

CNC Example: Brian and Jessica Andrews

Requesting CNC on September 1, 2024 (last 12 months 9/23-8/24)

** IRS Collection Financial Standards used for April 22, 2024 – March 2025*

Personal information:

Family size/ages (for all standards and out-of-pocket medical expense allowance): 4 (49, 48, 12, 7)

Location (for housing expense standard): Tampa, FL (Hillsborough County)

Region (for transportation expense standards): South region-Tampa location

Primary (Brian) was a pilot. Experienced eye disease that disqualified him from flying. Now can only work as in part-time positions.

Financial information:

Own home

Have two vehicles

Spouse is employed year-round; Primary is employed part-time

- Spouse paid bi-monthly
- Neither receive a bonus
- No other sources of income

Brian has medical condition that needs monthly medication. Take standard allowances for:

- Food/Clothing/Misc.
- Transportation expenses

Have no ability to borrow against equity in home due to low income

No access to additional credit- have one credit card for emergencies

Only out of ordinary expenses:

- Housing: lawn service year-round

Tax situation:

Owe \$40,000 (assessed balance is \$35,000)

- 2019: owe \$10,000 (assessed balance is \$8,000)
- 2020: owe \$30,000 (assessed balance is \$27,000)
- Earliest CSED: 90 months
- Filed all required tax returns
- Current withholding is adequate, so Andrews' do not owe for future tax returns

Applicable IRS Collection Financial Standards

- Tampa TX
- South Region, Tampa Location
- Family of 4
- Standards used as of date of CNC request on 9/1/2024

Food, Clothing, and Misc.

- National Standard
- Family of 4

Expense	One Person	Two Persons	Three Persons	Four Persons
Food	\$458	\$820	\$977	\$1,143
Housekeeping supplies	\$44	\$75	\$83	\$82
Apparel & services	\$87	\$157	\$187	\$300
Personal care products & services	\$48	\$80	\$87	\$97
Miscellaneous	\$171	\$279	\$343	\$405
Total	\$808	\$1,411	\$1,677	\$2,027

Housing/utilities:

- Hillsborough County, FL
- Family of 4

	2024 Published ALE Housing Expense for a Family of 1	2024 Published ALE Housing Expense for a Family of 2	2024 Published ALE Housing Expense for a Family of 3	2024 Published ALE Housing Expense for a Family of 4	2024 Published ALE Housing Expense for a Family of 5
Hillsborough County	\$1,912	\$2,245	\$2,366	\$2,638	\$2,681

Transportation:

- Two cars
- South Region, Tampa Location

Ownership Costs		
	One Car	Two Cars
National	\$619	\$1,238
Operating Costs		
Tampa	\$305	\$610

Out-of-pocket medical:

- Family of 4
- All under age 65
- Ave. actual exceeds allowance

	Out of Pocket Costs
Under 65	\$83
65 and Older	\$158

ATP Analysis and Conclusion

Tax owed: \$40,000

Earliest CSED: 90 months

#	Document	Findings	Conclusion
#1	<i>Equity in assets</i> <i>(In this example, ATP IA was not computed for OIC purposes)</i> #1: Equity in Assets Analysis	Taxpayer has \$200,745 in equity in assets; Taxpayer was not able to borrow against equity.	Cannot pay any amount with asset equity; will provide loan denial letters to IRS with financial disclosure.
#2 #3	<i>MDI Summary</i> #2: Average income #3: Average allowable household expenses	MDI using allowable expenses, limited by IRS standards, is negative. Taxpayer does not have ability to pay.	IRS will only allow necessary expenses up to IRS standard amounts. Taxpayer does not have ability to pay because of diminished ability to earn (primary taxpayer has medical condition that does not allow him to work full time). Note from taxpayer’s doctor to be included.
#4	<i>Actual income and expense analysis</i> #4: Actual income and expenses- last 3 and 12 months	Actual MDI is also negative.	
#5	<i>Form 433F, Collection Information Statement</i>	Supports taxpayer’s inability to pay and MDI of (\$462).	
#6	<i>Form 433F Attachments</i> #6: Form 433F Attachment Listing <i>(documents not included for the example)</i>	Provides documentation to support ATP calculations and inability to access equity in assets.	
#7	<i>Cover letter to IRS ACS requesting CNC status</i>	Explains taxpayer’s condition and requests CNC status.	

