 5 =	Box 5 Remaining Monthly Income \$
Soction 7 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 "Remaining Monthly Income" (Box 5) by 48 to get "Future Remaining Income" (Box 6).

Enter the total from Box 5 here \$ X 48 = **Box 6 Future Remaining Income** 

If you will pay your offer in more than 5 months (Payment Option 2), multiply "Remaining Monthly Income" (*Box 5*) by 60 to get "Future Remaining Income" (Box 7).

Enter the total from Box 5 here
\$

X 60 =

Box 7 Future Remaining Income

Determine your minimum offer amount by adding the total available assets from Box 1 to amount in either Box 6 or Box 7.

Enter the amount from Box 1 here		Enter the amount from either Box 6 or Box 7	_	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, "Explanation of Circumstances."

Section 7	Other Information			
Additional information IRS needs to consider settlement of your tax debt. If you or your business are currently in a	Are you the beneficiary of a trust, estate,			
bankruptcy proceeding, you are not eligible	Are you currently in bankruptcy?	Have you filed bankruptcy in the past 10 years?		
to apply for an offer.		Yes No		
	Discharge/Dismissal Date (mm/dd/yyyy)	County Filed		
	Have you been party to a lawsuit?			
	Yes No			
	If yes, date the lawsuit was resolved: (m	m/dd/yyyy)		
	In the past 10 years, have you transferred any assets for less than their full value?			
	Yes No			
	Have you lived outside the U.S. for 6 months or longer in the past 10 years?			
	Do you have any funds being held in trust by a third party?			
	Yes No If yes, how much \$	Where:		
Section 8	Signatures			
Under penalties of perjury, I declare that I have is true, correct, and complete.	examined this offer, including accompa	anying documents, and to the best of my knowledge it		
Signature of Taxpayer		Date (mm/dd/yyyy)		
Signature of Taxpayer		Date (mm/dd/yyyy)		

# Remember to include all applicable attachments listed below.

Copies of the most recent pay stub, earnings statement, etc., from each employer
Copies of bank statements for the three most recent months
Copies of the most recent statement, etc., from all other sources of income such as pensions, Social Security, rental income, interest and dividends, court order for child support, alimony, and rent subsidies
Copies of the most recent statement for each investment and retirement account
Copies of the most recent statement from lender(s) on loans such as mortgages, second mortgages, vehicles, etc., showing monthly payments, loan payoffs, and balances
List of Notes Receivable, if applicable
Accountant's depreciation schedules, if applicable
Documentation to support any special circumstances described in the "Explain special circumstances" section on page 2 of Form 656, if applicable
Attach a Form 2848, <i>Power of Attorney</i> , 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.

**Collection Information Statement for Businesses** 

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.

#### 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

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

Section 1		Busi	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 di	Mailing address (if different from above or Post Office Box number)		
( ) _	( )	-				
Business website address	-					
				se a payroll service provider?		
			Yes No			
Federal Contractor	I otal Numb	er of Employees	If yes, list provider na	ame and address (Street, City, State, ZIP Code)		
	A		_			
Frequency of tax deposits	Average gro	oss monthly payroll				
Provide information about all p business. Include attachments	artners, offic		najor shareholders (for	reign and domestic), etc., associated with the		
Last Name		First Name		Title		
	1					
Percent of Ownership	Social Secu	urity Number	Home address (Street, City, State, ZIP Code)			
	-	-				
Primary Phone	Secondary	Phone				
( ) <u> </u>	( )	-				
Last Name		First Name		Title		
Percent of Ownership	Social Secu	urity Number	Home address (Stree	t, City, State, ZIP Code)		
	-	-				
Primary Phone Secondary Phone						
( ) _	( )	-				
Last Name		First Name		Title		
	0	unite a National de la co				
Percent of Ownership Social Security Number		Home address (Stree	et, City, State, ZIP Code)			
Drimon / Dhono	-	-	_			
Primary Phone ( )	Secondary	FILUITE				

