Form <b>433-A</b> (	( <b>O</b>	IC)
(April 2024	\	

(April 2024)

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

#### Use this form if you are

- An individual who owes income tax on a Form 1040, U.S. Individual Income Tax Return
- An individual with a personal liability for Excise Tax
- An individual responsible for a Trust Fund Recovery Penalty
- An individual who is self-employed or has self-employment income. You are considered to be self-employed if you are in business for yourself, or carry on a trade or business.
- An individual who is personally responsible for a partnership liability (only if the partnership is submitting an offer)
- An individual who is submitting an offer on behalf of the estate of a deceased person

Note: Include attachments if additional space is needed to respond completely to any question. This form should only be used with the Form
656, Offer in Compromise.

Section 1 Persona	al and Hou	iseho	Id Information	on						
Last name	First name	First name			Date of birth (mm/dd/yyyy)			Social Security	Number	
Marital status	Home physic	cal add	ress (street, city,	state, ZIP code)	Do	you				
Unmarried Married					Own your home Rent					
If married, date of marriage (mm/dd/yyyy)						Other (sp	becify e.g., sł	nare rent, live with I	relative, etc.)	
If you were married and lived in AZ, 0	CA, ID, LA, NI	M, NV,	TX, WA or WI w	vithin the last ten ye	ears ch	eck here				
County of residence	Primary	phone		Home mailing	Home mailing address (if different from above or post office box number)					
	( )	)	-							
Secondary phone	FAX nun	nber								
( ) -	( )		-							
Provide information about your spous	e.									
Spouse's last name	Spouse's	s first n	ame	Date of birth (	/mm/dd/y	vyyy)		Social Security	Social Security Number	
					-			-	-	
Provide information for all other perso	ons in the ho	usehol	ld or claimed as	s a dependent.						
Name		Age	Rel	ationship	Claimed as a depender on your Form 1040				ent Contributes to household income	
					1	☐ Yes	No	Yes	No	
					]	Yes		Yes	No	
						Yes	No		No	
					[	Yes	No No	Yes	No	
Section 2 Employ	ment Infor	rmatio	on for Wage	Earners						
Complete this section if you or your spou you file a Schedule C, E, F, etc.) instead										
Your employer's name	Pay peri	od	Weekly	Bi-weekly	Emplo	oyer's ad	dress (stree	t, city, state, ZIP co	de)	
			Monthly	Other						
Do you have an ownership interest in this	s business									
Yes (also complete and submit Form 433	<u>-B</u> ) No									
Your occupation	How long	How long with this employer								
		(years) (r		(months)	nonths)					
Spouse's employer's name	Pay peri	Pay period Weekly		Bi-weekly	Emplo	oyer's ad	dress (stree	t, city, state, ZIP co	de)	
			Monthly	Other						
Does your spouse have an ownership int	erest in this b	ousines	S							
Yes (also complete and submit Form 433	<u>-B</u> ) No									
Spouse's occupation	How long	g with t	his employer							
		(yea	ars)	(months)						

# Personal Asset Information (Domestic and Foreign)

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Use the most current statement for each type of account, such as checking, savings, money market and online accounts, stored value cards (such as a payroll card from an employer), investment, retirement accounts (IRAs, Keogh, 401(k) plans, stocks, bonds, mutual funds, certificates of deposit) and digital assets, or financial interests in digital assets, such as non-fungible tokens (NFTs) and virtual currencies, such as cryptocurrencies and stablecoins, life insurance policies that have a cash value, or may be sold on a secondary market, a life settlement, and safe deposit boxes including those located in foreign countries or jurisdictions. Asset value is subject to adjustment by IRS based on individual circumstances. Enter the total amount available for each of the following (if additional space is needed include attachments). Ensure you also include assets located in foreign countries or jurisdictions and add attachment(s) if additional space is needed to respond.