#1: Equity in assets analysis

- Taxpayer attempted to refinance and get home equity line but was denied by two banks (low income)
- Taxpayer will include both loan denial letters in CNC request to IRS

Form 433A: Equity in Asset Summary (for Currently not collectible and Installment Agreements)

As of date: 9/1/2024		(Complete Form 433A for detail of each asset category)		Net Equity in Assets (FMV less encumbrances)	
433A- Line #	Asset category	Summary of amounts for:	FMV	(loans, attachments) Less: Encumbrances	Equity
Personal Assets					
Cash/Cash Equivalents					
12	Cash				
13c	Bank accounts: checking/personal		\$ 4,500	\$	4,500
14a and 14b	Investments				
14c and 14d	Virtual Currency				
16g	Cash value of life insurance				
17c	Real Property	All property: home and other	\$ 400,000	\$ 211,000	\$ 189,000
18c	Personal Vehicles	All cars/boats/RVs/trailers, etc.	\$ 17,000	\$ 14,555	\$ 2,445
19c	Personal assets	All furniture/personal effects/etc.	\$ 21,000	\$ 16,200	\$ 4,800
Totals- Personal Assets				\$	200,745
Business Assets					
63	Cash				
64c	Cash in banks				
65f	Accounts/notes receivable				
66c	Business assets	All tools/machinery/equipment/etc.			
Totals- Business Assets					

#2: MDI Summary: Average monthly income

Average income:

- Use last 3 months (no bonuses)
- Attach paystubs to ATP IA application

MDI Computation (ability to pay determination for IA/CNC/OIC qualification/OIC offer amount)

Line #	Line #	AVERAGE MONTHLY INCOME	Average Actual	MDI- FINAL	Explanation of averaging time period that is indicative of future income/expenses	Averaging time period	Time period rationale
		Household Income - cash basis					
20-21	30-31	Gross Wages 1:	6000		6000 From paystubs- last three months		This is Brian's normal income in part-time job.
		Gross Wages 2:	500		500 From paystubs- last three months		Was a pilot but had illness that caused him only to be able to take part time work
		Gross Wages 3:					
		Gross Wages 4:					
23	36	Self-employment net income 1:					
24	35	Self-employment net income 2:					
25	34	Net rental income					
32-33	32	Distributions (K-1, IRA, etc.)					
22	33	Proceeds from sale of investments					
26-27	32	Interest and dividend income					
28-29	32	Pension income					
30	37	Social security income					
31	38	Child support received					
32-33	32	Alimony received					
32	32	Employer allowances					
32-33	32	Other income:					
34	Box D	Total Income	6500	6500			

#3: MDI Summary: Average expenses

Average allowable household expenses:

- Food, clothing, misc.: standard taken
- Housing/utilities: actual expenses are less than standard
- Transportation: payments less than standard

Form 433A - Form 433A-OIC		AVERAGE MONTHLY HOUSEHOLD EXPENSES				Explanation of averaging time period that is indicative of future income/expenses	
Line #	Line #	Household expenses paid: cash basis	Average Actual	Standard Allowed	IRS ATP- FINAL	Averaging time period	Time period rationale
* denotes standard applies							
Food, clothing, and other expenses*							
		Food	1143	1143	1143	1143	Yes
		Housekeeping supplies	82	82	82		
		Apparel and services	300	300	300		
		Personal care products and services	97	97	97		
		Miscellaneous	405	405	405		
35	39	TOOL FCM	2027	2027	2027		
Housing and utilities:*							
		Mortgage/rent	1,340		1,340		
		HOA dues	-		-		
		Taxes	-		-		
		Insurance	-		-		
		Electric	198		198		
		Gas/heating oil	-		-		
		Home phone	-		-		
		Cell phone	200		200		
		Water	-		-		
		Repairs/maintenance	100		100		
		Internet/cable	110		110		
		Other: trash					
		Other:					
36	40	TOTAL HOUSING/UTILITIES	1948	2638	1948		Lower of actual or standard
Transportation Expenses:							
		Ownership: Car payment- car 1*	400	629	400		
	41	Ownership: Car payment- car 2*	450	629	450		
		Operating costs: Car 1*	305	305	305		
	42	Operating costs: Car 2*	305	305	305		
		Public transportation*					
39	43	TOTAL TRANSPORTATION	1460	1868	1460		n/a