## **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 Ma	rket 🗌 Online Account 📋 Stored Value Card	
Bank Name	Account Number	*
		(1a) \$
Bank Account: Checking Savings Money Ma	rket 🗌 Online Account 🗌 Stored Value Card	
Bank Name	Account Number	
		(1b) \$
Bank Account: Checking Savings Money Ma	rket 🗌 Online 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 marked	(2c) \$	
	Add lines (2a) through (2c) =	(2) \$
Notes receivable - Do you have notes receivable? Yes		
If yes, attach current listing which includes name and amoun		
	Total notes receivable from attached listing =	(3) \$

# **Business Asset Information - (Continued)**

If the business owns more pr	roperties, vehicles	s, or equipment than	shown in this form,	please list on an attachment.

Real Estate (Buildings, Lots, Commercial Property, etc.) If any total below results in a negative number, enter "0".						
Property Address (Street Address, City, State, ZIP Code)			Property Description			
				_		
Count		County and C	Country			
Current Market Value Less Loan Balance (Mortgages, etc.)			-			
\$ X .8 = \$				Total Value of Real Estate =	· (4a) \$	
Property Address (Street Address, City			Property Des			
			County and C	Country		
Ourse Market Market					_	
Current Market Value			oan Balance (i			
\$X.8 = \$				Total Value of Real Estate =		
Total value of property(s) listed from	attachment	[current market val	lue X .8 less a	ny loan balance(s)]	(4c) \$	
				Add lines (4a) through (4c) =	(4) \$	
Business Vehicles (cars, boats, moto	rcycles, traile	-	al space is nee		1	
Vehicle Make	Year	Model		Mileage or Use Hours		
Lease Monthly Lease/Loan	Amount				-	
Loan \$						
Current Market Value		Less Loan E		al value of vehicle (if the vehicle		
\$X.8 = \$	1	\$		eased, enter 0 as the total value) =		
Vehicle Make	Year	Model		Mileage or Use Hours		
Lease Monthly Lease/Loan Amount			-			
Loan \$						
Current Market Value		Less Loan B		al value of vehicle (if the vehicle		
\$X.8 = \$	I	\$		eased, enter 0 as the total value) =		
Vehicle Make	Year	Model		Mileage or Use Hours		
Lease Monthly Lease/Loan	Amount				-	
Loan \$						
Current Market Value		Less Loan E		al value of vehicle (if the vehicle	-	
\$ X .8 = \$		\$		al value of vehicle (if the vehicle eased, enter 0 as the total value) =		
Total value of vehicles listed from at	achment [ci	urrent market value	X.8 less any	loan balance(s)]	(5d) \$	
				Add lines (5a) through (5d) =	(5) \$	
Other Business Equipment						
Current Market Value		Less Loan E	Balance	Total value of any inmost "		
\$ X .8 = \$		\$		Total value of equipment (if eased, enter 0 as the total value) =		
Total value of equipment listed from	attachment	[current market val	ue X .8 less a	ny loan balance(s)]	(6b) \$	
IRS allowed exemption -				(6c) \$ 4,120		
<b>Total value of all business equipment =</b> If number is less than zero, enter zero.				(6) \$		
Do not include the amount on lines with a letter beside the number.				David Tatal Assolibits Associa		
Add lines (1) through (6) and enter the amount in Box 1 =				\$		

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).

Section 4	Business Expense Information	
	Add lines (7) through (11) and enter the amount in Box 2 =	Box 2 Total Business Income \$
Other income (Specify on attachment)		(11) \$
Dividends		(10) \$
Interest income		(9) \$
Gross rental income		(8) \$
Gross receipts		(7) \$

ion 4	<b>Business Expense Information</b>
1011 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).

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

## 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 "Remaining Monthly Income" (Box 4) by 48 to get "Future Remaining Income."

