OIC-DATC Example: Greg SE Taxpayer

Requesting OIC on April 30, 2024

Personal information:

Family size/ages (for all standards and out-of-pocket medical expense allowance): 2 (62, 62) – has handicapped sister as a non-liable dependent.

Location (for housing expense standard): Cleveland, WI (Manitowoc County).

Region (for transportation expense standards): Midwest region Taxpayer is a self-employed appraiser with diminishing business due to decline in appraisal industry.

Financial information:

Own home with dependent sister (tenants in common).

One vehicle- no vehicle payment.

Self-employed - No other sources of income.

Owns an old boat.

No dissipated assets.

<u>Tax situation</u>:

Owes \$143,211

- 2012, 2018-2023
- Earliest CSED: 40 months (2012 owes \$4,333 for late filed return) – 2018-2023 are all recently filed with 120 months left on the CSED
- Filed all required tax returns (filed 2023 within 60 days of the OIC application date)
- Current federal and state estimated tax payments are up to date

1

Applicable IRS Collection Financial Standards

- Cleveland, WI
- Midwest Region
- Family of 2
- Standards used as of date of OIC request on 4/30/2024

Food, Clothing, and Misc.

- National Standard
- Family of 2

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:

- Manitowoc
 Cty., WI
- Family of 2

County	2024 Published ALE Housing Expense for a Family of	2024 Published ALE Housing Expense for a Family of	2024 Published ALE Housing Expense for a Family of	2024 Published ALE Housing Expense for a Family of	2024 Published ALE Housing Expense for a Family of
Manitowoc County	\$1,387	\$1,628	\$1,716	\$1,913	\$1,944

Transportation:

- Two cars
- Midwest region
- Added \$200 added operating cost for offer amount only

	Owners	hip Cos	ts	
		One	Car	Two Cars
National			\$619	\$1,238
				,
Location	One Car		Two Ca	irs

Out-of-pocket medical:

- Family of 2
- All under age 65
- Ave. actual does not exceed allowance

	Out of I	
Under 65		\$83
65 and Older		\$158

OIC: Financial Analysis and Conclusion

Tax owed: \$143,211

Earliest CSED: 40 months Longest CSED: 120 months (2023 just filed)

#	Document	Findings	Conclusion
#1	Equity in assets (In this example, ATP IA was not computed for OIC purposes) #1A: OIC: Equity in Asset Summary for OIC Qualification Determination #1B: Form 433-A(OIC): Equity in Assets Summary for Offer Amount Computation	Taxpayer has net equity in assets of \$7,234. Taxpayer has net realizable equity in assets of \$4,164.	Total equity used for qualification; NRE used for offer amount.
#2	MDI Summary #2: Forms 433A/433A-OIC: Net Business Income Analysis (for ability to pay determinations for installment agreements, CNC, and OICs) #3: MDI Analysis Worksheet (for determining ability to pay for installment agreements, CNC, and OIC-DATC)	Average net income is \$4,402 per month – only one self-employed earner. Average household expenses calculated over past 3 months/12 months (for annually paid expenses).	Future income will be about \$4,402 a month. IRS will only allow necessary expenses up to IRS standard amounts.
#4	MDI calculation #4: MDI Computation (ability to pay determination for IA/CNC/OIC qualification/OIC offer amount)	Average income is \$4,402 a month. Average expenses for ATP is \$4,082. Average for RCP (offer amount) is \$4,282 (includes additional \$200 for older car vehicle operating expenses).	MDI for ATP is \$320. MDI for RCP is \$120.
#5	OIC qualification and offer amount computations	Taxpayer has ATP of \$45,634. Taxpayer's RCP is \$5,604.	Taxpayer qualifies for OIC-DATC. Taxpayer can offer \$5,604 with lumpsum payment OIC.
#6	Form 656, Offer in compromise	Offer amount is equal to the future income of \$1,440 (\$5,604. Taxpayer selects I	\$120x12 months), or
#7	Form 433A-OIC, Collection Information Statement	Provides details of NRE an	d MDI components.
#8	Form 656 and 433 Attachment Listing (documents not included for the example)	Provides documentation to package.	o support OIC
#9	Cover letter to IRS COIC Unit requesting OIC	Explains taxpayer's conditi status.	ion and requests OIC

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#1: Equity in assets analysis:

1A: OIC: Equity in Asset Summary for OIC Qualification Determination: taxpayer has \$7,234 in equity for OIC

qualification purposes

1B: Form 433-A(OIC): Equity in Assets Summary for Offer Amount Computation: taxpayer has NRE in assets of \$4,164

1A: (1 of 2) Taxpayer has \$7,234 in asset equity for purposes of qualifying for an OIC

Personal assets= \$7,234 in equity

OIC: Equity in Asset Summary for OIC Qualification Determination	Qualification D	etermination						
		for	OIC-DATC q	for OIC-DATC qualification analysis only	alysis only			
As of date: 4/30/2024			Net Equity in A	Net Equity in Assets (FMV less encumbrances)	brances)			
		Standard	(FMV*QSV%)	(loans, attachments)				
Asset category	FMV	OSV %	Asset at QSV	Less: Encumbrances	Less: Exemptions	Equity	ity	
Personal Assets								
Cash and investments:								
Cash (chkg, savings, CD, on hand, etc.)	968 \$	100%	\$ \$	0		·s	968	(9)
Investments (stocks, bonds, other)		%08 0		0 0	No		0	
Virtual Currency		%08 0		0 0	anowed		0	
Retirement account (IRA, 401K)	\$	%08		- \$ 0			0	(1)
TOTAL CASH and INVESTMENTS						Ş	968	
Real Property:								
Personal Residence	\$ 39,900	80%	\$ 31,920	\$ 31,756	n/a	\$	164	
Other Real Property		80%			n/a			
Other Real Property		80%			n/a			
TOTAL REAL PROPERTY						ş	164	
Personal Vehicles (carathoatahnatanya/ea/eta)								
Vehicle 1 - 2004 Cadillac	\$ 2,718	80%	\$ 2,174	\$	No exemption	ş	2,174	(7)
Vehicle 2		80%	٠.		allowed	ş		(3)
Vehicle 3 - 1983 boat	\$ 5,000	80%	\$ 4,000	. \$	n/a	ş	4,000	
Vehicle 4		80%	· •		n/a	Ş		
TOTAL VEHICLES						\$	6,174	
Personal effects								
Artwork, jewelry, interest in private company		80%						
Furniture and personal effects	\$ \$000	80%	\$ 720	٠.	\$11,390 (apply to	ş	720	
Other personal effects		%08			total of all personal			
Other personal effects		%08			effects) (8)			
Other personal effects		80%						
TOTAL PERSONAL EFFECTS			\$ 720		\$ 11,390	Ş		
INTO INTO IN INTO INTO INTO INTO INTO IN	JI PO JIO 229	for OM DATE meditions and desired	min andu			v	1007	
I DI AL EQUITY/ NRE III PERSONAL ASSETS (A)	וט כווגי-טאור	qualification analy	rsis unip			ç	1,234	

#1: Equity in assets analysis:

1A: OIC: Equity in Asset Summary for OIC Qualification Determination: taxpayer has \$7,234 in equity for OIC

qualification purposes

1B: Form 433-A(OIC): Equity in Assets Summary for Offer Amount Computation: taxpayer has NRE in assets of \$4,164

1A: (2 of 2) Taxpayer has \$7,234 in asset equity for purposes of qualifying for an OIC

Business assets = \$0 equity

Total assets = \$7,234 equity

		for	OIC-DATC q	for OIC-DATC qualification analysis only Net Equity in Assets (FMV less encumbrances)	lysis only		
		Standard	(FMV*QSV%)	(FMV*QSV%) (loans, attachments)	•		
	FMV	QSV %	Asset at QSV	Less: Encumbrances	Less: Exemptions	Equity	
Business Assets							
Cash and cash equivalents:							
Cash		100%			n/a	٠	
Cash in financial accounts		100%			n/a	٠ \$	
Virtual currency		80%			n/a	- \$	
TOTAL CASH- BUSINESS						- \$	
Other Business assets:							
Business Assets - used in the production of income	\$ 1,500	1,500 excluded	· ·	-0-	Tools of the trade have a total exemption of \$5700. Business assets that produce	ve a total exemption assets that produce	(4)
Business Assets- not used in the production of income		%08			income are valued at -0- See Note (4) and (8)	-0- See Note (4) and	(2)
TOTAL OTHER BUSINESS ASSETS					\$ 5,700	· \$	
TOTAL Equity/NRE in BUSINESS ASSETS (B)	for OIC-DATC a	for OIC-DATC qualification analysis only	rais only			٠ \$	
TOTAL EQUITY/NRE in ALL ASSETS [(A) + (B)]	for CIIC-DATC a	for CHC-DATC qualification analysis only	sis only			\$ 7,234	
Notes:							
	DSV% for Retiremen	t accounts can fluc	tan no based atent	effect due to taxes owed	(1) OSV% for Retirement accounts can fluctuate based on net effect due to taxes owed on distributions learly distribution	tribution	
(-)	OCV/96 for invocation	otr can bo higher h	arod on tax conto	Woodoc/rator			
(7)	TO NO TOTAL MARKETINE	ins call be inglief o	(z) daya ioi iiivestiiieiits cali be iiigiiei baseu oii tax collsequeiices/rates	quencesyrates			Ī
(8)	Offer amount: Only	subtract second ve	ehicle exemption a.	mount on a joint OIC (no	(3) Offer amount: Only subtract second vehicle exemption amount on a joint OIC (no exclusion for qualification computation)	n computation)	
(4)	Susiness assets use	d in the production	n of income have a	(4) Business assets used in the production of income have a NRE of \$0 (exceptions apply)	ply)		
(5)	Accounts and notes	receivable may be	included in this an	nount if they are not inclu	(5) Accounts and notes receivable may be included in this amount if they are not included in future income projections	jections	
(9)	or an OIC offer am	ount, the taxpayer	is allowed \$1,000 p	olus one-month of necess	(6) For an OIC offer amount, the taxpayer is allowed \$1,000 plus one-month of necessary living expenses as an exclusion	exclusion	
(2)	or OIC qualificatio	n, the taxpayer is r	not allowed a \$3,45	0 exemption amount for	(7) For OIC qualification, the taxpayer is not allowed a \$3,450 exemption amount for each vehicle in determining ability to pay	ng ability to pay	
. (8)	hese exemption an	nounts change ann	ually in November.	(8) These exemption amounts change annually in November. For 2024, see Revenue Procedure 2023-34	rocedure 2023-34		
							ı

1B: (1 of 2) RCP calculation – taxpayer has \$4,164 in net realizable asset equity for purposes of computing the offer amount

Form 433A(OIC): Equity in Asset Summary for Offer Amount Determination	for C	ffer Amo	unt Determ	ination					
As of date: 4/30/2024			Net	or OIC Offer Amount: N Realizable Equity i	For OIC Offer Amount: NRE- F/ANT-QSV%/Exemption amount) Net Realizable Equity in Assets (NRE): for Offer Amount	amount) er Amount			
, and J.			Standard	(FMV*QSV%)	(loans attachments)	Updated annually in	Cannot be <\$0 4334(OIC).	433A/OIC).	
Asset category		FMV	QSV %	Asset at QSV	Less Encumbrances	November Less: Exemptions	NRE	Line#	
Personal Assets									
Cash and investments:									
Cash (chkg, savings, CD, on hand, etc.)	S	968	100% \$	968	0	\$ 1,000 along the second secon	0		(9)
Investments (stocks, bonds, other)		0	80%	0			0	r	(2)
Virtual Currency		0	80%	0	0	n∕a	0	7	(2)
Retirement account (IRA, 401K) TOTAL CASH and INVESTMENTS	S		80%	0		e/u	0	ю 4	(1)
Real Property:									
Personal Residence	s	39,900	80% \$	31,920	\$ 31,756	n/a	\$ 164	ß	
Other Real Property			80%			n/a		ß	
Other Real Property			80%			e/u	\$ 164	Σ, τ	
								n	
Personal Vehicles (ans/boats/matorcydes/etc.)									
Vehicle 1	s	2,718		2,174	•		٠.	g i	(2)
Vehicle 2				•		5 3,450		8	(S)
Vehicle 3	s	5,000	80% \$	4,000		\$	\$ 4,000	ኽ	
Vehicle 4			80%					ዌ	
IOIAL VEHICLES							5 4,000	9	
Personaleffects			į						
Artwork, jewelry, interest in private company								/а	
Furniture and personal effects	S	006	\$ 90%	720	0	All personal effects have a total	s have a total	P	
Other personal effects			80%			exemption of \$11,390. See Note (8)	0. See Note (8)	1	
Other personal effects			80%			•	•	70	
TOTAL PERSONAL EFFECTS			\$	720	1	\$ 11,390	\$	7	
TOTAL NRE in PERSONAL ASSETS (A)			for OIC- Offe	er Amount (also is l	for OIC- Offer Amount (also is listed on Form 433-A(OIC)	Tr.	\$ 4,164	Box A	

1B: (2 of 2) RCP calculation – taxpayer has \$4,164 in net realizable asset equity for purposes of computing the offer amount