#3: MDI Summary: Average expenses

Average allowable household expenses (continued)

- Out-of-pocket medical expenses: actual taken
- Other expenses: allowed as necessary

Line #	Line #	Out-of-pocket medical expenses	Average Actual	Allowance	IRS ATP- FINAL	Standard allowance taken (Y/N)?	Taxpayer condition
41	45	TOTAL OUT-OF-POCKET MEDICAL OR ALLOWANCE	347	332	347	Ave- last 3 months	stabilized, will have \$347 as average monthly expenses
40	44	Other Expenses:					
44	48	Health insurance	580		580	See paystubs	
		Term life insurance	50		50	See paystubs for Jessica	
		Taxes paid:					
45	48	Federal taxes paid	550		550	See paystubs	
		FICA/Medicare taxes paid					
		State/local taxes paid					
48		Mandatory retirement contributions					
		Other Actual Expenses:					
48		Accounting/legal fees					
48		Add to 50, if allowed					
43	47	Charitable contributions					
42	46	Child/dependent care					
48		Court ordered payments (alimony, child support, other)					
46	50	Education					
48		Secured debt payments					
48		Add to 50, if allowed					
48		Unsecured debt payments					
48		Add to 50, if allowed					
46	50	Credit card debt payments					
46		Work deductions					
47	51	Student loan payments					
47		Repayment of loans used to pay federal tax debt					
48		Delinquent state and local tax payments					
48		Veterinary expenses					
48		Voluntary retirement contributions					
48		Other expenses: (list)					
48		Other:					
48		Add to 50, if allowed					
48		Other:					
48		Add to 50, if allowed					
48		Other:					
48		Add to 50, if allowed					
48		Other:					
48		Add to 50, if allowed					
48		Other:					
48		Add to 50, if allowed					
49	Box E	TOTAL OTHER EXPENSES	1180		1180		
		Total Household expenses:	6962		6962		
50		MDI COMPUTATIONS					
		MDI: Installment agreements/CNC/OIC Qualification					
		OIC-DATC additional expense allowances for offer amount:					
		Older vehicle operating cost allowance (\$200 per vehicle)	-462		-462		
n/a	42	MDI: Offer amount for OIC-DATC					
	Box F		-462		-462		

Explanation of averaging time period that is indicative of future income/expenses

Taxpayer has actual expenses ave = \$347 a month

Averaging time period

Time period rationale

Taxpayer's final MDI is (\$462)

MDI Cannot be less than -0-

of vehicles over 8 years old/>100,000 miles: 0

#4: Actual Income/Expenses Analysis: Past 3 and 12 months

Detailed analysis of income (last 3 and 12 months):

- Average income is \$6,500
- Use last 3 months as taxpayer states that will be their normal income going forward