Enter the amount from Box 4 here	Box 5 Future Remaining Income			
\$	X 48 = \$			
If you will pay your offer in more than 5 months (Payment Option 2), multip Income."	ly "Remaining Monthly Income" (from Box 4) by 60 to get "Future Remaining			
Enter the amount from Box 4 here	X 60 = 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, "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 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 ( <i>e.g., subsidiary or parent companies</i> )? Yes No If yes, list the Name and Employer Identification Number:		
	Do any related parties <i>(e.g., partners, officers, employees)</i> owe money to the business?		
	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?		
	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 lf 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)

R	Remember to include all applicable attachments from list 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.

# Offer in Compromise

Attach Application Fee and Payment (check or money order) here.					
Section 1	Your Contact Information		IRS Received Date		
Your First Name, Mid	dle Initial, Last Name				
If a Joint Offer, Spous	e's First Name, Middle Initial, Last Name				
Your Physical Home	Address (Street, City, State, ZIP Code)				
Mailing Address (if dif	ferent from above or Post Office Box number)				
Business Name					
Your Business Addre	ss (Street, City, State, ZIP Code)				
Social Security Numb	er (SSN)	Employer Identification Nu	umber		
(Primary)	(Secondary)	(EIN)	(EIN not included in offer)		
		-	-		
Section 2	Т	ax Periods			
In the following agreement, the pronoun "we" may be assumed in place of "I" when there are joint liabilities and both parties are signing this agreement.         I submit this offer to compromise the tax liabilities plus any interest, penalties, additions to tax, and additional amounts required by law for the tax type and period(s) marked below:         1040 Income Tax-Year(s)         1120 Income Tax-Year(s)         941 Employer's Quarterly Federal Tax Return - Quarterly period(s)         940 Employer's Annual Federal Unemployment (FUTA) Tax Return - Year(s)         Trust Fund Recovery Penalty as a responsible person of <i>(enter corporation name)</i> for failure to pay withholding and Federal Insurance Contributions Act taxes (Social Security taxes), for period(s) ending					
Other Federal Ta	ax(es) [specify type(s) and period(s)]				
Note: If you nee attachment.	d more space, use attachment and title it "Attachr	nent to Form 656 dated	." Make sure to sign and date the		
Section 3	Rea	ason for Offer			
Doubt as to Col	lectibility - I have insufficient assets and income	to pay the full amount.			
exceptional circu			cient assets to pay the full amount, but due to my unfair and inequitable. I am submitting a written		

#### Explanation of Circumstances (Add additional pages, if needed)

The IRS understands that there are unplanned events or special circumstances, such as serious illness, where paying the full amount or the minimum offer amount might impair your ability to provide for yourself and your family. If this is the case and you can provide documentation to prove your situation, then your offer may be accepted despite your financial profile. Describe your situation below and attach appropriate documents to this offer application.

## Section 4

## Low Income Certification (Individuals Only)

Do you qualify for Low-Income Certification? You qualify if your gross monthly household income is less than or equal to the amount shown in the chart below based on your family size and where you live. If you qualify, you are not required to submit any payments during the consideration of your offer.

#### Check here if you qualify for Low-Income Certification based on the monthly income guidelines below.

48 contiguous states and D.C.	Hawaii	Alaska
\$2,256	\$2,596	\$2,819
\$3,035	\$3,492	\$3,794
\$3,815	\$4,388	\$4,769
\$4,594	\$5,283	\$5,744
\$5,373	\$6,179	\$6,719
\$6,152	\$7,075	\$7,694
\$6,931	\$7,971	\$8,669
\$7,710	\$8,867	\$9,644
\$ 779	\$ 896	\$ 975
	\$2,256 \$3,035 \$3,815 \$4,594 \$5,373 \$6,152 \$6,931 \$7,710	\$2,256       \$2,596         \$3,035       \$3,492         \$3,815       \$4,388         \$4,594       \$5,283         \$5,373       \$6,179         \$6,152       \$7,075         \$6,931       \$7,971         \$7,710       \$8,867

## Section 5

#### Payment Terms

#### Enter the amount of your offer \$

Check one of the payment options below to indicate how long it will take you to pay your offer in full:

#### **Payment Option 1**

#### Check here if you will pay your offer in five or fewer payments:

Enclose a check for 20% of the offer amount (waived if you are an individual and met the requirements for Low-Income certification) and fill in the amount(s) and date(s) of your future payment(s).