### Round to the nearest dollar. Do not enter a negative number. If any line item is a negative number, enter "0".

#### Cash and Investments (domestic and foreign)

Cash Checking	Savings	Money Mar	ket Acco	ount/CD Online Accoun	t 🗌 Stor	ed Value Card
Bank name and country location			Accoun	t number	·	
						(1a) \$
Checking Savings	Money Market	Account/C	D 🗌	Online Account Stored	Value Card	
Bank name and country location			Accoun	t number		
						(1b) \$
				Total of bank accounts from a	attachment	(1c) \$
		Ac	ld lines	s (1a) through (1c) minus (	\$1,000) =	(1) \$
Investment account Stock	ks 🗌 Bonds 🛛	Other				
Name of Financial Institution and	country location		Accoun	t number		
Current market value				Minus loan balance		
\$	X .8 = \$			\$	=	(2a) \$
Investment account Stock	ks 🗌 Bonds	Other				
Name of Financial Institution and	country location		Accoun	t number		
Current market value				Minus loan balance		
\$	X .8 = \$			- \$	=	(2b) \$
Digital asset Nun	mber of units			Location of digital asset (exch	ange	Account number for assets held by
Description of digital asset				account, self-hosted wallet)		a custodian or broker
Digital asset address for self-host	ted digital assets	US dollar	equivale	nt of the digital asset as of toda	ıy	
		¢				
<b>_</b>		\$			=	(2c) \$
l otal inve	estment accounts fr	om attachn	nent. [cu	rrent market value minus loan l		(2d) \$
	<u> </u>	0.1		Add lines (2a) throu	gh (2d) =	(2) \$
Retirement account 401K		Other				
Name of Financial Institution and	country location		Accoun	it number		
				•		
Current market value				Minus loan balance		
	X .8 = \$				=	(3a) \$
Total of retireme	ent accounts from a	ttachment.	[current	market value X .8 minus loan l		(3b) \$
				Add lines (3a) throu	• • •	(3) \$
Note: Your reduction from cur		e may be	greater	than 20% due to potential t	ax conseq	uences/withdrawal penalties.
Cash value of Life Insurance Polic	icies		<b>D I</b>			
Name of Insurance Company			Policy r	humber		
Current cash value				an balance		
\$			\$		=	(4a) \$
Total cash value of life insurance	policies from attac	hment	Minus lo	an balance(s)		
<u>\$</u>			_ \$		=	(4b) \$
		_		Add lines (4a) throu	gh (4b) =	(4) \$

# Section 3 (Continued) Personal Asset Information (Domestic and Foreign)

Real property (enter information about any house, condo, co-op, time share, etc. that you own or are buying including any assets owned by
your spouse if you live in a community property state)

Is your real pi	operty currently for sale of	or do you anticipate	selling your real	prope	rty to func	I the offer amount	
Yes (	listing price)	No No					
Property desc	cription (indicate if personal	residence, rental prop	erty, vacant, etc.)	Purc	hase date	e (mm/dd/yyyy)	
Amount of mo	ortgage payment						
Location (stree	et, city, state, ZIP code, coun	ty, and country)	Lender/Contrac	L ct holc	ler name,	address (street, city,	
·			state, ZIP code) a	and pł	none		
Current mark	et value	Minu	s loan balance (n	nortgag	es, etc.)		
\$	X .8 = \$	- \$	·		-	value of real estate) =	(5a) \$
Property desc	cription (indicate if personal	residence, rental prop	erty, vacant, etc.)	Purc	hase date	e (mm/dd/yyyy)	
Amount of mo	ortgage payment	Date of final paym	ent	How	title is he	ld (joint tenancy, etc.)	
Location (stree	et, city, state, ZIP code, coun	ty, and country)			-	address (street, city,	
			state, ZIP code) a	anu pr	lone		
Current mark	et value	Minu	s loan balance (m	nortgag	jes, etc.)		
\$	X .8 = \$				(total	value of real estate) =	(5b) \$
	Total value of property	(s) from attachment	t [current market	value	X .8 minu	is any loan balance(s)]	(5c) \$
				Ad	ld lines (	(5a) through (5c) =	(5) \$
	er information about any c						
	located in foreign countri	-					
Vehicle make	& model	Year D	ate purchased	Milea	age	License/Tag number	
Lease	Name of creditor	D	ate of final payme	ent	Monthly	lease/loan amount	
 Own					\$		
Current mark	et value	Minus	loan balance				
¢	Y O F	¢				of vehicle (if the vehicle	
\$X.8 = \$							(6a) \$
		(If	line (6a) minus \$	3,450	is a nega	ct \$3,450 from line (6a) tive number, enter "0")	(6b) \$
Vehicle make	& model	Year D	ate purchased	Milea	age	License/Tag number	
Lease	Name of creditor	D	ate of final payme	ent	Monthly	lease/loan amount	
Own	] Own \$						
Current market value Minus Ioan balance							
X.8 = \$\$   Total value of vehicle (if the vehicle     is leased, enter 0 as the total value) =						(6c) \$	
If you are filing a joint offer, subtract \$3,450 from line (6c)							
(If line (6c) minus \$3,450 is a negative number, enter "0") If you are not filing a joint offer, enter the amount from line (6c)							(6d) \$
	Total value of vehicles lis	ted from attachmer	t [current market	value	X .8 minu	is any loan balance(s)]	(6e) \$
				Total	lines (6	b), (6d), and (6e) =	(6) \$