MDI Analysis Worksheet (for determining ability to pay for installment agreements, OIC, and OIC-DATC)																
Household Income and Expense Analysis for Ability to Pay Calculation																
Primary Taxpayer Name: ANDREWS																
# in family: 4																
State/County/Region located: Florida/Hillsborough/South-Tampa																
Ages in family: 49, 48, 12, 7																
AVERAGE MONTHLY INCOME		Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12	Past 12 months Total	Average Analysis: Actual Inc./ Expenses Past 3 months	Past 12 months
Household Income: cash basis																
Gross Wages 1:		0	800	400	0	0	1400	0	0	0	600	400	500	4100	\$ 500	\$ 342
Gross Wages 2:		6000	6000	6000	6000	6000	6000	6000	6000	6000	6000	6000	6000	72000	\$ 6,000	\$ 6,000
Gross Wages 3:														0	\$ -	\$ -
Gross Wages 4:														0	\$ -	\$ -
Self-employment net income 1:														0	\$ -	\$ -
Self-employment net income 2:														0	\$ -	\$ -
Net rental income														0	\$ -	\$ -
Distributions (K-1, IRA, etc.)														0	\$ -	\$ -
Proceeds from sale of investments														0	\$ -	\$ -
Interest and dividend income														0	\$ -	\$ -
Pension income														0	\$ -	\$ -
Social security income														0	\$ -	\$ -
Child support received														0	\$ -	\$ -
Alimony received														0	\$ -	\$ -
Employer allowances														0	\$ -	\$ -
Other income:														0	\$ -	\$ -
Other income:														0	\$ -	\$ -
Other income:														0	\$ -	\$ -
Total Income		6000	6800	6400	6000	6000	7400	6000	6000	6000	6600	6400	6500	76100	\$ 6,500	\$ 6,342

#4: Actual Income/Expenses Analysis: Past 3 and 12 months

Detailed analysis of expenses (last 3 and 12 months):

- Actual expenses analyzed
 - Food, Clothing, Misc.
 - Housing and utilities
 - Transportation
- Averages used:
 - All 3 month, except electric and maintenance expense (12 months)
 - Actual housing less than standard allowed – use actual

AVERAGE MONTHLY HOUSEHOLD EXPENSES															
* denotes standard allowance applies															
Household expenses paid: cash basis															
	Past Three Months												Average Analysis: Actual Inc./Expenses		
	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12	Total	Past 3 months	Past 12 months
Food, clothing, and other expenses*															
Food	1143	1143	1143	1143	1143	1143	1143	1143	1143	1143	1143	1143	13716 \$	1,143 \$	1,143
Housekeeping supplies	82	82	82	82	82	82	82	82	82	82	82	82	984 \$	82 \$	82
Apparel and services	300	300	300	300	300	300	300	300	300	300	300	300	3600 \$	300 \$	300
Personal care products and services	97	97	97	97	97	97	97	97	97	97	97	97	1164 \$	97 \$	97
Miscellaneous	405	405	405	405	405	405	405	405	405	405	405	405	4860 \$	405 \$	405
Housing and utilities.*															
Mortgage/rent	1340	1340	1340	1340	1340	1340	1340	1340	1340	1340	1340	1340	16080 \$	1,340 \$	1,340
HOA dues													0 \$	-	-
Taxes													0 \$	-	-
Insurance													0 \$	-	-
Electric	50	50	100	150	200	250	300	300	275	250	250	200	2375 \$	233 \$	198
Gas/heating oil													0 \$	-	-
Home phone													0 \$	-	-
Cell phone	180	180	180	180	180	180	180	180	180	200	200	200	2220 \$	200 \$	185
Water/trash													0 \$	-	-
Repairs/maintenance	100	100	100	100	100	100	100	100	100	100	100	100	1200 \$	100 \$	100
Internet/cable	110	110	110	110	110	110	110	110	110	110	110	110	1320 \$	110 \$	110
Other: trash													0 \$	-	-
Transportation Expenses:															
Ownership: Car payment- car 1*	400	400	400	400	400	400	400	400	400	400	400	400	4800 \$	400 \$	400
Ownership: Car payment- car 2*	450	450	450	450	450	450	450	450	450	450	450	450	5400 \$	450 \$	450
Operating costs: Car 1*	305	305	305	305	305	305	305	305	305	305	305	305	3660 \$	305 \$	305
Operating costs: Car 2*	305	305	305	305	305	305	305	305	305	305	305	305	3660 \$	305 \$	305
Public transportation*													0 \$	-	-

#4: Actual Income/Expenses Analysis: Past 3 and 12 months

Detailed analysis of expenses (last 3 and 12 months) continued:

- Actual expenses analyzed
 - Actual medical is higher than out-of-pocket allowed
 - Other expenses allowed to extent necessary