20% of the offer amount is \$	_ leaving a balance of \$	to be paid as follows after the acceptance of your offer:
Amount of payment 1 \$	date	
Amount of payment 2 \$	date	
Amount of payment 3 \$	date	
Amount of payment 4 \$	date	
Amount of payment 5 \$	date	

#### Payment Option 2

Check here if you will	pay your offer in full in more than five months and pa	y in monthly inst	tallments	
Enclose a check for one	e month's installment (waived if you are an individual and	met the requireme	ents for Low-Income certification)	
\$ is b	eing submitted with the Form 656 and then \$	on the	(day) of each month thereafter fo	or a
total of mo	onths. Total payments must equal the total Offer Amount.			

You must continue to make these monthly payments while the IRS is considering the offer. Failure to make regular monthly payments will cause your offer to be returned.

#### Designation of Down Payment and Deposit (Optional)

If you want your payment to be applied to a specific tax year and a specific tax debt, please tell us the tax form \_\_\_\_\_\_ and Tax Year/Quarter \_\_\_\_\_\_. If you do not designate a preference, we will apply any money you send in to the governments best interest.

If you are paying more than the required payment when you submit your offer and want any part of that payment treated as a deposit, check the box below and insert the amount.

I am making a deposit of \$

with this offer.

Section 7

Source of Funds

Tell us where you will obtain the funds to pay your offer. You may consider borrowing from friends and/or family, taking out a loan, or selling assets.

#### Include separate checks for the payment and application fee.

Make payable to the "United States Treasury" and attach to the front of your Form 656, Offer in Compromise. **Do not send cash.** Send a separate application fee with each offer; do not combine it with any other tax payments, as this may delay processing of your offer. Your offer will be returned to you if the application fee and the required payments are not properly remitted, or if your check is returned for insufficient funds.