Form 433A(OIC): Equity in Asset Summary for Offer Amount Determination	for Offer/	Amount Det	ermination					
			For OIC Offer Amount: N	For OIC Offer Amount: NRE= (FMV*QSV%)-(Exemption amount)	mount)			
As of date: 4/30/2024		Net	: Realizable Equity i	Net Realizable Equity in Assets (NRE): for Offer Amount	r Amount			
		Standard	(FMV*QSV%)	(loans, attachments)	Updated annually in November	Cannot be <\$0 433A(OIC)-	433A(OIC)-	
Asset category	FMV	QSV %	Asset at QSV	Less: Encumbrances	Less: Exemptions	NRE	Line #	
Business Assets								
Cash and cash equivalents:								
Cash	- \$	100%			n/a	- \$	8a	
Cash in financial accounts		100%			n/a	· \$	8p	
Virtual currency		80%			n/a	- \$	8c	
TOTAL CASH- BUSINESS						· \$	∞	
Other Business assets:								
Business Assets - used in the production of income	\$ 1,500	1,500 excluded	•	0	Tools of the trade have a total exemption of	total exemption of		(4)
Business Assets- not used in the production of income		80%			\$5700. Business assets that produce income are valued at -0- See Note (4) and (8)	t produce income are ote (4) and (8)	9a-9c	(5)
TOTAL OTHER BUSINESS ASSETS			0		\$ 5,700 \$	\$	10 and 11	<u>.</u>
TOTAL NRE in BUSINESS ASSETS (B)		for OIC- O	ffer Amount (also is l	for OIC- Offer Amount (also is listed on Form 433-A(OIC)		٠ •	Box B	
TOTAL NRE in ALL ASSETS [(A) + (B)]		for OIC- O	ffer Amount (also is l	for OIC- Offer Amount (also is listed on Form 433-A(OIC)		\$ 4,164	Section 8	
	Notes:							
	(1)	QSV% for Retiren	nent accounts can fluct	(1) QSV% for Retirement accounts can fluctuate based on net effect due to taxes owed on distributions/early distribution	le to taxes owed on dist	tributions/early dis	tribution	
	(2)	QSV% for invest	ments can be higher	(2) QSV% for investments can be higher based on tax consequences/rates	es/rates			
	(3)	Only subtract sec	ond vehicle exemption	(3) Only subtract second vehicle exemption amount on a joint OIC				
	(4)	Business assets u	sed in the production	(4) Business assets used in the production of income have a NRE of $\$0$				
	(2)	Accounts and not	tes receivable may be i	(5) Accounts and notes receivable may be included in this amount if they are not included in future income projections	iey are not included in f	uture income proje	ections	
	(9)	For an OIC offer a	amount, the taxpayer i	(6) For an OIC offer amount, the taxpayer is allowed \$1,000 plus one-month of necessary living expenses as an exclusion	nonth of necessary livin	ig expenses as an e	xclusion	
	(7)	For OIC qualificat	ion, the taxpayer is no	(7) For OIC qualification, the taxpayer is not allowed a \$3,450 exemption amount for each vehicle in determining ability to pay	on amount for each veh	iicle in determining	ability to pay	
	(8)	These exemption	amounts change annu	(8) These exemption amounts change annually in November. For 2024, see Revenue Procedure 2023-34	4, see Revenue Procedu	re 2023-34		

#2: MDI Summary: Average monthly income - Forms 433A/433A-OIC: Net Business Income Analysis (for ability to pay determinations for installment agreements, CNC, and OICs)

#2: Average income:Taxpayer only has SE income – taxpayer averages over 12 months = \$4,402 ave. net income

	De/15 es	FINAL BUSINESS NET	INCOME		6,417		•	•	•	6,417				1,035				392			100				•		•	9		218	82	137	#	60	22	9	2,015	4,402
	саше/ех	FINAL			v	v	v	v	v	S				v	v	v	w	. 47			· va	v	· vı	v	v	'n	'n	v	S	v	v	S	s	v	v	v	v	S
	Determine which average represents future income/expenses		Past 12 months		6,417	٠	•	•	٠	6,417		•	٠	1,035	•	•	•	392	١.	•	100	•	•	•	•	•	•	9	•	218	82	137	Π	60	22	9	2,015	4,402
	erage repres	ges			6,417 \$	·	·	·	s,	6,417 \$		٠,		914 \$	·			783 5			100 5		·	٠,	·		·	4 5	·	137 \$	5 9/	274 \$	21. \$	15 \$	45 \$	12 \$	2,380 \$	4,036 \$
	ine which av	Averages	Past 6 months		S	S	'n	v	S	s		v	v	v	v	v	•	·			. 1/1	v	w	v	v	S	v	v	s	S	v,	s	'n	'n	v	v	v	S
	Determ		Past 3 months		5,274	•	•	•	٠	5,274		•	•	827	•	•	•	300		٠	199	٠	٠	•	٠	•	•	6	•	120	75	549	42	30	88	23	2,263	3,011
	Ч				\$ 866,97	,		,		\$ 866'94		٠,	· v	12,418 \$	٠,	,		4700 \$,	,	1.196 5			,		,		5	,	2,611 \$	\$ 786	1,646 \$	126 \$	8	267 \$	69	24,181 \$	52,817 \$
			Te l			'n	5		'n	\$ 76,		v	v	\$ 12,		'n	•	. v			E .	·	. 45			· ·	50	S	'n	\$ 24		\$ 14		S	'n	v,	\$ 24,	\$ 52,
	2		Month 12		6737					6737				840				275			598							52			55		126	76	267	32	2,314	4,423
	Past Three Months		Month 11		6122					6122				760 \$				**	•		v							S		3,	5 57	1,646	S	Ś	v	38	2,613 \$	3,509 \$
	PastT		Month 10 M		2963					2963				882 \$				625												267 \$	75 \$	S		14		Ś	1,862 \$	1,101 \$
		Past six months			9185					9185				719 \$				3.800 \$												v	75 \$			Ś			4,593 \$	4,592 \$
lation		Past six	Month 9											v				w													v						\$	S
o Pay Calcu			Month 8		9208					9208				1,100																	157						1,257	8,251
for Ability t			Month 7		3985					3985				1,184 \$																459	S						1,643 \$	2,342 \$
Net Business Income Analysis for Ability to Pay Calculation			Month 6		6805					6805				921 \$																873 \$	17						1,867 \$	4,938 \$
siness Inco			Month 5 N		6800					6800				1,442 \$																S	156 \$						1,597 \$	5,203 \$
Net Br			Month 4 Ma		6735					6735				\$ 626							598									459	W						3 950'	4,699 \$
and OIC			Month 3 Mo		6139					6139				1,354 \$							50									v	73						1,428 \$ 2,036	4,711 \$ 4
cements, CMC			C.II		6009					6009				1,005 \$																	5 5						1,078 \$	4,931 \$
ilmen tag ri			Month											w																	W						w	w
ations for Inst			Worth 1		6010					6010				\$ 1,233														\$ 44		\$ 459	\$ 156						\$ 1,892	\$ 4,118
Forms 4334/4334-OIC. Het Business Income Analysis (prositing soyd-decontections pure telliment agrooments, CAC, and OIC		الخ	In come/Expense	Cash Income	Business Gross Receipts	Other income:	Other income:	Other income:	Other income:	Total business income	Cash Business expenses:	Material/Inventory purchases	28 lattachment) Advertising	Vehicle expenses	28 (attachment) Equipment expenses	Wages paid	28 lattachment) Independent contractors paid	28 (attachment) Legal, accounting, and professional services	28 (attachment) Commissions and fees	28 (attachment) Employee Renefits	Insurance	STUBILIZATION OF THE CO.	Business property expenses	Rent/lease	tt) Repairs/mainten ance	Utilities	Supplies	Taxes and Licenses	28 (attachment) Travel, Meals, and Entertainment	28 (attachment) Other: dues and subscriptions	28 (attachment) Other: business phone and internet	28 (attachment) Other software leases	28 (attachment) Other: internet email	28 (attachment) Other: appraisal/portal fees	28 (attachment) Other: continuing education	28 (attachment) Other: assessment data	Total Business Expenses:	Business Net Profit
A-OIC: Net Busi		Form 433A-OIC-	Fine#		12		27 67	12-10		17		18-19	28 (attachmen	77	28 (attachmen	92	28 lattachmen	28 lattachmen	28 (attachmen	28 (attachmen	12	22		21	28 (attachment)	23	22	92	28 (attachmen	28 (attachmen	28 (attachmen	28 (attachmen	28 (attachmen	28 (attachmen	28 (attachmen	28 (attachmer.		
Forms 433A/4334		Form /224 - Line #			29		SE CE OF 05	0/-7/ /0/-00		76		77-78	87 (attachment)	83	87 (attachment)	67	87 (attachment)	87 (attachment)	87 (attachment)	87 (attachment)	85	87 (attachment)		8	25	82	81	98	87 (attachment)	87 (attachment)	87 (attachment)	87 (attachment)	87 (attachment)	87 (attachment)	87 (attachment)	87 (attachment)		

#3: (1 of 3) MDI Analysis Worksheet (for determining ability to pay for installment agreements, CNC, and OIC-DATC)

#3: Average income and allowable household expenses:

Income: only income from SE income

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other: Standards ut
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MDI Analysis Worksheet (for determining ability to pay for installment agreements,	y for installment agre		CNC, and OIC-DATC)	DATC)															
Primary Taxpayer Name: Greg SE Taxpayer																			
#in family:2			Ĭ	onseho	ld Incom	e and E	Household Income and Expense Analysis for Ability to Pay Calculation	nalysis	or Abili	ty to Pa	y Calcu	ation							
State/County located: WI/Manitowoc																			
Ages in family:62, 62												Pas	Past Three Months	nths	Past 1.	Past 12 months	Average Analysis: Actual Inc./ Expenses	ctual Inc./ Expense	S
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		Total	Past 3 months	Past 12 months	S
Household Income: cash basis																			
Gross Wages 1:																0	0		0
Gross Wages 2:																0	0		0
Gross Wages 3:																0	0		0
Gross Wages 4:																0	0		0
Self-employment net income 1:	\$ 4,118	3 \$ 4,931	÷	4,711 \$	4,699	\$ 5,203	\$ 4,938	\$ 2,342	s	8,251 \$	4,592 \$	1,101	\$ 3,509	v.	4,423 \$	52,817 \$	3,011	s	4,402
Self-employment net income 2:																0	0		0
Net rental income																0	0		Ŭ
Distributions (K-1, IRA, etc.)																0	0		0
Proceeds from sale of investments																0	0		Ŭ
Interest and divident income																0	0		Ŭ
Pension income																0	0		Ŭ
Social security income																0	0		0
Child support received																0	0		0
Alimony received																0	0		0
Employer allowances																0	0		0
Other income:																0	0		0
Other income:																0	0		0
Other income:																0	0		
Total Income	\$ 4,118	3 \$ 4,931	s	4,711 \$	4,699 \$	5,203	\$ 4,938	\$ 2,342	s	8,251 \$	4,592 \$	1,101	\$ 3,509	s	4,423 \$	52,817	3,011	\$ 4,4	4,402
AVERAGE MONTHLY HOUSEHOLD EXPENSES												Pas	Past Three Months	nths			Average Analysis: Actual Inc./ Expenses	ctual Inc./ Expens	es
* denotes standard/allowance applies	Month 1	Month 2		Month 3	Month 4	Month 5	Month 6	Month 7	Month 8		Month 9 N	Month 10	Month 11	Month 12		Total	Past 3 months	Past 12 months	SI
Household expenses paid: cash basis																			
Food, clothing, and other expenses*																			
Food	\$ 820	s		820 \$	820			s	s			820	\$ 820	s	_	9,840	820		820
Housekeeping supplies		s	75 \$	75 \$	75	\$ 75	\$ 75	s	75 \$	75 \$	75 \$	75	\$ 75	s	75 \$	900	35	ş	72
Apparel and services	\$ 157	Ş		157 \$	157			s	s		157 \$	157	\$ 157	Ş	_	1,884	157	\$	157
Personal care prodcuts and services		s	\$ 08	\$ 08	80	08	\$ 80	s	s		\$ 08	80	\$ 80	s	\$ 08	960	08	ş	8
Miscellaneous	\$ 279	s		279 \$	279	279		s	s			279	\$ 279	s	\$ 62	3,348	5 279	\$	279

#3: (2 of 3) MDI Analysis Worksheet (for determining ability to pay for installment agreements, CNC, and OIC-DATC)

#3. Average allowable housing, transportation, medical, and other expenses

- Actual used for housing/utilities
- Standards utilized for transportation and medical