*MDI Summary:
Taxpayer's final MDI is (\$462) – see #3*

	Month 1	Month 2	Month 3	Month 4	Month 5	Month 6	Month 7	Month 8	Month 9	Month 10	Month 11	Month 12	Past 12 months Total	Average Analysis: Actual Inc./Expenses	
														Past 3 months	Past 12 months
Out-of-pocket medical expenses*															
Medical services, including doctors	600	150	90	550	800	900	100	300	400	300	340	400	4930	\$ 347	\$ 411
Prescripts													0	-	-
Medical supplies													0	-	-
Other													0	-	-
Other Expenses:															
Health insurance	580	580	580	580	580	580	580	580	580	580	580	580	6920	\$ 580	\$ 580
Term life insurance	50	50	50	50	50	50	50	50	50	50	50	50	600	\$ 50	\$ 50
Taxes paid:															
Federal taxes paid	550	550	550	550	550	550	550	550	550	550	550	550	6600	\$ 550	\$ 550
FICA/Medicare taxes paid													0	-	-
State/local taxes paid													0	-	-
Mandatory retirement contributions													0	-	-
Other Expenses:															
Accounting/legal fees													0	-	-
Charitable contributions													0	-	-
Child/dependent care													0	-	-
Court ordered payments (alimony, child support, etc.)													0	-	-
Education													0	-	-
Secured debt payments													0	-	-
Unsecured debt payments													0	-	-
Credit card debt payments													0	-	-
Work deductions													0	-	-
Student loan payments													0	-	-
Repayment of loans used to pay federal tax debt													0	-	-
Delinquent state and local tax payments													0	-	-
Veterinary expenses													0	-	-
Voluntary retirement contributions													0	-	-
Other expenses: (list)															
Other:													0	-	-
Other:													0	-	-
Other:													0	-	-
Other:													0	-	-
Other:													0	-	-
Total Household expenses	\$ 7,047	\$ 6,597	\$ 6,587	\$ 7,097	\$ 7,397	\$ 7,547	\$ 6,797	\$ 6,997	\$ 7,072	\$ 6,967	\$ 7,007	\$ 7,017	\$ 84,129	\$ 6,997	\$ 7,011
Monthly Disposable Income	\$ (1,047)	\$ 203	\$ (187)	\$ (1,097)	\$ (1,387)	\$ (1,407)	\$ (797)	\$ (997)	\$ (1,072)	\$ (367)	\$ (607)	\$ (517)	\$ (8,029)	\$ (497)	\$ (669)

#5: Form 433-F: Collection Information Statement

Form **433-F**
(February 2019)

Department of the Treasury - Internal Revenue Service

Collection Information Statement

Name(s) and Address Brain Andrews Jessica Andrews 123 Tampa St., Tampa, FL 33609	Your Social Security Number or Individual Taxpayer Identification Number ###-##-#### Your Spouse's Social Security Number or Individual Taxpayer Identification Number ###-##-#### Your telephone numbers Home: ###-###-#### Work: ###-###-#### Cell: ###-###-#### Spouse's telephone numbers Home: ###-###-#### Work: ###-###-#### Cell: ###-###-####
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☐ If address provided above is different than last return filed, please check here

County of Residence
Hillsborough

Enter the number of people in the household who can be claimed on this year's tax return including you and your spouse. Under 65 4 65 and Over

If you or your spouse are self employed or have self employment income, provide the following information:

Name of Business	Business EIN	Type of Business	Number of Employees (not counting owner)
n/a			

A. ACCOUNTS / LINES OF CREDIT

PERSONAL BANK ACCOUNTS Include checking, online, mobile (e.g., PayPal), savings accounts, money market accounts. (Use additional sheets if necessary.)