Section 8	Offer Terms
By submitting this offer, I/we hav	e read, understand and agree to the following terms and conditions:
Terms, Conditions, and Legal Agreement	a) I request that the IRS accept the offer amount listed in this offer application as payment of my outstanding tax debt (including interest, penalties, and any additional amounts required by law) as of the date listed on this form. I authorize the IRS to amend Section 2 on page 1 in the event I failed to list any of my assessed tax debt.
IRS will keep my payments, fees, and some refunds.	b) I voluntarily submit the payments made on this offer and <b>understand that they are not refundable even if I</b> withdraw the offer or the IRS rejects or returns the offer. Unless I designated how to apply the required payment (page 3 of this application), the IRS will apply my payment in the best interest of the government, choosing which tax years and tax liabilities to pay off. The IRS will also keep my application fee unless the offer is not accepted for processing.
	c) The IRS will keep <b>any</b> refund, including interest, that I might be due for tax periods extending through the calendar year in which the IRS accepts my offer. I cannot designate that the refund be applied to estimated tax payments for the following year or the accepted offer amount. If I receive a refund after I submit this offer for any tax period extending through the calendar year in which the IRS accepts my offer, I will return the refund as soon as possible.
	d) The IRS will keep any monies it has collected prior to this offer and any payments that I make relating to this offer that I did not designate as a deposit. Only amounts that exceed the mandatory payments can be treated as a deposit. Such a deposit will be refundable if the offer is rejected or returned by the IRS or is withdrawn. I understand that the IRS will not pay interest on any deposit. The IRS may seize ("levy") my assets up to the time that the IRS official signs and accepts my offer as pending.
Pending status of an offer and right to appeal	e) Once an authorized IRS official signs this form, my offer is considered pending as of that signature date and it remains pending until the IRS accepts, rejects, returns, or terminates my offer or I withdraw my offer. An offer will be considered withdrawn when the IRS receives my written notification of withdrawal by personal delivery or certified mail or when I inform the IRS of my withdrawal by other means and the IRS acknowledges in writing my intent to withdraw the offer.
	f) I waive the right to an Appeals hearing if I do not request a hearing within 30 days of the date the IRS notifies me of the decision to reject the offer.
I must comply with my future tax obligations and understand I remain liable for the full amount of my tax debt until all terms and conditions of this offer have been met.	g) I will file tax returns and pay required taxes for the five year period beginning with the date of acceptance of this offer, or until my offer is paid in full, whichever is longer. If this is an offer being submitted for joint tax debt, and one of us does not comply with future obligations, only the non-compliant taxpayer will be in default of this agreement.
	h) The IRS will not remove the original amount of my tax debt from its records until I have met all the terms and conditions of this offer. Penalty and interest will continue to accrue until all payment terms of the offer have been met. If I file for bankruptcy before the terms are fully met, any claim the IRS files in the bankruptcy proceedings will be a tax claim.
	i) Once the IRS accepts my offer in writing, I have no right to contest, in court or otherwise, the amount of the tax debt.
I understand what will happen if I fail to meet the terms of my offer (e.g., default).	j) If I fail to meet any of the terms of this offer, the IRS may levy or sue me to collect any amount ranging from the unpaid balance of the offer to the original amount of the tax debt without further notice of any kind. The IRS will continue to add interest, as Section 6601 of the Internal Revenue Code requires, on the amount the IRS determines is due after default. The IRS will add interest from the date I default until I completely satisfy the amount owed.
I agree to waive time limits provided by law.	k) To have my offer considered, I agree to the extension of the time limit provided by law to assess my tax debt (statutory period of assessment). I agree that the date by which the IRS must assess my tax debt will now be the date by which my debt must currently be assessed plus the period of time my offer is pending plus one additional year if the IRS rejects, returns, or terminates my offer or I withdraw it. (Paragraph (e) of this section defines pending and withdrawal). I understand that I have the right not to waive the statutory period of assessment or to limit the waiver to a certain length or certain periods or issues. I understand, however, that the

Section 8 - (Continued)
-------------------------

	IRS may not consider my offer if I refuse to waive the statutory period of assessment or if I provide only a limited waiver. I also understand that the statutory period for collecting my tax debt will be suspended during the time my offer is pending with the IRS, for 30 days after any rejection of my offer by the IRS, and during the time that any rejection of my offer is being considered by the Appeals Office.	
l understand the IRS may file a Notice of Federal Tax Lien on my property.	I) The IRS may file a Notice of Federal Tax Lien during the offer investigation. Generally, the IRS files a Notice of Federal Tax Lien to protect the Government's interest on offers that will be paid over time. This tax lien will be released when the payment terms of the accepted offer have been satisfied.	
I authorize the IRS to contact relevant third parties in order to process my offer	m) By authorizing the IRS to contact third parties including credit bureaus, I understand that I will not be notified of which third parties the IRS contacts as part of the offer application process, as stated in section 7602(c) of the Internal Revenue Code.	
l am submitting an offer as an individual for a joint liability	n) I understand if the liability sought to be compromised is the joint and individual liability of myself and my co-obligor(s) and I am submitting this offer to compromise my individual liability only, then if this offer is accepted, it does not release or discharge my co-obligor(s) from liability. The United States still reserves all rights of collection against the co-obligor(s).	