Month of the control	AVERAGE MONTHLY HOUSEHOLD EXPENSES																	Past	Past Three Months	Nonths				Average Analysis: Actual Inc./ Expenses	ctual Inc./ Exp	suses
1, 1468 5 1768 5 1769	* denotes standard/allowance applies	Mont		Month		Month 3		onth 4	Month		Month 6	Month		Month 8		onth 9	Month		Month 1		lonth 12	C	Total	Past 3 months	Past 12 mo	ths
1, 145, 1, 1	Housing and utilities:*																									
. The continuation of the	Mortgage/rent	\$ 1						729				ş				733	ş					_	_		s	767
. The continue of the continue	HOA dues																					s		- \$	s	
6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Taxes																					s		. \$	s	
Strate S	Insurance	s	69		٠,		1						₩.			2	s				7	_			s	62
The continue of the continue	Electric	s	118		-53			57		s						64	s				7	_	-		s	70
The color of the c	as/heating oil	s			339		s).	31		s			71		so.	108					15	-			s	108
5 196 5 186	Home phone																					s	-	. \$	s	
S 122 S 123 S 124 S	Cell phone	s	190		· · · ·			190				s			ij		s				18	_	_		s	189
CHANGE S IN THE COLOR AND	Water/trash	s	122		·V)			59		Ş						67	ş				4	_	811	\$ 53	\$	89
S 127 S 128 S 124 S	epairs/maintenance											\$ 1,	566									s	1,266	٠.	\$	106
This is a single with the control of	ternet/cable	s	127	\$				124				ş				124					13	_	1,520	\$ 132	\$	127
11** \$ 239	ther: trash	s	12	s	00	; T		00	s							00						_	108	80	ş	6
1** 1 * 1 * 1 * 1 * 1 * 1 * 1 * 1 * 1 *																										
11** 5 239 \$ 239	portation Expenses:																									
Fig. 1. The control of the control o	wnership: Car payment- car 1*																						0	0		Ŭ
S 239	wnership: Car payment- car 2*																						0	0		
tdors A A A A A A A A A	perating costs: Car 1*	s						239				s				239					23	_	2,868	\$ 239	s	239
ctors \$ 166 \$ 166 \$ 166 \$ 166 \$ 166 \$ 166 \$ 166 \$ 166 \$ 166 \$ 166 \$ 166 \$ 160 \$	perating costs: Car 2*																						0	0		Ü
ctors S 166	iblic transportation*																						0	0		
ctors S 166	f-pocket medical expenses*																									
	edical services, including doctors	s						166				s				166					16		1,992	\$ 166	s	166
	rescripts																						0	0		0
0	edical supplies																						0	0		٥
	ther																					_	0	0		Ü

#3: (3 of 3) MDI Analysis Worksheet (for determining ability to pay for installment agreements, CNC, and OIC-DATC)

Other Expenses:							
Health insurance					0	0	0
Term life insurance					0	0	0
Taxes paid:							
Federal taxes paid	\$ 2,184	\$ 2,184	\$ 2,184	\$ 2,184	\$ 8,736	728 \$	728
FICA/Medicare taxes paid					0	0	0
State/local taxes paid			507	202	1014	169	84.5
Mandatory retirement contributions					0	0	0
Other Expenses:							
Accounting/legal fees					0	0	0
Chaitable contributions					0	0	0
Child/dependent care					0	0	0
Court ordered payments (alimony, child support, etc.)	etc.)				0	0	0
Education					0	0	0
Secured debt payments					0	0	0
Unsecured debt payments					0	0	0
Credit card debt payments		ı			0	0	0
Work deductions		laxba	laxpayer will select the best		0	0	0
Student loan payments		-			0	0	0
Repayment of loans used to pay federal tax debt		averag	average # or montns (3, 6, 12,	7,	0	0	0
Delinquent state and local tax payments)	othor) for overaging		0	0	0
Veterinary expenses		5	or other) for averaging		0	0	0
Voluntary retirement contributions		ΔA	expenses on next MDI		0	0	0
Other expenses: (list)							
Other		5 	Computation Worksheet		0	0	0
Other					0	0	0
Other:					0	0	0
Other					0	0	0
Other:					0	0	0
Other:					0	0	0
Total Household expenses:	\$ 6,348 \$ 3,015	\$ 3,620 \$ 5,199 \$ 2,872	\$ 3,194 \$ 4,357 \$ 5,949 \$ 2,990 \$	3,104 \$ 5,822 \$	3,137 \$ 49,606	\$ 4,021 \$	4,134
Manthly Diracchla Iroma	5 3101 \$ 1000 01 \$	1,001 \$ (5,00)	3 009 t 3 000 t 3 1810 t 3 182 t 3	\$ 1000.0	1 206 6	2 (1000) 6	090
Monthly Disposable Income	016/1 \$ (757/2) \$	1,051 ¢ (000) ¢ 150,1	1,144 \$ (2,014) \$ 2,502 \$ 1,002	(5,515)	n.	¢ (010/1)	700

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

(1 of 3): Income, household expenses

• Average time period used is listed

orm 433A	Form 433A Form 433A-OIC					Explanation of averaging time period that is indicative of future inconsekspenses	indicative of future incometagemes
Line #	- Line #	AVERAGE MONTHLY INCOME	Average Actual		MDI-FINAL	Averaging time period	Time period rationale
		Household Income: cash basis					
		Gross Wages 1:					
	100	Gross Wages 2:					
77-07	10-00	Gross Wages 3:					
		Gross Wages 4:					
	į	Self-employment net income 1:	\$ 4,402		\$ 4,402	4,402 last 12 months	Business cycle
52	36	Self-employment net income 2:					Consistent with last years
24	35	Net rental income					tax return
25	34	Distributions (K-1 IRA etc.)					
32-33	32	Proceeds from sale of investments					
22	er er	Interest and divident income					
26-27	33	Dension income					
28-20	33	Contactivity income					
2 6	70 0	periodic trocam place					
3 5	òô	Alimonia support received					
31	28	Allmony received					
32-33	32	Employer allowances					
32	32	Other income:					
32-33	32	Other income:					
34	Box D	Total Income	\$ 4,402		\$ 4,402		
		AVERAGE MONTH! V HOLIGEROLD EVDENCES				Evolutionalism of summanion from a manipul flast is inclinating of 6 de per incommed communion	in inches aliens of the sterna incremental commences
		AVEINAGE MOINTIET HOUSEHOLD LAFLINGLES				די אל מים ויסוורמי ביני סיבים סנילינו על נווויובי ליבינונים מיסויים	יוועריםווונים בנו וכערווים ווערנונותם לאכנו ואכני
		Household expenses paid: cash basis				Averaging time period	Time period rationale
		DESTRUCT SIGNATURE OF PRICES					
		Food, clothing, and other expenses*	Average Actual	Standard Allowed	IRS ATP- FINAL	Average Actual Standard Allowed IRS ATP-FINAL Standard allowance taken (Y/N)?	
		Food	\$ 820	s	s	820 yes	
		Housekeeping supplies	\$ 75	s	s		
		Apparel and services	\$ 157	s	\$ 157		
		Personal care prodcuts and services	\$ 80	\$ 80	\$ 80		
		Miscellaneous	\$ 279	\$ 279	s		
35	39	TOOL FCM	1411	1 1411	1411		
		Housing and utilities*	Lenta Actual	house	IDS ATD, FINAL	Expension in averaging interpendent is indicated in thurstone in turne interpendence in the second control of the second retions in the period retions in the period retions in the second retions in	Time nerical rationals
		Mortsage/rent	\$ 631		\$ 631	631 last 3 months	reflects payment
		HOAdues	· w				
		Taxes	. 00				
		Insurance	\$ 62		\$ 62	62 last 12 months	reflects average for year
		Electric	\$ 70			70 last 12 months	reflects average for year
		Gas/heating oil	\$ 108		-	108 last 12 months	reflects average for year
		Home phone	. 00				
		Cell phone	\$ 189			last 12 months	reflects average for year
		Water	\$			68 last 12 months	reflects average for year
		Repairs/maintenance	\$ 106			106 last 12 months	reflects average for year
		Internet/cable	\$ \$ 727			127 last 12 months	reflects average for year
		Other: trash	S			9 last 12 months	reflects average for year
		Other:					
20	;						

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

(2 of 3): Transportation, medical, other allowable expenses

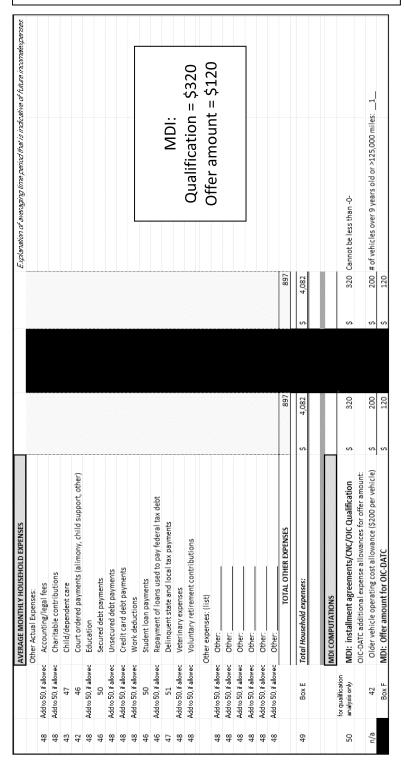
Average time-period used is listed

		AVERAGE MONTHLY HOUSEHOLD EXPENSES				Explanation of averaging time period that is indicative of future inconsetigueness	idicative of future incomelexpenses
		Transportation Expenses:	Average Actual	Standard Allowed		IRS ATP- FINAL Averaging time period	Time period rationale
5	44	Ownership: Car payment- car 1*			=		
è.	7	Ownership: Car payment- car 2*					
8	W	Operating costs: Car 1*	\$ 239 \$	\$ 239 \$		239 Standard allowance taken (Y/N)? Yes	standard
8	74	Operating costs: Car 2*				Standard allowance taken (Y/N)?	
33	43	Public transportation*				Standard allowance taken (Y/N)?	
		TOTAL TRANSPORTATION	\$ 239 \$	\$ 239 \$	\$ 239		
		Out-of-oncket medical expenses	Average Actual	Allowance	IRS ATP. FINAL	RS ATP- FINAL Standard allowance taken (Y/N)?	
		Medical services, including doctors	\$ 166		\$ 166 yes	Ve5	standard (2 under 65)
		Prescripts					
**************************************		Medical supplies					
		Other					
41	45	TOTAL OUT-OF-POCKET MEDICAL or ALLOWANCE	\$ 166 \$	\$ 166 \$		166 standard taken	
						Explanation of avaraging time period that is indicative of future incometapenses	idicative of future incometapenses
		Other Expenses:	Average Actual	Standard Allowed		IRS ATP- FINAL Averaging time period	Time period rationale
8	44	Health insurance					
4	48	Term life insurance					
		Taxes paid:					
		Federal taxes paid	728		728	728 Quarterly ES payment of \$2184	last 12 months
45	49	FICA/Medicare taxes paid					
		State/local taxes paid	169		169	169 Quarterly ES payment of \$507	last 3 mo - started to make up
48	Add to 50, if allowe	Add to 50, if allowed Mandatory retirement contributions					state pymts

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

(3 of 3): Other expenses and ATP/RCP MDI calculation

· Average time period used is listed



#5: OIC qualification and offer amount computations

OIC qualification= can pay \$45,634 (Less than tax owed = qualify)
Offer amount is \$5,604

orc qualification and other amount computations					
	Form 656		OIC qualification	OIC offer amount	Reference
Form 433-A (OIC) Line #	Line #	ATP/RCP factor	Ability to pay	Reasonable Collection Potential	Schedule
for analification analysis only		Equity in accase without OIC examptions	7 234		OIC: Equity in Asset Summary
					Form 433A(OIC): Equity in Asset
					Summary for Offer Amount
Box A and Box B (if applicable)		Net realizable equity in assets (with added allowances)		\$ 4,164	4,164 Determination
					MDI Computation (ability to pay
for qualification analysis only		MDI, without special OIC allowances	\$ 320		determination for IA/CNC/OIC
					MDI Computation (ability to pay
					determination for IA/CNC/OIC
Box F		MDI, with OIC special allowances		\$ 120	120 qualification/OIC offer amount)
for qualification analysis only		Months remaining to longest statute expiration date	120		
		OIC qualification calculation			
		Ability to pay before CSED expires (equity in assets plus			
for qualification analysis		MDI X months remaining to longest CSED)	\$ 45,634		
only		Liability owed	\$ 142,211		
		Qualification: Liability > ATP (Yes/No)	Yes		
		OIC offer amount calculation			
Box A and Box B (if applicable)		NRE in assets		\$ 4,164	
		Future income (MDI, with special allowances for 12			000000000000000000000000000000000000000
Box G or H		months (lump-sum payment) or 24 months (periodic		\$ 1,440	1,440 Lump sam selected
		payment)			1011110
Offer Amount Box	Section 4	Section 4 Offer amount: RCP		\$,604	