Name and Address of Institution	Account Number	Type of Account	Current Balance/Value	Check if Business Account
ABC Bank	#####	checking	4,000	<input type="checkbox"/>
BCD Carpet	#####	savings	500	<input type="checkbox"/>

INVESTMENTS Include Certificates of Deposit, Trusts, Individual Retirement Accounts (IRAs), Keogh Plans, Simplified Employee Pensions, 401(k) Plans, Profit Sharing Plans, Mutual Funds, Stocks, Bonds, Commodities (Silver, Gold, etc.), and other investments. If applicable, include business accounts. (Use additional sheets if necessary.)

Name and Address of Institution	Account Number	Type of Account	Current Balance/Value	Check if Business Account
none				<input type="checkbox"/>
				<input type="checkbox"/>

VIRTUAL CURRENCY (CRYPTOCURRENCY) List all virtual currency you own or in which you have a financial interest (e.g., Bitcoin, Ethereum, Litecoin, Ripple, etc.). (Use additional sheets if necessary.)

Type of Virtual Currency	Name of Virtual Currency Wallet, Exchange or Digital Currency Exchange (DCE)	Email Address Used to Set-up With the Virtual Currency Exchange or DCE	Location(s) of Virtual Currency (Mobile Wallet, Online, and/or External Hardware storage)	Virtual Currency Amount and Value in US dollars as of today (e.g., 10 Bitcoins \$64,600 USD)
none				

B. REAL ESTATE Include home, vacation property, timeshares, vacant land and other real estate. (Use additional sheets if necessary.)

Description/Location/County	Monthly Payment(s)	Financing		Current Value	Balance Owed	Equity
123 Tampa St Tampa FL 33609	1,340	Year Purchased 2009	Purchase Price 300,000	400,000	211,000	0
<input checked="" type="checkbox"/> Primary Residence <input type="checkbox"/> Other		Year Refinanced	Refinance Amount			
		Year Purchased	Purchase Price			
<input type="checkbox"/> Primary Residence <input type="checkbox"/> Other		Year Refinanced	Refinance Amount			

C. OTHER ASSETS Include cars, boats, recreational vehicles, whole life policies, etc. Include make, model and year of vehicles and name of Life Insurance company in Description. If applicable, include business assets such as tools, equipment, inventory, etc. (Use additional sheets if necessary.)

Description	Monthly Payment	Year Purchased	Final Payment (mo/yr)	Current Value	Balance Owed	Equity
2019 Ford F150	400	2016	10 / 26	17,000	14,555	2,445
2019 Honda Odyssey	450	2016	10 / 26	21,000	16,200	4,800

D. CREDIT CARDS (Visa, MasterCard, American Express, Department Stores, etc.)

Type	Credit Limit	Balance Owed	Minimum Monthly Payment
Visa #####	10,000	2,000	150

TURN PAGE TO CONTINUE

#5: Form 433F: Collection Information Statement

E. BUSINESS INFORMATION Complete E1 for Accounts Receivable owed to you or your business. (Use additional sheets if necessary.) Complete E2 if you or your business accepts credit card payments. Include virtual currency wallet, exchange or digital currency exchange.

E1. Accounts Receivable owed to you or your business

Name	Address	Amount Owed
n/a		
List total amount owed from additional sheets		
Total amount of accounts receivable available to pay to IRS now		

E2. Name of individual or business on account

n/a	Issuing Bank Name and Address	Merchant Account Number
Credit Card (Visa, Master Card, etc.)		
n/a		

F. EMPLOYMENT INFORMATION If you have more than one employer, include the information on another sheet of paper. (If attaching a copy of current pay stub, you do not need to complete this section.)

<p>Your current Employer (name and address)</p> <p>Greg's Convenience Store 321 Nowhere St Tampa FL 33600</p> <p>How often are you paid (check one)</p> <p><input type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input type="checkbox"/> Semi-monthly <input checked="" type="checkbox"/> Monthly</p> <p>Gross per pay period 500</p> <p>Taxes per pay period (Fed) 100 (State) (Local)</p> <p>How long at current employer 3 months</p>	<p>Spouse's current Employer (name and address)</p> <p>ABC Companies 456 Zippy Lane Tampa FL 33600</p> <p>How often are you paid (check one)</p> <p><input type="checkbox"/> Weekly <input type="checkbox"/> Biweekly <input checked="" type="checkbox"/> Semi-monthly <input type="checkbox"/> Monthly</p> <p>Gross per pay period 3,000</p> <p>Taxes per pay period (Fed) 225 (State) (Local)</p> <p>How long at current employer 5 years</p>
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G. NON-WAGE HOUSEHOLD INCOME List monthly amounts. For Self-Employment and Rental Income, list the monthly amount received after expenses or taxes and attach a copy of your current year profit and loss statement.