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Section 3 (Continued)	Personal As	set Information (D	omestic and I	Foreign)				
Other valuable items (artwor	k, collections, jewelry,	items of value in safe depo	sit boxes, interest in a	a company or bus	iness that i	is not publicly trade	əd, etc.)	
Description of asset(s)								
Current market value	X o f		Minus loan bala	nce		(7-) (*		
\$	X .8 = \$	1. (	\$		=	(7a) \$		
Value of remaining furniture Description of asset	and personal effec	ts (not listed above)						
Description of asset								
Current market value			Minus loan bala	nce				
\$	X .8 = \$		- \$		=	(7b) \$		
Total value of valuabl	le items listed from	attachment [current mar	ket value X .8 min	ius any loan ba	lance(s)]	(7c) \$		
	Add lir	nes (7a) through (7c)	minus IRS ded	uction of \$11	,390 =	(7) \$		
Do not includo or	mount on the lines	with a latter baside the p	umbor Bound to t		la dallar	Box A		
Do not include ar		with a letter beside the n egative number. If any lir				-	ividual Equity in Assets	
		ld lines (1) through (	-			\$		
NOTE: If you or your spou	ise are self-emplo	yed, Sections 4, 5, and	6 must be compl	eted before co	ontinuing	with Sections	7 and 8.	
Section 4	Self-Employ	ed Information						
If you or your spouse are se	elf-employed (e.g., f	iles Schedule(s) C, E, F	, etc.), complete th	is section.				
Is your business a sole prop	prietorship		Address of b	usiness (if other	than perso	onal residence)		
Yes No								
Name of business								
Business telephone number	r Emp	loyer Identification Numb	per Business wel	bsite address			Trade name or DBA	
( ) -								
Description of business	Total	number of employees	Frequency of	tax deposits	Average	gross monthly		
Do you or your spouse have	any other busines	s interests? Include any	Business add	dress (street, city				
interest in an LLC, LLP, corp			Dusiness au		, siale, <b>z</b> n	COUC		
Yes (percentage of own	nership: ) Title	9						
No								
Business name			Business tele	Business telephone number			Employer Identification Number	
			( )	-				
Type of business (select one)								
Partnership					- 1*			
Section 5		sset Information (f						
List business assets includir property that is owned/lease								
		arest whole dollar. Do						
Cash Checking	Savings	Money Market Acc	ount/CD 🗌 O	nline Account	Stor	ed Value Card		
Bank name and country loca	ation		Account num	ber				
						(8a) \$		
	Savings	Money Market Acc		nline Account	Stor	ed Value Card		
Bank name and country loca	ation		Account num	ber		(8b) \$		
Digital asset	Number of units		Location of digita	l asset (exchar	ae		er for assets held by	
Description of digital asset			account, self-hos	•	.90	a custodian or		
Digital asset address for sel	I f-hosted digital ass	ets US dollar equivale	nt of the digital as	set as of todav				
J			<u>3</u> 20	<b>,</b>				
		\$			=	(8c) \$		
			Total bank ac	counts from att	achment	(8d) \$		
			Add lines	(8a) through	(8d) =	(8) \$		