Form 656	Depa	rtment of the Treasury — Internal Revenue Service	
(April 2024)		Offer in Compromise	
To: Commissioner of Inte	rnal Revenue Service		IRS Received Date
In the following agreement, the parties are signing this agreet		ice of "I" when there are joint liabilities and both	(COIC use only)
	ise the tax liabilities plus any interest, p e and period(s) marked in Section 1 or	enalties, additions to tax, and additional amounts Section 2 below.	
Oid you use the Pre-Qualifie or by scanning the QR code		ocate the tool on our website at IRS.gov/OICtool	
Yes X No			
	-	sending in your offer. However, it is recommended.	FEI 69 VOLDALVIET
	eparate offers if either spouse has sep		
include the \$205 fee and initia either Section 1 or Section 2, I		ou qualify for the Low-Income Certification. Fill out	
Section 1	Individual Information (Form	1040 filers)	
		ual with personal liability for Excise tax, individual respo responsible for partnership liabilities, you should fill out \$	
Your first name, middle initial,	last name	Social Security Number (SSN), Individual Taxp	ayer or Identification
Greg SE Taxpayer		Number (ITIN) (if applicable)	
If a joint offer, spouse's first na	me middle initial last name	123 - 45 - 6789 Social Security Number (SSN), Individual Taxp	aver or Identification
a joint offer, spouse's first he	ine, mode inda, last hame	Number (ITIN) (if applicable)	ayer or identification
Your home physical address (street, city, state, ZIP code, county of reside	nce)	
Taxbalance Way Cleveland WI 53015			
ls this a new address since yo	ur last filed tax return		Yes X No
lf yes, would you like us to up	date our records to this address		Yes X No
Your Employer Identification N -	lumber (If applicable)		
Individual Ta	x Periods (For Individual or Se	ole-Proprietor Tax Debt Only) List all years/p	eriods owed
Form 1040 U.S. Individu	ial Income Tax Return [e.g., 12-31-201	8] 2012, 2018-2023	
Trust Fund Bossons Br	anally as a resonantible poster of setter	- burbarr assess	
	enalty as a responsible person of (enter ding and Federal Insurance Contribution	ons Act taxes (Social Security taxes), for period(s) endin	g [e.g., 03-31-2019]
Form 941 Employer's Q	uarterly Federal Tax Return - Quarterly	period(s)	
Form 940 Employer's A	nnual Federal Unemployment (FUTA)	Tax Return - Year(s) [e.g., 12-31-2018]	
Other Federal Tax(es) [specify type(s) and period(s)]		
Note: If you need more attachment.	space, use attachment and title it "Atta	achment to Form 656 dated" Make	e sure to sign and date the
Also, the IRS will not compron containing a liability for which	nise any liability for which an election u payment is being deferred under IRC § e regulations thereunder has occurred	sessed by the IRS. Any liability arising from restitution in nder IRC § 965(i) is made; such liabilities are excluded 965(h)(1) can only be processed for investigation if an and no portion of the liability to be compromised result	from this offer. Any offer acceleration of payment
-			

			Page
	ow-Income Certification (Individuals and Sol	Proprietors Only)	
eturn (Form 1040) or your househo ased on your family size and where uring the consideration of your offe	fication? You qualify if your adjusted gross income, as dete Id's gross monthly income from Form 433-A(OIC) x 12, is e you live. If you qualify, you are not required to submit any r. If your business is other than a sole proprietor or the off The IRS will verify whether you qualify for Low-Income Cer	qual to or less than the payments or the appli r is being filed for a de	amount shown in the chart below cation fee upon submission or
	es below you are certifying that your adjusted gross inc u for the Low-Income Certification.	ome or your househ	old's gross monthly income x 1
_	ertification because my adjusted gross income for my house	hold's size is equal to	or less than the amount shown in
I qualify for the Low-Income Ce the table below.	ertification because my household's size and gross monthly	income x 12 is equal t	o or less than the income shown i
YOU QUALIFY FOR THE LOW-I	NCOME CERTIFICATION DO NOT INCLUDE ANY PAYM ed to the tax liability in the best interest of the government.	ENTS WITH YOUR O	FFER. Generally these payments
Size of family unit	48 contiguous states, D.C., and U.S. Territories	Alaska	Hawaii
1	\$36,450	\$45,525	\$41,925
2	\$49.300	\$61,600	\$56,700
3	\$62,150	\$77,875	\$71,475
4	\$75.000	\$93,750	\$86,250
5	\$87,850	\$109,825	\$101,025
6	\$100,700	\$125,900	\$115,800
7	\$113,550	\$141,975	\$130,575
8	\$126,400	\$158,050	\$145,350
or each additional person, add	\$12,850	\$16,075	\$14,775
isiness name	ncluding the Form 433-B (OIC), a \$205 application fee, and	initial payment.	
usiness name /a		initial payment.	
usiness name /a usiness physical address (street, cit	y, state, ZIP code)	initial payment.	
usiness name /a usiness physical address (street, cit) usiness mailing address (street, cit) mployer Identification Number	y, state, ZIP code)	initial payment.	Telephone number
usiness name fa usiness physical address (street, cit usiness mailing address (street, cit) mployer Identification Number	y, state, ZIP code) , state, ZIP code)	initial payment.	Telephone number
usiness name (a usiness physical address (street, cit usiness mailing address (street, cit) usiness mailing address (street, cit)	y, state, ZIP code) , state, ZIP code)		() -
isiness name a isiness physical address (street, cit isiness mailing address (street, cit isiness physical address (street, cit isiness phy	y, state, ZIP code) , state, ZIP code) Name and title of primary contact		() -
isiness name isiness physical address (street, cit isiness physical address (street, cit isiness mailing address (street, cit) inployer Identification Number inployer Identification Number inployer Identification Number Business Tax I Form 1120 U.S. Corporate Inc.	y, state, ZIP code) , state, ZIP code) Name and title of primary contact Periods (If Your Offer is for Business Tax Debt		() -
usiness name //a usiness physical address (street, city usiness mailing address (street, city mployer Identification Number - Business Tax I Form 1120 U.S. Corporate Inc Form 941 Employer's Quarter	y, state, ZIP code) , state, ZIP code) Name and title of primary contact Periods (If Your Offer is for Business Tax Debt come Tax Return - [e.g., 12-31-2019]	Only) List all year	() -
usiness name la usiness physical address (street, city usiness mailing address (street, city usiness mailing address (street, city usiness mailing address (street, city usiness Tax Business Tax Form 1120 U.S. Corporate Inc Form 941 Employer's Quarter	y, state, ZIP code) Name and title of primary contact Periods (If Your Offer is for Business Tax Debt come Tax Return - [e.g., 12-31-2019] ly Federal Tax Return - [e.g., 03-31-2019] Federal Unemployment (FUTA) Tax Return - [e.g., 12-31-2019]	Only) List all year	() -
isiness name a siness physical address (street, city isiness mailing address (street, city inployer Identification Number Business Tax Form 1120 U.S. Corporate Inc Form 941 Employer's Quarter Form 940 Employer's Annual Other Federal Tax(es) [specify	y, state, ZIP code) Name and title of primary contact Periods (If Your Offer is for Business Tax Debt come Tax Return - [e.g., 12-31-2019] ly Federal Tax Return - [e.g., 03-31-2019] Federal Unemployment (FUTA) Tax Return - [e.g., 12-31-2019]	Only) List all year	() - s/periods owed
isiness name a siness physical address (street, city isiness mailing address (street, city inployer Identification Number Business Tax Form 1120 U.S. Corporate Inc Form 941 Employer's Quarter Form 940 Employer's Annual Other Federal Tax(es) [specify	y, state, ZIP code) Name and title of primary contact Periods (If Your Offer is for Business Tax Debt come Tax Return - [e.g., 12-31-2019] ly Federal Tax Return - [e.g., 03-31-2019] Federal Unemployment (FUTA) Tax Return - [e.g., 12-31-2019]	Only) List all year	() -
usiness name (a usiness physical address (street, cit) usiness mailing address (street, cit) usiness mailing address (street, cit) usiness mailing address (street, cit) Business Tax I Form 1120 U.S. Corporate Inc Form 941 Employer's Quarter Form 940 Employer's Annual Other Federal Tax(es) [specify Note: If you need more space	y, state, ZIP code) Name and title of primary contact Periods (If Your Offer is for Business Tax Debt come Tax Return - [e.g., 12-31-2019] ly Federal Tax Return - [e.g., 03-31-2019] Federal Unemployment (FUTA) Tax Return - [e.g., 12-31-2019]	Only) List all year	() - s/periods owed
usiness name //a usiness physical address (street, cit) usiness mailing address (street, cit) usiness mailing address (street, cit) mployer Identification Number Business Tax I Form 1120 U.S. Corporate Inc Form 941 Employer's Quarter Form 940 Employer's Annual Other Federal Tax(es) [specification Note: If you need more space	y, state, ZIP code) Name and title of primary contact Periods (If Your Offer is for Business Tax Debt come Tax Return - [e.g., 12-31-2019] ly Federal Tax Return - [e.g., 03-31-2019] Federal Unemployment (FUTA) Tax Return - [e.g., 12-31-2019]	Only) List all year	() - s/periods owed

ot only ONE of the three check boxes below. Doubt as to Collectibility - I do not have enough calculated on Form 433-A(OIC) and/or Form 433-Note: If you have special circumstances which we economic hardship attach a detailed explanation. Effective Tax Administration - Economic Hardcircumstances, requiring full payment would caus Attach a detailed explanation.	-B(OIC). ould preve		-	-
calculated on Form 433-Å(OIC) and/or Form 433- Note: If you have special circumstances which we economic hardship attach a detailed explanation. Effective Tax Administration - Economic Hard circumstances, requiring full payment would caus	-B(OIC). ould preve		-	-
economic hardship attach a detailed explanation. Effective Tax Administration - Economic Hard circumstances, requiring full payment would caus		ent you from paying the	e minimum offe	or amount calculated on Form 433 A (OIC) due to
circumstances, requiring full payment would caus	chin Iba			er amount calculated on Form 455-A (OIC) due to
	e an econ	omic hardship. I owe t	his tax liability	. (Only individuals qualify for this consideration).
Effective Tax Administration - Public Policy or liability could be viewed as inequitable. I owe this hardship. Example: A payroll service provider mis	tax liabilit	y. The amount I am of	fering is based	d on my exceptional circumstances, not economic
ction 4 Payment Terms				
Check only one of the payment options	below to	indicate how lone	ı it will taka	you to pay your offer in full. You must
		offer amount shoul		
np Sum				
•				th - d-tft
Check here if you will pay your offer in 5 or fe	awer payr	nents within 5 or few	er months fro	om the date of acceptance:
Enclose a check for 20% of the offer amount (wa	aived if you	u met the requirement	s for Low-Inco	me Certification) and fill in the amount(s) of your
future payment(s).				
Total offer amount	-	20% initial pay		= Remaining balance
\$ 5604	- \$		11	21 = \$ 4483
You may pay the remaining balance in one p	oayment a	after acceptance of th	ne offer or up	to five payments, but cannot exceed 5
months.	500			
Amount of payment \$	500	payable within	1	Month after acceptance
Amount of payment \$	500	payable within	2	Months after acceptance
Amount of payment \$	500	payable within	3	Months after acceptance
Amount of payment \$	500	payable within	4	Months after acceptance
Amount of payment \$	2483	payable within	5	Months after acceptance
	al of 24. F	or example, if you ar		your payments extend for 24 months then you 4. There will be 22 payments between the first
Enclose a check for the first month's payment (w	ralved if you	ı met the requirements for	r Low-Income Co	erancation).
The first monthly payment of \$	is in	cluded with this offer t	hen \$	will be paid on the (plck number 1-2)
day of each month thereafter for	month	s with a final payment	of \$	to be paid on the day of the
month.	00000			aujauj
Income Certification). Failure to make regular returned with no appeal rights. If you qualifie	r monthly d under t	payments until you he Low-Income Certi	have received fication and a	fer (waived if you met the requirements for Lo 1 a final decision letter will cause your offer to are not required to submit payments while the tance of the offer, unless another date is agre

Page 4 Section 5 Designation of Payment and Electronic Federal Tax Payment System (EFTPS) Designation of Payment If you want your payment to be applied to a specific tax year and a specific tax debt, such as employment taxes or a Trust Fund Recovery Penalty, 2023 tell us the tax period/quarter . If you are not specific with your designation we will apply any money you send to the government's best interest. If you want to designate any future payments not included with this Form 656 while the offer is pending [see section 7(j) below] with the IRS, you must include the specific tax year and type of tax at the time each payment is made. However, you cannot designate the application fee or any payment after the IRS accepts the offer. Note: Payments submitted with your offer cannot be designated as estimated tax payments for a current or past tax year. Electronic Federal Tax Payment System (EFTPS) List offer payments made through Electronic Federal Tax Payment System (EFTPS) below. Offer application fee \$205 Offer payment Date Electronic funds transfer number (15 digits) Note: Any Offer Application Fee or initial payment made electronically must be made the same date your offer is mailed. Source of Funds, Making Your Payment, Filing Requirements, and Tax Payment Requirements Section 6 Source of Funds Tell us where you will obtain the funds to pay your offer Borrow from friends or family and sale of boat Making Your Payment Include separate checks for the payment and application fee. Make checks payable to the "United States Treasury" and attach to the front of your Form 656, Offer in Compromise. All payments must be in U.S. dollars. 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. You may also make payments electronically through Electronic Federal Tax Payment System (FETPS). Your offer will be returned to you if the application fee and the required payment are not included, or if your other is returned for insufficient funds. Filing Requirements |X| I have filed all required tax returns and have included a complete copy of any tax return filed within 12 weeks of this offer submission I was not required to file a tax return for the following years Note: Do not include original tax returns with your offer. You must either electronically file your tax return or mail it to the appropriate IRS processing office before sending in your offer. Tax Payment Requirements (check all that apply) X I have made all required estimated tax payments for the current tax year I am not required to make any estimated tax payments for the current tax year I have made all required federal tax deposits for the current quarter and two preceding quarters X I am not required to make any federal tax deposits for the current quarter and two preceding quarters By submitting this offer, I have read, understand and agree to the following terms and conditions: Terms, Conditions, and Legal a) I request that the IRS accept the offer amount listed in this offer application as payment of my outstanding tax a) request that the IRO acceptance were the anomalises on any additional amounts required by law) as of the date listed on this form. I authorize the IRS to amend Section 1 or Section 2 if I failed to list any of my assessed tax debt or tax debt assessed before acceptance of my offer. By submitting a joint offer, both signers grant approval to the Internal Revenue Service to disclose the existence of any separate liabilities owed. b) I also authorize the IRS to amend Section 1 or Section 2 by removing any tax years on which there is currently no outstanding liability. I understand that my offer will be accepted, by law, unless the IRS notifies me otherwise, in writing, within 24 months of the date my offer was received by our IRS centralized offer in compromise unit, located in Memphis/Brookhaven. See mailing instructions on page 29 of Form 656-B. The 24-month period for a deemed acceptance will not begin to run until the correct site receives the offer. I also understand that if any tax debt that is included in the offer is in dispute in any judicial proceeding that tax debt will not be included in determining the expiration of the 24-month period. I instruct the IRS to disregard any period on my Form 656 for overt ordinard pertitution or under the jurisdiction of the Department of Justice. court ordered restitution or under the jurisdiction of the Department of Justice Catalog Number 16728N Form 656 (Rev. 4-2024) www.irs.gov