Alimony Income	Net Rental Income	Interest/Dividends Income
Child Support Income	Unemployment Income	Social Security Income
Net Self Employment Income	Pension Income	Other:

H. MONTHLY NECESSARY LIVING EXPENSES List monthly amounts. (For expenses paid other than monthly, see instructions.)

1. Food / Personal Care See instructions. If you do not spend more than the standard allowable amount for your family size, fill in the Total amount only.			4. Medical			Actual Monthly Expenses		IRS Allowed	
	Actual Monthly Expenses	IRS Allowed							
Food	1,143	1,143	Health Insurance			580		580	
Housekeeping Supplies	82	82	Out of Pocket Health Care Expenses			347		347	
Clothing and Clothing Services	300	300	Total			927		927	
Personal Care Products & Services	97	97	5. Other			Actual Monthly Expenses		IRS Allowed	
Miscellaneous	403	403	Child / Dependent Care						
Total	2,027	2,027	Estimated Tax Payments						
2. Transportation			Term Life Insurance			50		50	
Gas / Insurance / Licenses / Parking / Maintenance etc.	610	610	Retirement (Employer Required)						
Public Transportation			Retirement (Voluntary)						
Total	610	610	Union Dues						
3. Housing & Utilities			Delinquent State & Local Taxes (minimum payment)						
	Actual Monthly Expenses	IRS Allowed	Student Loans (minimum payment)						
Rent			Court Ordered Child Support						
Electric, Oil/Gas, Water/Trash	198	198	Court Ordered Alimony						
Telephone/Cell/Cable/Internet	310	310	Other Court Ordered Payments						
Real Estate Taxes and Insurance (if not included in B above)			Other (specify)						
Maintenance and Repairs	100	100	Other (specify)						
Total	608	608	Other (specify)						
			Total			50		50	

Under penalty of perjury, I declare to the best of my knowledge and belief this statement of assets, liabilities and other information is true, correct and complete.

Your signature /s/	Spouse's signature /s/	Date 9/1/2024
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#6: Form 433F: Collection Information Statement

Attached documentation

Attachment to Form 433

Form 433 submission date: 9/1/2024

Taxpayer	Name(s)	SSN:
Primary	Brian ANDREWS	###-##-####
Spouse	Jessica Andrews	###-##-####

List of Documents Attached

#	Document	Explanation
1	Financial account statements: past three months	Last 3 months <ul style="list-style-type: none"> ABC Bank (checking) BCD Bank (savings)
2	Paystubs: last statement with YTD totals	Last month paystubs for both primary and spouse attached with YTD totals Shows income and Federal income taxes paid
3	Mortgage payment: last three months	Mortgage statement showing last three months payments Bank statement showing payments made for last three months (utility and other housing costs available if needed)
4	Health care expenses: last three months	Receipts for past three months showing out-of-pocket prescription drugs for Brian's eye condition
5	Term life insurance: last three months	On paystub for Jessica
6	Health Insurance: last three months	See Jessica's paystubs for amount paid bi-monthly
7	Car payments: last three months	Car payment (Ford and Honda) invoices attached for past three months; check showing proof of payment attached for past three months
8	Loan denial letter for refinance/access equity in home	Two denial letters from two mortgage companies to refinance and/or access equity via line of credit. Denied due to poor credit rating. <ul style="list-style-type: none"> ABC Bank XYZ Finance Co.
9	Doctor's letter on Brian's condition	Letter from Brian's physician showing the long-term nature of his eye disease and ability to work part-time. Also states he cannot work as a pilot in the future.