## Section 9

Signatures

Under penalties of perjury, I declare that I have examined this offer, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of Taxpayer		Date (mm/dd/yyyy)
Signature of Taxpayer		Date (mm/dd/yyyy)
Section 10	Paid Preparer Use Only	

Signature of Preparer

Name of Paid Preparer	Date (mm/dd/yyyy)	Preparer's CAF no. or PTIN

Firm's Name, Address, and ZIP Code

Include a valid, signed Form 2848 or 8821 with this application, if one is not on file.				
Section 11 Th	Third Party Designee			
Do you want to allow another person to discuss this offer with the	IRS? Yes	No		
<i>If yes</i> , provide designee's name		Telephone Numbe	er	
IRS Use Only I accept the waiver of the statutory period of limitations on assessment for the Internal Revenue Service, as described in Section 8 (k).				
Signature of Authorized Internal Revenue Service Official	Title		Date (mm/dd/yyyy)	

### **Privacy Act Statement**

We ask for the information on this form to carry out the internal revenue laws of the United States. Our authority to request this information is Section 7801 of the Internal Revenue Code.

Our purpose for requesting the information is to determine if it is in the best interests of the IRS to accept an offer. You are not required to make an offer; however, if you choose to do so, you must provide all of the taxpayer information requested. Failure to provide all of the information may prevent us from processing your request.

If you are a paid preparer and you prepared the Form 656 for the taxpayer submitting an offer, we request that you complete and sign Section 10 on Form 656, and provide identifying information. Providing this information is voluntary. This information will be used to administer and enforce the internal revenue laws of the United States and may be used to regulate practice before the Internal Revenue Service for those persons subject to Treasury Department Circular No. 230, Regulations Governing the Practice of Attorneys, Certified Public Accountants, Enrolled Agents, Enrolled Actuaries, and Appraisers before the Internal Revenue Service. Information on this form may be disclosed to the Department of Justice for civil and criminal litigation.

We may also disclose this information to cities, states and the District of Columbia for use in administering their tax laws and to combat terrorism. Providing false or fraudulent information on this form may subject you to criminal prosecution and penalties.

# **APPLICATION CHECKLIST**

Review the entire application and verify that it is complete.

Forms 433-A (OIC),		Did you complete	all fields and sign all forms?		
433-B (OIC), and 656		minimum offer cal If not, did you des to offer less than t	offer amount that is greater than or equal to the culated on the Form 433-A (OIC) or Form 433-B (OIC)? cribe the special circumstances that are leading you he minimum in the "Explanation of Circumstances" 656, and did you provide supporting documentation of stances?		
		Did you select a p	ayment option on Form 656?		
			w the IRS to discuss your offer with another person, did "Third-Party Designee" section on the Form 656?		
		If someone other t	han you completed the Form 656, did they sign it?		
		Did you sign and a	attach the Form 433-A (OIC) if applicable?		
		Did you sign and a	attach the Form 433-B (OIC) if applicable?		
		Did you sign and a	attach the Form 656?		
Supporting documentation		Did you include pl	notocopies of all required supporting documentation?		
and additional forms		☐ If you want a third party to represent you during the offer process, did you include a Form 2848 or Form 8821 unless one is already on file?			
Payment		Did you include a check or money order made payable to the "United States Treasury" for the initial payment? (Waived if you meet Low Income Certification guidelines—see Form 656.)			
		"United States Tre	separate check or money order made payable to the asury" for the \$150 application fee? (Waived if you Certification guidelines—see Form 656.)		
Mail your application package to the appropriate IRS facility	Mail the Form 656, 433-A (OIC) and/or 433-B (OIC), and related financi document(s) to the appropriate IRS processing office for your state. You may wish to send it by Certified Mail so you have a record of the date it mailed.		ppropriate IRS processing office for your state. You		
If you reside in:			Mail your application to:		
AK, AL, AZ, CA, CO, HI, ID, KY, LA, MS, TN, TX, UT, WA, WI, WY	МТ	, NV, NM, OR,	Memphis IRS Center COIC Unit P.O. Box 30803, AMC Memphis, TN 38130-0803 1-866-790-7117		

AR, CT, DE, FL, GA, IA, IL, IN, KS, MA, MD, ME, MI, MN, MO, NC, ND, NE, NH, NJ, NY, OH, OK, PA, RI, SC, SD, VT, VA, WV; DC, PR, or a foreign address Holtsville, NY 11742-9007 1-866-611-6191

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