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Section 7 (Continued) Offer Terms

IRS will keep my payments, fees, and some refunds

- c) I voluntarily submit the payments made on this offer and understand that they will not be returned even if I withdraw the offer or the IRS rejects or returns the offer. Unless I designate how to apply each required payment in Section 5, the IRS will apply my payment in the best interest of the government, choosing which tax years and tax debts to pay off. The IRS will also keep my application fee unless the offer is not accepted for processing.
- d) I understand that if I checked the Low-Income Certification in Section 1, then no payments are required. If I qualify for the Low-Income Certification and voluntarily submit payments, all money will be applied to my tax debt and will not be returned to me.
- e) Treas. Reg. section 301.7122(e)(5) states, in part, that acceptance of an offer in compromise will conclusively settle the liability for the tax periods specified in the offer. To enforce the regulation as a contract term, I agree that I cannot file an amended return for the tax years listed on Form 656 after the offer is accepted. Further, I agree that I will not file an amended return for the tax years listed on Form 656 after thave submitted my offer and while my offer remains pending [see section 7(j) below] with the Service. The filing of the amended return could be considered grounds for termination. In addition, any refunds related to an amended return filed for a tax year which has an ending date prior to offer acceptance will be offset to the tax liability. If I receive a refund prior to offer acceptance, or based on an amended return for any tax periods extending to the date my offer is accepted, I will return the refund within 30 days of receiving the refund. The IRS will keep any refund, including interest, that I might be due for tax returns filed through the date the IRS accepts my offer. Systemic offset of overpayments will continue in accordance with IRC 6402(a) prior to the offer acceptance date. I understand that my tax refund may be offset to the tax liability while the offer is pending, but that assistance could be available for taxpayers (other than businesses) facing an economic hardship.
- f) I understand that the amount I am offering may not include part or all of an expected or current tax refund, money already paid, funds attached by any collection action, or anticipated benefits from a capital or net operating loss.
- g) The IRS will keep any monies it has collected prior to this offer. Under section 6331(k), the IRS may levy on my property and rights to property up to the time that the IRS official signs and acknowledges my offer as pending. The IRS may keep any proceeds arising from such a levy. No levy will be issued on individual and responsibility payments. However, if the IRS served a continuous levy on wages, salary, or certain payments under sections 6331(e) or (h), then the IRS could choose to either retain or release the levy.
- h) The IRS will keep any payments that I make related to this offer. I agree that any funds submitted with this offer will be treated as a payment I also agree that any funds submitted with periodic payments made after the submission of this offer and prior to the acceptance, rejection, or return of this offer will be treated as payments.
- If my offer is accepted and my final payment is more than the agreed amount, the IRS will not return the difference, but will apply the entire payment to my tax debt.

Pending status of an offer and right to appeal

- j) 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, or returns my offer, or I withdraw my offer. An offer is alore considered pending 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. 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.
- k) I waive the right to an Appeals hearing if I do not request a hearing in writing 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.

- I) As both an express condition and as a contractual promise, I will strictly comply with all provisions of the internal revenue laws, including requirements to timely file tax returns and timely pay taxes for the five year period beginning with the date of acceptance of this offer and ending through the fifth year. I agree to promptly pay any liabilities assessed after acceptance of this offer for tax years ending prior to acceptance of this offer that were not otherwise identified in Section 1 or Section 2 of this agreement. I also understand that during the five year period I cannot request an installment agreement for unpaid taxes incurred before or after the accepted offer. I understand that I cannot request an offer for a tax liability during the five year period. 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. An accepted offer will not be defaulted solely due to the assessment of an individual shared responsibility payment. I understand failure to pay any restitution-based assessments will provide basis for the default or offer acceptance for administrative tax periods included on this Form 656.
- m) I agree that I will remain liable for the full amount of the tax liability, accrued penalties and interest, until I have met all of the terms and conditions of this offer. Penalties and interest will continue to accrue until all payment terms of the offer have been met. If I file for bankruptcy before the terms and conditions of the offer are met, I agree that the IRS may file a claim for the full amount of the tax liability, accrued penalties and interest, and that any claim the IRS files in the bankruptcy proceeding will be a tax claim.
- n) Once the IRS accepts my offer in writing, I have no right to challenge the tax debt(s) in court or by filing a refund claim or refund suit for any liability or period listed in Section 1 or Section 2, even if the IRS defaults or rescinds the offer.

...

Section 7 (Continued) Offer	Terms	
l understand what will happen if I fail to meet the terms of my offer (e.g., default).	o) If I fail to meet any of the terms of this offer, the IRS may revoke the certificate file a new notice of federal tax lien; levy or sue me to collect any amount ranging it payments to the original amount of the tax debt (less payments made) plus penal accrued from the time the underlying tax liability arose. The IRS will continue to a section 6801 of the Internal Revenue Code, on the amount the IRS determines is provide false information or documents in conjunction with this offer or conceal m then the IRS may reopen my offer and exercise its discretion in the further treatm termination of the offer contract. If the IRS terminates my offer contract, I will be li tax liability, accrued penalties and interest.	from one or more missed ties and interest that have dd interest, as required by due after default. I agree that i y assets or my ability to pay, ent of the offer, including a
l agree to waive time limits provided by law.	p) To have my offer considered, I agree to the extension of the time limit provided (statutory period of assessment). I agree that the date by which the IRS must ass date by which my debt must ourrently be assessed plus the period of time my offer year if the IRS rejects, returns, or terminates my offer or I withdraw it. (Paragraph pending and withdrawal.) I understand hat I have the right not to waive the statul limit the waiver to a certain length or certain periods or issues. I understand, howe consider my offer if I refuse to waive the statutory period of assessment or if I pro understand that the statutory period for collecting my tax debt will be suspended to pending with the IRS, for 30 days after any rejection of my offer by the IRS, and of my offer is being considered by the Independent Office of Appeals. By submitti withdraw any pending installment agreement that is on file for all tax periods and installment agreement that has been accepted for procaccepted its terms) will not be automatically reinstated after the offer is closed.	ess my tax debt will now be the ir is pending plus one additions (j) of this section defines one period of assessment or to were that the IRS may not vide only a limited waiver. I als during the time my offer is uring the time that any rejection go this offer I immediately understand a pending
l understand the IRS may file a Notice of Federal Tax Lien on my property.	q) The IRS may file a Notice of Federal Tax Lien during consideration of the offer over time. If the offer is accepted, the tax lien(s) for the periods and taxes listed in released within 45 days after the final payment has been received and verified. Tile to the IRS from commercial institutions varies based on the form of payment. If I I amount, then the IRS may be entitled to any proceeds from the sale of my proper of Federal Tax Lien on any individual shared responsibility debt.	Section 1 will generally be he time it takes to transfer fund have not finished paying my off
Correction Agreement	r) I authorize the IRS, to correct any typographical or clerical errors or make mino that I signed in connection to this offer.	r modifications to my Form 656
l authorize the IRS to contact relevant third parties in order to process my offer.	s) By authorizing the IRS to contact third parties, I understand that I will not be no IRS contacts as part of the offer application process, including tax periods that ha in $\S7602$ (c) of the Internal Revenue Code. In addition, I authorize the IRS to req from a credit bureau.	ve not been assessed, as state
l am submitting an offer as an individual for a joint liability.	t) I understand if the liability sought to be compromised is the joint and individual I obligor(s) and I am submitting this offer to compromise my individual liability only, does not release or discharge my co-obligor(s) from liability. The United States st against the co-obligor(s).	then if this offer is accepted, it
l understand the IRS Shared Responsibility Payment (SRP).	u) If your offer includes any shared responsibility payment (SRP) amount that you essential health coverage for you and, if applicable, your dependents per Internal - Individual shared responsibility payment, it is not subject to penalties (except ap lien and levy enforcement actions. However, interest will continue to accrue until due. We may apply your federal tax refunds to the SRP amount that you owe until	Revenue Code Section 5000A plicable bad check penalty) or you pay the total SRP balance
I understand the IRS is required to make certain information public.	v) The IRS is required to make certain information, such as taxpayer name, city/s offer terms, available for public inspection and review for one year after the date of	
Secure Messaging	w) By sending and receiving encrypted messages through the IRS Secure Messa offer final determination letters on this platform.	ging platform, I agree to accep
	www.irs.gov	

		Page 7
Section 8 Signatures Under penalties of perjury, I declare that I have examined knowledge and belief, it is true, correct and complete.	d this offer, including accompanying schedu	iles and statements, and to the best of my
Signature of Taxpayer/Corporation Name	Phone number	Today's date (mm/dd/yyyy)
digitature of respectively person in the second	555-555-5555	4/30/2024
By checking this box you are authorizing the IRS to		
this offer on your voice mail or answering machine.	,	-
Signature of Spouse/Authorized Corporate Officer	r Phone number	Today's date (mm/tid/yyyy)
By checking this box you are authorizing the IRS to this offer on your voice mail or answering machine.	contact you at the telephone number listed above	ve and leave detailed messages concerning
Section 9 Paid Preparer Use Onl	ly	
Signature of Preparer	Phone number	Today's date (mm/dd/yyyy)
By checking this box you are authorizing the IRS to this offer on your voice mail or answering machine.	contact you at the telephone number listed above	ve and leave detailed messages concerning
Name of Paid Preparer	Preparer's CAF no. or i	PTIN
Firm's name (or yours if self-employed), address, and ZIP co	ode	
If you would like to have someone represent you during copy of a previously filed form. Form 2848 allows for rep current tax year on the form, in the list of applicable yea Form 8821 allows a third party to receive confidential inf would like a third party to receive confidential information the form.	oresentation and receipt of confidential informs or periods. formation but they cannot represent you bef	mation. You should also include the or the IRS in a Collection matter. If you
IRS Use Only. I accept the waiver of the statutory period	of limitations on assessment for the Internal Re	wenue Service, as described in Section 7(p).
Signature of Authorized Internal Revenue Service Official	Title	Date (mm/dd/yyyy)
	1 Statement	
144 for the information on this form to correspet the integral	Privacy Act Statement	-it to request this information is continue.
We ask for the information on this form to carry out the intern 7801 of the Internal Revenue Code. Our purpose for requesting the information is to determine if however, if you choose to do so, you must provide all of the tyrocessing your request. If you are a paid preparer and you prepared the Form 656 fo 656, and provide identifying information. Providing this informevenue laws of the United States and may be used to regula Department Circular No. 230, Regulations Governing the Pra Appraisers before the Internal Revenue Service. Information We may also disclose this information to cities, states and the Providing false or fraudulent information on this form may su	it is in the best interests of the IRS to accept an taxpayer information requested. Failure to provi or the taxpayer submitting an offer, we request it mation is voluntary. This information will be used ate practice before the Internal Revenue Service actice of Attorneys, Certified Public Accountants on this form may be disclosed to the Departme to District of Columbia for use in administering the District of Columbia for use in administering the page 12.	n offer. You are not required to make an offer; ide all of the information may prevent us from that you complete and sign Section 9 on Form of to administer and enforce the internal e for those persons subject to Treasury s, Enrolled Agents, Enrolled Actuaries, and that of Justice for civil and criminal litigation. heir tax laws and to combat terrorism.
Catalog Number 16728N	www.irs.gov	Form 656 (Rev. 4-2024)

APPLICATION CHECKLIST		
Review the entire application using the	he Application Checkl	ist below. Include this checklist with your application.
Forms 433-A (OIC), 433-B (OIC), and 656	✓ Did you comp	lete all fields and sign all forms
455-B (OIC), and 696	the Form 433- special circum Section 3, Re	an offer amount that is equal to the offer amount calculated on A (OIC) or Form 433-B (OIC)? If not, did you describe the instances that are leading you to offer less than the minimum in ason for Offer, of Form 656, and did you provide supporting in of the special circumstances
	✓ Have you filed due	d all required tax returns and received a bill or notice of balance
	✓ Did you includ offer submissi	le a complete copy of any tax return filed within 12 weeks of this ion
	✓ Did you select	t a payment option on Form 656
	✓ Did you sign a	and attach the Form 433-A (OIC), if applicable
	✓ Did you sign a	and attach the Form 433-B (OIC), if applicable
	✓ Did you sign a	and attach the Form 656
	you prepare a	king an offer that includes business and individual tax debts, did separate Form 656 package (including separate financial upporting documentation, application fee, and initial payment)
Supporting documentation and additional forms	✓ Did you includ	le photocopies of all required supporting documentation
	during the offer party to only re	third party to represent you and receive confidential information er process, did you include a Form 2848? If you want a third eceive confidential information on your behalf, did you include a 21? Does the authorization include the current tax year
		de a letter of testamentary or other verification of person(s) act on behalf of the estate or deceased individual
Payment	Treasury* for f	le a check or money order made payable to the "United States the initial payment? (Waived if you meet Low-Income uidelines—see Form 656)
	"United States	fe a separate check or money order made payable to the s Treasury" for the application fee? (Waived if you meet Low- cation guidelines—see Form 656)
Mail your application package to the appropriate IRS facility		433-A (OIC) and/or 433-B (OIC), and related financial appropriate IRS processing office for your state.
If you reside in:		Mail your application to:
AZ, CA, CO, HI, ID, KY, MS, NM, NV TX, UT, WA	/, OK, OR, TN,	Memphis IRS Center COIC Unit P.O. Box 30803, AMC Memphis, TN 38130-0803 844-398-5025
AK, AL, AR, CT, DC, DE, FL, GA, IA, MA, MD, ME, MI, MN, MO, MT, NC, NY, OH, PA, PR, RI, SC, SD, VA, VT foreign address	ND, NE, NH, NJ,	Brookhaven IRS Center COIC Unit P.O. Box 9007 Holtsville, NY 11742-9007 844-805-4980
		29

Form 433-A (OIC) (April 2024)	Collect	ion	Informati	fthe Treasury – on State: Employed	ment	for \	Nage E	arne	rs a	nd
Use this form if you are • An individual who owes in Individual Income Tax Ret • An individual with a perso	tum			liability (An indivi	only if the idual who	partner is subm	nally respon ship is subm itting an offe	itting an o	offer)	
An individual responsible:	_			estate of	f a deceas	sed pers	on			
•										
 An individual who is self-e income. You are consider business for yourself, or c 	ed to be self-en	nployed	d if you are in							
Note: Include attachments if addition 656, Offer in Compromise.	nal space is ne	eded t	o respond comp	letely to any qu	estion. T	his form	n should on	ly be use	ed with	the Form
Section 1 Persor	nal and Hou	seho	ld Informatio	1						
Last name	First name			Date of birth	imm/dd/vvv	n/i	;	Social Se	curity N	lumber
Taxpayer	Greg SE			8/1/1961		37		123 -	45	- 6789
Marital status		al add	ress (street, city, st.		Do yo	u				
	Taxbalano			ne, zir codej						
X Unmarried Married	Cleveland					wn your		Rent		
lf married, date of marriage (mrು/dd/yyyy) Cicveiana		.5165		_ o	ther (sp	ecify e.g., shar	e rent, live	with rel	ative, etc.)
x If you were married and lived in AZ	, CA, ID, LA, N	M, NV.	TX, WA or WI wit	nin the last ten y	ears chec	k here				
County of residence	Primary	phone		Home mailing	address	(If differe	nt from above	or post off	ice box	number)
Manotowoc	(555)	555	- 5555							
Secondary phone	FAX nun	nber								
() -	()									
·	1			1						
Provide information about your spou				15 : :::::		_				
Spouse's last name	Spouse's	s first n	ame	Date of birth (mm/dd/yyy	y)		Social Se	curity N	lumber
								-		-
Provide information for all other per: Name		usehol Age		dependent.			a depende			utes to
		62					Form 1040	_	renoid Yes	income x No
Tiffony Toynovor			_		S2000 - 1	Yes	INO		res	
Tiffany Taxpayer		02	S	ster	x			, pro-1		
Tiffany Taxpayer		02	S	ster	x	Yes	No		Yes	No
Tiffany Taxpayer		62	S	ster	X		No No		Yes Yes	No No
Tiffany Taxpayer		62	S	ster		Yes	-	_ \ \		
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					Page 2
Section 3	Personal Asset	Informatio	n (Domestic and Foreign)		
oayroll card from an employ digital assets, or financial int stablecoins, life insurance po those located in foreign cour available for each of the follor urisdictions and add attachr	er), investment, retirem erests in digital assets, olicies that have a cash itries or jurisdictions. A owing (if additional space nent(s) if additional space the nearest dollar. Do	ent accounts (such as non-fi value, or may sset value is s se is needed in ce is needed t o not enter a r	checking, savings, money market and onlin RAs, Keogh, 401(k) plans, stocks, bonds, n ungible tokens (NFTs) and virtual currencis be sold on a secondary market, a life settle biject to adjustment by IRS based on indivi- clude attachments). Ensure you also includ- orespond. legative number. If any line item is a neg-	nutual funds, certificates of 5, such as cryptocurrencies ment, and safe deposit boo dual circumstances. Enter t e assets located in foreign	deposit) and and es including he total amount
Cash X Checking	Savings	Money Marke	t Account/CD Online Account	Stored Value Card	
Bank name and country loca	tion	A	ccount number		
Bank One		9	9999999999	(1a) \$	85
Checking x Saving	s Money Marke	t Account/CD	Online Account Stored Value (Card	
Bank name and country loca	tion	A	ccount number		
Bank One		8	8888888888	(1b) \$	
			Total of bank accounts from attachn	nent (1c) \$	
		Add	lines (1a) through (1c) minus (\$1,000	0) = (1) \$	(
Investment account	Stocks Bonds	x Other br	okerage:inactive account		
Name of Financial Institution	and country location	A	ccount number		
AmeriTrade		7	77-777777		
Current market value			Minus Ioan balance		
\$ 0	x.8 = \$ 0		- \$ O	= (2a) \$	- 1
Investment account	Stocks Bonds	Other			
Name of Financial Institution	and country location	A	ccount number		
Fidelity		6	6666666		
Current market value			Minus Ioan balance		
\$ D	x.8 = \$ 0		- \$ 0	= (2b) \$	- 1
Digital asset	Number of units		Location of digital asset (exchange	Account number for a	
Description of digital asset			account, self-hosted wallet)	a custodian or broke	•
none				0	
Digital asset address for self	-hosted digital assets	US dollar eq	uivalent of the digital asset as of today		
		s		(0.1.0	
T-4-		-		= (2c) \$	
1013	i investment accounts t	rom attachme	nt. [current market value minus loan balance	401.4	(
		1	Add lines (2a) through (2d	i) = (2) \$	- 1
	401K IRA	Other			
Name of Financial Institution	and country location	^	ccount number		
Current market value			Minus Ioan balance	_	
S S	X.8 = \$		- S	= (3a) \$	(
		attachment (e			,
rotali or ret	rement accounts from	акаспілені. [С	urrent market value X .8 minus loan balance Add lines (3a) through (3t		
Note: Your reduction from	n current market valu	ie may he ar	eater than 20% due to potential tax cor		
Cash value of Life Insurance		ac may be gr	case, and 20% are to potential tax to		erianics.
Name of Insurance Compan		Р	olicy number		
Current cash value		Mi	nus Ioan balance		
S S			\$	= (4a)\$	
Total cash value of life insur	ance policies from attac		nus loan balance(s)	- (-a) +	
	ance pondes nom dude				
S		- المحادثات	\$	= (4b) \$	1
•			Add lines (4a) through (4b	o) = (4) \$	- (

Real property (enter information your spouse if you live in a comi Is your real property currently for so [Yes (Isting price) Property description (Indicate If perso single family home Amount of mortgage payment 631 Location (street, city, state, ZIP code, of Taxbalance Way Cleveland WI 53015 Current market value \$ 39,900	munity property state or do you anticip [X] No conal residence, rental p 6/30/2039 county, and country) May 20	ate selling your real voperty, vacant, etc.) ryment Lender/Contrastate, ziP code) PS Mortgag ABC Way, I linus loan balance (r \$ 31,756 voperty, vacant, etc.)	Purch 7/5/1 How to tena te holde (55) Madisa	ty to fun hase dat 1999 title is ho ants in er name ione 5-555- on WI es, etc.) (total	d the offer amount e (mm/dd/yyyy) eld (joint tenancy, etc.) common , address (street, city, 1212) 53111 sl value of real estate) = e (mm/dd/yyyy)	(5a) \$	164
Yes (listing price) Property description (indicate if personance in per	Date of final pa 6/30/2039 county, and country) Date of final pa 6/30/2039 county, and country) M 1,920	reperty, vacant, etc.) lyment Lender/Contra state, zip code) PS Mortgag ABC Way, linus loan planee (r \$ 31,756 reperty, vacant, etc.)	Purch 7/5/1 How to tena ct holde and phose (55: Madisonartgage Purch How to	hase dat 1999 title is hants in er name one 5-555- on WI es, etc.) (tota hase dat	e (mm/dd/yyyy) eld (joint tenancy, etc.) common , address (street, city, 1212) 53111 Il value of real estate) = e (mm/dd/yyyy)	(5a) \$	164
Property description (Indicate If personal single family home Amount of mortgage payment 631 Location (street, city, state, ZIP code, city) Taxbalance Way Cleveland WI 53015 Current market value 8 39,900 X.8 = \$ 37 Property description (Indicate If personal conditions) Amount of mortgage payment Location (street, city, state, ZIP code, city)	Date of final pa 6/30/2039 county, and country) M 1,920 onal residence, rental p Date of final pa country, and country)	Lender/Contra state, ZIP code) PS Mortgag ABC Way, I linus loan balance (r \$ 31,756 voperty, vacant, etc.)	7/5/1 How to tena ct holde and phose (55: Madisonortgage Purch How to tholde ct holde	1999 title is hearts in er name one 5-555- on WI es, etc.) (tota hase dat	eld (joint tenancy, etc.) common address (street, city, 1212) 53111 Il value of real estate) = e (mm/ddyyyy)	(5a) \$	164
Single family home Amount of mortgage payment 631 Location (street, city, state, ZIP code, of Taxbalance Way Cleveland WI 53015 Current market value § 39,900 X.8 = § 3 Property description (indicate if person Amount of mortgage payment Location (street, city, state, ZIP code, of	Date of final pa	Lender/Contra state, ZIP code) PS Mortgag ABC Way, I linus loan balance (r \$ 31,756 voperty, vacant, etc.)	7/5/1 How to tena ct holde and phose (55: Madisonortgage Purch How to tholde ct holde	1999 title is hearts in er name one 5-555- on WI es, etc.) (tota hase dat	eld (joint tenancy, etc.) common address (street, city, 1212) 53111 Il value of real estate) = e (mm/ddyyyy)	(5a) \$	164
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Cleveland WI 53015 Current market value	1,920 — onal residence, rental p Date of final pa county, and country)	PS Mortgag ABC Way, I linus loan balance (r \$ 31,756 voperty, vacant, etc.) lyment Lender/Contra	e (\$5: Madisonortgage Purch How t	5-555- on WI es, etc.) (tota hase dat	53111 Il value of real estate) = e (mm/dd/yyyy)	(5a) \$	164
Current market value \$ 39,900	1,920 — onal residence, rental p Date of final pa county, and country)	ABC Way, I linus loan balance (r \$ 31,756 voperty, vacant, etc.) lyment Lender/Contra	Madisonortgage Purch How t	on WI es, etc.) (tota hase dat	53111 Il value of real estate) = e (mm/dd/yyyy)	(5a) \$	164
s 39,900 x .8 = \$ 3° Property description (Indicate If personal Amount of mortgage payment according (street, city, state, ZIP code, city)	1,920 — onal residence, rental p Date of final pa county, and country)	linus loan balance (r \$ 31,756 voperty, vacant, etc.) syment Lender/Contra	Purch How t	es, etc.) (tota hase dat	il value of real estate) = e (mm/dd/yyyy)	(5a) \$	164
3 39,900 X .8 = \$ 3' Property description (Indicate If personant Indicate Indi	1,920 — onal residence, rental p Date of final pa county, and country)	\$ 31,756 woperty, vacant, etc.) syment Lender/Contra	Purch How t	(tota hase dat	e (mm/dd/yyyy)	(5a) \$	164
Property description (Indicate If personance) Amount of mortgage payment Location (street, city, state, ZIP code, or	Date of final pa	roperty, vacant, etc.) syment Lender/Contra	How t	hase dat	e (mm/dd/yyyy)	(44)4	10-
Amount of mortgage payment	Date of final pa	yment Lender/Contra	How t				
ocation (street, alty, state, ZIP code, o	county, and country)	Lender/Contra	ct holde	title is h	ald (faint tanance) etc.)		
ocation (street, city, state, ZIP code, o	county, and country)	Lender/Contra	ct holde		eld (Joint tenancy, etc.)		
					-		
Current market value	M	state, ZIP code)		er name	, address (street, city,		
Current market value	м		and pno	one			
Current market value	м						
		linus loan balance (r	nortnane	os etc i			
x .8 = \$		S.	gugc		il value of real estate) =	(5b) \$	
		•	value Y		us any loan balance(s)]	(5c) \$	
Total value of prop	erty(3) ironi attaoriii	ient journent market				- 	464
					(5a) through (5c) =	(5) \$	164
Vehicles (enter information about ar include those located in foreign cou	ny cars, boats, motor untries or jurisdiction	cycles, etc. that you o is. If additional spac	wn or le e is nee	ease). eded, lis	t on an attachment.		
Vehicle make & model	Year	Date purchased	Milea		License/Tag number		
Cadillac	2004	10/1/2009	155.		ABC- ME		
Lease Name of creditor		Date of final paym	ent	Monthle	/ lease/loan amount		
Own none		paid		s0			
Current market value	Min	nus loan balance					
2740					e of wehicle (If the vehicle		
2718 X.8 = \$ 21		s D	IS A		nter 0 as the total value) =	(6a) \$	2174
		(If line (6a) minus 5	3.450 i		ct \$3,450 from line (6a) ative number, enter "0")	(6b) \$	C
Vehicle make & model	Year	Date purchased	Milea		License/Tag number		
Boat	1983	8/1/1987	n/a		55BOAT		
Lease Name of creditor		Date of final paym		Monthly	/ lease/loan amount		
Own none		paid		s O			
Current market value	Mir	nus loan balance		-			
		_	To	otal valu	e of vehicle (If the vehicle		
\$ 5000 X.8 = \$ 40	- 00	\$ <u>D</u>	As A	leased, ei	nter 0 as the total value) =	(6c) \$	4000
	lf y	(If line (6c) minus \$	3,450 i	is a neg	ct \$3,450 from line (6c) ative number, enter "0") se amount from line (6c)	(6d) \$	(
Total value of vehicle	s listed from attachn	nent [current market	value)	X .8 min	us any loan balance(s)]	(6e) \$	(
			Total I	lines (6	6b), (6d), and (6e) =	(6) \$	4000

Total value of valuable items listed from attachment [current market value X .8 minus any loan balance(s)] Add lines (7a) through (7c) minus IRS deduction of \$11,390						Page 4
Description of asset(s) Current market value	, ,	•				
Current market value \$		jewelry, items of value in safe deposi	it boxes, interest in a company or busir	ness that k	s not publicly trade	ed, etc.)
Sample S	Description of asset(s)					
Sample S	Current market value		Minur loan halanse			
Value of remaining furniture and personal effects (not fisted above) Description of asset S 900					/7-\ e	
Description of asset Personal clothing and furniture Current market value \$ 900			- 9	=	(/a)\$	
Current market value		al effects (not listed above)				
Current market value \$ 900						
Total value of valuable items listed from attachment (current market value X.8 minus any loan balance(s)) Total value of valuable items listed from attachment (current market value X.8 minus any loan balance(s)) Total value of valuable items listed in matter than the value X.8 minus any loan balance(s)] Total value of valuable items listed from attachment (current market value X.8 minus any loan balance(s)) Total value of valuable items listed from attachment (current market value X.8 minus any loan balance(s)) Total value of valuable items listed from attachment (current market value X.8 minus any loan balance(s)) Total value of valuable items listed from attachment (current market value X.8 minus any loan balance(s)) Total value of valuable items listed from attachment (current market value X.8 minus any loan balance(s)) Total value of valuable items listed in section (correct value) Total value of valuable items listed in section (correct value) Total value of valuable items listed in section (correct value) Total value of valuable items listed in section (correct value) Total value of valuable items listed in section (correct value) Total value of valuable items listed in section (correct value) Total value of value card value any interest value of value card value any interest value and value any interest value (correct value) Total value card va			Minus Ioan halanos			
Total value of valuable items listed from attachment (current market value X. 8 minus any loan balance(s)) Add lines (7a) through (7c) minus IRS deduction of \$11,390 =		e 720			(7h) \$	72
Add lines (7a) through (7c) minus IRS deduction of \$11,390 = (7) \$ Do not include amount on the lines with a letter beside the number. Round to the nearest whole dollar. Do not enter a negative number. If any line item is a negative, enter '0' or that line. Add lines (1) through (7) and enter the amount in Box A = 41! NOTE: If you or your spouse are self-employed. Sections 4, 5, and 6 must be completed before continuing with Sections 7 and 8. Section 4 Self-Employed Information (1) your your spouse are self-employed (e.g., files Schedule(s) C, E, F, etc.), complete this section. Is your business a sole proprietorship Address of business (if other than personal residence) If you or your spouse are self-employed information (1) your your spouse are self-employed information (1) your your spouse are self-employed (e.g., files Schedule(s) C, E, F, etc.), complete this section. Is your business a sole proprietorship Address of business (if other than personal residence) If you or your spouse are self-employed (e.g., files Schedule(s) C, E, F, etc.), complete this section. Business telephone number (555) 444 - 1212 S55-5555555 Description of business Total number of employees Frequency of tax deposits Average gross monthly payroll \$ Do you or your spouse have any other business interests? Include any interest in an LLC, LLP, corporation, partnership, etc. Yes (percentage of ownership:) Title No Business selephone number (Employed) (Domestic and Foreign) List business sasets including bank accounts, diplical assets (such as cyryptourrency), tools, books, machinery, equipment, business well-less and read property that is ownedleasedirented. If additional space is needed, attach a list of items. Do not include personal assets listed in Section 3. Round to the nearest whole dollar. Do not enter a negative number. If any line item is a negative number, enter (Stored Value Card) Cash \(\text{ Checking }\) Savings \(\text{ Money Market Account(CD)}\) Online Account \(\text{ Stored Value Card}\) Bank One				=		12
Do not include amount on the lines with a letter beside the number. Round to the nearest whole dollar. Do not enter a negative number. if any line item is a negative, enter "0" on that line. Add lines (1) through (7) and enter the amount in Box A = 41 NOTE: If you or your spouse are self-employed. Sections 4, 5, and 6 must be completed before continuing with Sections 7 and 8. Section 4 Self-Employed Information If you or your spouse are self-employed, (e.g., files Schedule(s) C, E, F, etc.), complete this section. Is your business a sole proprietorship Yes No Name of business Greg's Appraisals Business telephone number (555) 444 - 1212 SS-5555555 Do you or your spouse have any other business interests? Include any interest in an LLC, LLP, corporation, parthership, etc. Yes (percentage of ownership:) Title No Business saddress (street, ctry, state, ZIP code) Type of business (select one) Partnership LLC Corporation (or Self-Employed) (Domestic and Foreign) Section 5 Business Asset Information (for Self-Employed) (Domestic and Foreign) Employer Identification Number (state) is counted assedimented. If additional space is needed, attach a list of items. Do not include personal assets listed in Section 3. Round to the nearest whole dollar. Do not enter a negative number. If any line item is a negative number, enter 'SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS		-				1
Do not enter a negative number. "Any line item is a negative, enter "0" on hat line. Add lines (1) through (7) and enter the amount in Box A = \$ \$ 41! NOTE: If you or your spouse are self-employed. Sections 4, \$, and \$ must be completed before continuing with Sections 7 and 8. Section 4 Self-Employed Information If you or your spouse are self-employed (e.g., files Schedule(s) C, E, F, etc.), complete this section. Is your business a sole proprietorship Wes No Name of business Greg's Appraisals Business telephone number (555) 444 - 1212		Add lines (/a) through (/c)	minus IRS deduction of \$11,	390 =	(/)≯	
Add lines (1) through (7) and enter the amount in Box A = 41 NOTE: If you or your spouse are self-employed, Sections 4, 5, and 6 must be completed before continuing with Sections 7 and 8. Section 4 Self-Employed (e.g., files Schedule(s) C, E, F, etc.), complete this section. Is your business a sole proprietorship Yes No Noname of business Greg's Appraisals Business telephone number (555) 444 - 1212 55-5555555 Greg's Appraisals Description of business Total number of employees Total number of employees Total number of employees Yes (percentage of ownership:) Title No Business have any other business interests? Include any interest in an LLC, LLP, corporation, partnership, etc. Yes (percentage of ownership:) Title No Business assets including bank accounts, digital assets (such as cryptocurrency), tools, books, machinery, equipment, business vehicles and real property that is ownedleased/rented. If additional space is needed, stach a list of items. Do not include personal assets listed in Section Society of the stack of the stack of the section of the digital asset of the section of digital asset (Sas) Society of digital asset address (Sas) Society (Sas) Society (Sas) Society (Sas) Society Society (Sas) Society	Do not include amount on the	e lines with a letter beside the nu	mber. Round to the nearest whole	e dollar.		
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Section 4 Self-Employed Information If you or your spouse are self-employed (e.g., files Schedule(s) C, E, F, etc.), complete this section.					•	4164
If you or your spouse are self-employed (e.g., files Schedule(s) C, E, F, etc.), complete this section. Is your business a sole proprietorship No	NOTE: If you or your spouse are self-	employed, Sections 4, 5, and 6	6 must be completed before cor	ntinuing	with Sections 7	7 and 8.
Address of business (if other than personal residence) Business skelphone number (555) 444 - 1212	Section 4 Self-Er	nployed Information				
Yes	lf you or your spouse are self-employed	(e.g., files Schedule(s) C, E, F,	etc.), complete this section.			
Name of business Greg's Appraisals Business telephone number (555) 444 - 1212	ls your business a sole proprietorship		Address of business (# other t	han persoi	nal residence)	
Business telephone number Employer Identification Number Susiness telephone number Susiness susiness Trade name or DE	x Yes No					
Business telephone number (555) 444 - 1212	Name of business					
Source S	Greg's Appraisals					
Description of business property appraisal contracting D Total number of employees D No you or your spouse have any other business interests? Include any interest in an LLC, LLP, corporation, partnership, etc. Yes (percentage of ownership:) Title No Business saddress (street, city, state, ZIP code) Business same Business telephone number () Partnership LLC Corporation () Partnership LLC Corporation () Business Asset Information (for Self-Employed) (Domestic and Foreign) Ist business assets including bank accounts, digital asset (such as cryptocurrency), tools, books, machinery, equipment, business whicles and real property that is ownedleasedirented. If additional space is needed, attach a list of items. Do not include personal assets listed in Section 3. Round to the nearest whole dollar. Do not enter a negative number. If any line item is a negative number, enter in the partnership () Bank name and country location () Bank name and	Business telephone number	Employer Identification Number	er Business website address			Trade name or DBA
Description of business property appraisal contracting Do you or your spouse have any other business interests? Include any interest in a (LLC, LLP, corporation, partnership, etc. Yes (percentage of ownership:) Title No Business name Business telephone number () - Employer Identification Numb () - Type of business (select one) Partnership LLC Corporation Numb () - Employer Identification Numb () - Section 5 Business Asset Information (for Self-Employed) (Domestic and Foreign) List business assets including bank accounts, digital assets (such as cryptocurrency), tools, books, machinery, equipment, business vehicles and real property that is ownedleasedfrented. If additional space is needed, attach a list of items. Do not include personal assets listed in Section 3. Round to the nearest whole dollar. Do not enter a negative number. If any line item is a negative number, enter of the nearest whole dollar. Do not enter a negative number of the digital asset (Ba) \$ Cash Checking Savings Money Market Account/CD Online Account Stored Value Card Bank name and country location Bank One Account number Bank One Account number Digital asset Number of units Digital asset Address for self-hosted digital assets US dollar equivalent of the digital asset as of today Self-hosted wallet) Total bank accounts from attachment (8b) \$	·	55-5555555				
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Yes (percentage of ownership:) Title			Business address (street, city,	state, ZIP	code)	
Business name Business telephone number () - Employer Identification Number () - Partnership						
Business name Business (select one) Partnership LLC Corporation X Other Sole prop Section 5 Business Asset Information (for Self-Employed) (Domestic and Foreign) List business assets including bank accounts, digital assets (such as cryptocurrency), tools, books, machinery, equipment, business vehicles and real property that is ownedleased/rented. If additional space is needed, attach a list of items, Do not include personal assets listed in Section 3. Round to the nearest whole dollar. Do not enter a negative number. If any line item is a negative number, enter an ead occurry location Bank name and country loc	- 1000) Irde				
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Partnership LLC Corporation Other solle prop	Business name		Business telephone number		Employer	Identification Number
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Section 5 Business Asset Information (for Self-Employed) (Domestic and Foreign)						
List business assets including bank accounts, digital assets (such as cryptocurrency), tools, books, machinery, equipment, business vehicles and real property that is owned/leased/rented. If additional space is needed, attach a list of items. Do not include personal assets listed in Section 3. Round to the nearest whole dollar. Do not enter a negative number. If any line item is a negative number, enter of the common of the item is a negative number, enter of the common of the item is a negative number, enter of the common of the item is a negative number, enter of the common of the common of the item is a negative number, enter of the common of the common of the item is a negative number, enter of the common of the com	- 100					
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Digital asset Digital asset Description of digital asset Cocation of digital asset Cocation of digital asset Account number for assets held by a custodian or broker Digital asset address for self-hosted digital assets US dollar equivalent of the digital asset as of today S		<u>, </u>				
Description of digital asset Digital asset address for self-hosted digital assets US dollar equivalent of the digital asset as of today \$ = (8c) \$ Total bank accounts from attachment (8d) \$	Bank One		444444444		(8b) \$	1
Description of digital asset account, self-hosted wallet) a custodian or broker	Digital asset Number o)e		
\$ = (8c) \$	Description of digital asset		account, self-hosted wallet)		a custodian or l	broker
\$ = (8c) \$	Digital asset address for self-hosted dig	ital assets - US dollar equivalen	nt of the digital asset as of today			
Total bank accounts from attachment (8d) \$	anguar datas decircas for sentinoted dig	aboca oo uunan equivalen	o. ore organic about do or roudy			
		\$		=	(8c) \$	
		and the contract of the Contra	Total bank accounts from atta	chment	(8d) \$	
			Add lines (8a) through	(8d) =	(8) \$	
Catalog Number 550080						

Section 5 (Continued) Business Asset In	nformation /for Salf	Employed) (Domestic and	Fornian)	Page 5
Description of asset	normation (for Sen	-Employed) (Domesuc and	roreign)	
Computer and office equipment (income pr	oducing asset)			
Current market value	Minus Ioan balance	Total value (If leased or used		
\$ 1500 x .8 = \$ 1200	- s O	In the production of income, enter 0 as the total value) =	(9a) \$	1200
Description of asset:				
Current market value	Minus Loan Balance	Total value (If leased or used		
\$ X .8 = \$	- S	in the production of income, enter 0 as the total value) =	(9b) \$	
Total value of assets listed from attac	chment [current market va	announced and the same of the	(9c) \$	
		Add lines (9a) through (9c) =	(9) \$	1200
IRS allowed deduction for professional		,, ,,,	(10) \$ [5,700]	
Enter the value of lin	e (9) minus line (10). l	f less than zero enter zero. =	(11) \$	0
Notes Receivable			(,-	
	No			
If yes, attach current listing that includes name(s) and		ble		
Accounts Receivable	2110211011012(2)120210			
Do you have accounts receivable, including e-paymen	nt. factoring			
companies, and any bartering or online auction accou		No No		
If yes, provide a list of your current accounts receivable	e (include the age and am	ount)		
Do not include amounts from	n the lines with a letter be	side the number [for example: (9c)].	Box B Available Busine	ee Equity in
Do not enter a negativ	e number. If any line item	Round to the nearest whole dollar. is a negative, enter "0" on that line.	Assets	ss Equity III
		l enter the amount in Box B =	\$	0
Section 6 Business Income	and Expense Infor	nation (for Self-Employed)		
If you provide a current profit and loss (P&L) statemer expenses on line 29 below. Do not complete lines (12 recent Schedule C; however, if the amount has chang Period provided beginning 5/1/2023) - (16) and (18) - (28). Yo	u may use the amounts claimed for i past year, a current P&L should be	ncome and expen-	ses on your most
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		Page 6
Section 7 Monthly Household Income and Expense Information		
Enter your household's average gross monthly income. Gross monthly income includes wages, social security, pe income. Examples of other income include but are not limited to: agricultural subsidies, gambling income, oil credi income from providing on-demand work, services or goods (e.g., Uber, Lyft, DoorDash, AirBnB, VRBO), income website, etc., and recurring capital gains from the sale of securities or other property such as digital assets. Includ your spouse, and anyone else who contributes to your household's income. This is necessary for the IRS to accur	ts, rent subsidies, s prough digital platfo e the below informa	haring economy rms like an app or ation for yourself,
Monthly Household Income		
Note: Entire household income should also include income that is considered not taxable and may not be		tax return. arest whole dollar
Primary taxpayer	Round to the ne	alest whole donal
Gross wages Social Security Pension(s) Other income (e.g. unemployment) \$	(30)\$	
Spouse		
Gross wages Social Security Pension(s) Other Income (e.g. unemployment) + \$ + \$ + \$ Total spouse income =	(31)\$	C
Additional sources of income used to support the household, e.g., non-liable spouse, or anyone else who may contribute to the household income, etc. List source(s)	100× 5	(
Interest, dividends, and royalties	(32) \$	
Distributions (e.g., Income from partnerships, sub-S Corporations, etc.)	(34)\$	
Net rental income	(35)\$	
Net business income from Box C (Deductions for non-cash expenses on Schedule C (e.g., depreciation, depletion, etc.) are not permitted as an expense for offer purposes and must be added back in to the net income figure;	(36)\$	4402
Child support received	(37) \$	(
Alimony received	(38)\$	(
Round to the nearest whole dollar.	Box D	
Do not enter a negative number. If any line item is a negative, enter "0" on that line.	Total Household	Income
Add lines (30) through (38) and enter the amount in Box D = Monthly Household Expenses Enter your average monthly expenses. Note: For expenses claimed in boxes (39) and (45) only, you should list the full amount of the		
Add lines (30) through (38) and enter the amount in Box D = Monthly Household Expenses Enter your average monthly expenses. Note: For expenses claimed in boxes (39) and (45) only, you should list the full amount of the actual amount you pay is less. For the other boxes input your actual expenses. You may find the lines gov/Businesses/Small-Businesses-&-Self-Employed/Collection-Financial-Standards.	he allowable sta	ard even if the andards at
Add lines (30) through (38) and enter the amount in Box D = Monthly Household Expenses Enter your average monthly expenses. Note: For expenses claimed in boxes (39) and (45) only, you should list the full amount of the actual amount you pay is less. For the other boxes input your actual expenses. You may find the lines gov/Businesses/Small-Businesses-&-Self-Employed/Collection-Financial-Standards. Food, clothing, and miscellaneous (e.g., housekeeping supplies, personal care products, minimum payment on credit card).	he allowable sta	ard even if the andards at arest whole dollar
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Add lines (30) through (38) and enter the amount in Box D = Monthly Household Expenses Enter your average monthly expenses. Note: For expenses claimed in boxes (39) and (45) only, you should list the full amount of the actual amount you pay is less. For the other boxes input your actual expenses. You may find a IRS.gov/Businesses/Small-Businesses-&-Self-Employed/Collection-Financial-Standards. Food, clothing, and miscellaneous (e.g., housekeeping supplies, personal care products, minimum payment on credit card). A reasonable estimate of these expenses may be used Housing and utilities (e.g., rene 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 television and Internet, telephone, and cell phone)	Round to the ne (39) \$ (40) \$	ard even if the andards at arest whole dollar 1411
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Section 8	Calculat	e Your Minir	num Ω	ffer Amou	ınt						Page
The next steps calculate over a shorter period of					аке то рау	your offer	in tuli wili arre	ct your minim	ium oner	amo	ount. Payin
Note: The multipliers t accounts) do not appl										d ba	ank
								Round to t	he near	est v	whole doll
f you will pay your offer ncome" (Box G). Do no			nonths or	less, multiply	y "Remaini	ing Monthly	Income" (Bo	x F) by 12 to	get "Fut	ure i	Remaining
Enter the total from	Box F	120		X 12	=	Box \$	G Future R	emaining lr	come		1440
f you will pay your offer a number less than \$0.	in 6 to 24 months	, multiply "Rema	aining Mo			by 24 to ge	t "Future Ren	naining Incom	e" (Box I	H). E	o not ente
numberiess than \$0. Enter the total from	Boy F					Box	H Future R	emaining Ir	come		
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you have any assets or own any real property outside the U.S. Yes No yes, provide description, location, and value or you have any funds being held in trust by a third party yes, how much \$ Where ection 10 Signatures Index penalties of perjury, I declare that I have examined this offer, including accompanying documents, and to the best of my knowledge if it true, correct, and complete. Date [mm/dd/yyyy] 4/30/2024 ignature of Taxpayer Date [mm/dd/yyyy] A/30/2024 Date [mm/dd/yyyy] Copies of the most recent pay stub, earnings statement, etc., from each employer. Copies of the most recent statement for each investment and retirement account. Copies of the most recent statement, etc., from all other sources of income such as pensions, Social Security, rental income, interest and dividends (including any received from a related partnership, corporation, LLC, LLP, etc.), court order for child support, allimony, royaltes, agnicultural subsides, gambling income, oil credits, rent subsidies, sharing conomy income from providing on-demand work, services or goods (e.g., Uber, Lyft, Airfalb, NRBO), income through digital platforms like an app or website, etc., and recurring capital gains from the sale of securities or other property such as digital assests. Copies of individual complete bank statements for the three most recent months. If you operate a business, copies of the six most recent complete statements for each business bank account. Completed Form 433-B (Collection Information Statement for Businesses) if you or your spouse have an interest in a business entity other than a sole-proprietorship. 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 Accounts Receivable or Notes Receivable if applicable. Verification of delinquent State/Local Tax Liability showing total delinquent state/local taxes and amount of monthly payments, is applicable. Copies of Count orders for child s				f more than \$10,000 including r	eal property, for Yes 🗶 No
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yes, provide description, location, and value o you have any funds being held in trust by a third party yes, how much \$ Where oction 10 Signatures made penalties of perjury, I declare that I have examined this offer, including accompanying documents, and to the best of my knowledge it true, correct, and complete. ignature of Taxpayer Date (mm/dd/yyyy) 4/30/2024 ignature of Spouse Date (mm/dd/yyyy) Lemember to include all applicable attachments listed below. Copies of the most recent pay stub, earnings statement, etc., from each employer. Copies of the most recent statement for each investment and retirement account. Copies of the most recent statement, etc., from all other sources of income such as pensions, Social Security, rental income, interest and dividends (including any received from a related partnership, corporation, LLC, LLP, etc.), oourt order for child support, alimony, royalties, agricultural subsidies, gambling income, oil credits, rent subsidies, sharing economy income from providing on-demand work, services or goods (e.g., Uber, LYH, Airfilla, NYBO), income through digital platforms like an app or website, etc., and recurring capital gains from the sale of securities or other property such as digital assets. Copies of individual complete bank statements for the three most recent months. If you operate a business, copies of the six most recent complete statements for each business bank account. Completed Form 433-B (Collection Information Statement for Businesses) if you or your spouse have an interest in a business entity other than a sole-proprietorship. Copies of ourt orders for child support/alimony payments claimed in monthly payments, loan payoffs, and balances. List of Accounts Receivable or Notes Receivable, if applicable. Verification of delinquent State/Local Tax Liability showing total delinquent state/local taxes and amount of monthly payments is applicable. Verification of delinquent State/Local Tax Liability showing total delinquent state/local taxes and amount of	o y	ou have any assets or own any rea	I property outside the U.S.		Yes x No
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#8: Attachment listing for OIC package

Attachment Listing to Form 656/433A-OIC

Date Form 656/433A-OIC submitted: 4/30/2024

Taxpayer	Name(s)	SSN:
Primary	Greg SE Taxpayer	123-45-6789

List of Documents Attached

#	Document	Explanation
1	Financial account statements: past three	Last 3 months – Feb – April 2024
	months	 1A: Bank One Acct: 999999999 (checking)
		 1B: Bank One Acct: 888888888 (savings)
2	Business financial account statements: past	Last 6 months – Nov 2022 – April 2024
	six months	 2A: Bank One Acct: 77777777 (checking)
		 2B: Bank One Acct: 6666666666 (savings)
3	Brokerage account statements: past three	Last 3 months: Feb – April 2024 (inactive)
	months (inactive)	3A: AmeriTrade account: 5555555555
		3B: Fidelity account: 444444444
4	Mortgage payment and mortgage balance	SPS Mortgage statement showing monthly mortgage payment and
	statement	balance owed as of 4/15/2024
5	Home valuation (50% - joint tenants in	Tax assessment data for value of personal residence
	common with dependent)	
6	Car valuation	KBB valuation of car
7	Boat valuation	NADA valuation of 1983 boat and trailer
8	Business Profit/loss statement: past 12	Last 12 months' P/L Statement with detailed income and expenses
	months	for Greg's Appraisal business
9	Household expenses: past 12 months	Worksheet showing household expenses for past 12 months
10	Monthly disposable income worksheet	Worksheet detailing taxpayer's projected future monthly disposable
		income
11	Federal and State estimated tax payments	11A: IRS ES payment for past 12 months
		11B: State of WI ES payment for past 6 months
12	IRS account transcripts for balance due	12A: 2012, 2018-2023 Account Transcripts
	years/forms	12B: IRS Payoff calculation showing balance owed of
	***	\$143,211
13	Tax returns, as filed, within past 60 days and	13A: 2023 Form 1040 with e-file receipt for acceptance
	returns not posted with IRS	13B: 2023 State of WI return
14	Taxpayer credit rating and credit report	14A: Credit rating- show taxpayer credit rating at 420-429
		14B: Credit report- TransUnion (other two agencies are
		available upon request)
15	Appraisal industry information	15A: Industry article: "Appraisers to lose business by 20%
		per year"
		15B: Industry article: "Appraisers are no longer needed"
		here's why"
		15C: Industry article: "The appraisal business is dead"
16	Life Insurance Proceeds received to fund OIC	\$2500 received from parent- used to fund OIC app fee and down
	down payment	payment

#9: Cover letter requesting OIC acceptance

IRS Address Brookhaven IRS COIC Unit PO Box 9007 Holtsville NY 11742-9007

Date:	April 30, 2024

Taxpayer information:				
Taxpayer	Name(s)	SSN:		
Primary	Greg SE Taxpayer	123-45-6789		
Spouse	none	n/a		
Taxpayer's	s address:			
Taxhalanc	- Way Cleveland WI 5	3105		

Tax Matters:	
<u>Forms</u>	<u>Years</u>
1040	2012, 2018-2023

Reference: Offer in compromise, Doubt to Collectibility application Form 656 and attachments

To whom it may concern:

I wish to offer \$5,604 to settle my tax liabilities for 2012, and 2018-2023 for Form 1040 (income tax). Attached is my Form 656 and supporting documentation that provides the financial information and circumstances that warrant a settlement of the proposed amount. I have also attached the required application fee and down payment.

I am an appraiser and my ability to earn future income is limited because the appraisal work is diminishing due to increased automation of this service. I do not have any other job skills and I am 62 years-old and I take care of my 62-year-old dependent sister who has a physical handicap which does not enable her to work. I have little assets and plan to pay the accepted OIC by selling my old boat and borrowing from family. I have attached several articles related to the decline of the appraisal business.

Please accept our documented offer amount to settle the liability in full.

If you have any questions, please feel free to contact me at (555) 555-5555. Thank you for your attention to this matter.

Sincerely,

/s/

Greg SE Taxpayer

Attachments: Form 656, supporting forms and documents, application fee, OIC down payment