# Section 5 (Continued) Business Asset Information (for Self-Employed) (Domestic and Foreign)

Description of asset

Current market value	Minus loan balance	Total value (if leased or used in the production of income,			
\$X.8 = \$		enter 0 as the total value) =	(9a) \$		
Description of asset:					
Current market value	Minus Loan Balance	Total value (if leased or used in the production of income,			
\$X.8 = \$		enter 0 as the total value) =	(9b) \$		
Total value of assets listed from atta	•	lue X .8 minus any loan balance(s)]	(9c) \$		
		Add lines (9a) through (9c) =	(9) \$		
IRS allowed deduction for professiona			(10) \$		
Enter the value of li	ne (9) minus line (10). I	f less than zero enter zero. =	(11) \$		
Notes Receivable	_				
Do you have notes receivable Yes	No				
If yes, attach current listing that includes name(s) and	d amount of note(s) receiva	ble			
Accounts Receivable					
Do you have accounts receivable, including e-payme companies, and any bartering or online auction acco		No No			
If yes, provide a list of your current accounts receival	ble (include the age and am	nount)			
		side the number [for example: (9c)]. Round to the nearest whole dollar.	Box B Available Business Equity in Assets		
		is a negative, enter "0" on that line. I enter the amount in Box B =	\$		
Section 6 Business Incom	e and Expense Inforr	mation (for Self-Employed)			
If you provide a current profit and loss (P&L) stateme expenses on line 29 below. Do not complete lines (1) recent Schedule C; however, if the amount has chan	2) - (16) and (18) - (28). You	u may use the amounts claimed for i	ncome and expenses on your most		
Period provided beginning	through				
Round to the nearest	whole dollar. Do not enter	r a negative number. If any line ite	m is a negative number, enter "0".		
Business income (you may average 6-12 months inco	ome/receipts to determine you	ur gross monthly income/receipts)			
Gross receipts			(12) \$		
Gross rental income			(13) \$		
Interest income			(14) \$		
Dividends			(15) \$		
Other income			(16) \$		
		Add lines (12) through (16) =	(17) \$		
Business expenses (you may average 6-12 months e	xpenses to determine your av	/erage expenses)			
Materials purchased (e.g., items directly related to the pro	oduction of a product or service	)	(18) \$		
Inventory purchased (e.g., goods bought for resale)			(19) \$		
Gross wages and salaries			(20) \$		
Rent			(21) \$		
Supplies (items used to conduct business and used up with	hin one year, e.g., books, office	supplies, professional equipment, etc.)	(22) \$		
Utilities/telephones			(23) \$		
Vehicle costs (gas, oil, repairs, maintenance)			(24) \$		
Business insurance			(25) \$		
Current business taxes (e.g., real estate, excise, franchis employment taxes)	se, occupational, personal prope	erty, sales and employer's portion of	(26) \$		
Secured debts (not credit cards)			(27) \$		
Other business expenses (include a list)			(28) \$		
		Add lines (18) through (28) =	(29) \$		
Do not enter a negat	ive number. If any line item	Round to the nearest whole dollar. is a negative, enter "0" on that line.	Box C Net Business Income		

Subtract line (29) from line (17) and enter the amount in Box C = \$

## Monthly Household Income and Expense Information

Enter your household's average gross monthly income. Gross monthly income includes wages, social security, pension, unemployment, and other income. Examples of other income include but are not limited to: agricultural subsidies, gambling income, oil credits, rent subsidies, sharing economy income from providing on-demand work, services or goods (e.g., Uber, Lyft, DoorDash, AirBnB, VRBO), 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. Include the below information for yourself, your spouse, and anyone else who contributes to your household's income. This is necessary for the IRS to accurately evaluate your offer.

### Monthly Household Income

Note: Entire household income should also include income that is considered not taxable and may not be included on your tax return.

							•	Round to the nearest whole dollar.
Primary taxpaye	ər							
Gross wages		Social Security		Pension(s)		Other income (e.	g. unemployment)	
\$	+	\$	_ +	\$	+	\$	Total primary taxpayer income =	(30) \$
Spouse								
Gross wages		Social Security		Pension(s)		Other Income (e.	g. unemployment)	
\$	+	\$	+	\$	+	\$	Total spouse	(31) \$
Additional source	es of inc	come used to suppo	ort the	e household, e.g.	, non-lia	ble spouse, or any	one else who may	
contribute to the	househ	old income, etc. Lis	st sou	rce(s)				(32) \$
Interest, dividends, and royalties						(33) \$		
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) \$		
Child support received						(37) \$		
Alimony received						(38) \$		
Round to the nearest whole dollar. Do not enter a negative number. If any line item is a negative, enter "0" on that line.						Box D Total Household Income		
							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 allowable standard even if the actual amount you pay is less. For the other boxes input your actual expenses. You may find the allowable standards at IRS.gov/Businesses/Small-Businesses-&-Self-Employed/Collection-Financial-Standards.

	Round to the nearest whole dollar.
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	(39) \$
Housing and utilities (e.g., rent or mortgage payment and average monthly cost of property taxes, home insurance, maintenance, dues, fees and utilities including electricity, gas, other fuels, trash collection, water, cable television and internet, telephone, and cell phone) monthly rent payment	(40) \$
Vehicle loan and/or lease payment(s)	(41) \$
Vehicle operating costs (e.g., average monthly cost of maintenance, repairs, insurance, fuel, registrations, licenses, inspections, parking, tolls, etc.). A reasonable estimate of these expenses may be used	(42) \$
Public transportation costs (e.g., average monthly cost of fares for mass transit such as bus, train, ferry, etc.). A reasonable estimate of these expenses may be used	(43) \$
Health insurance premiums	(44) \$
Out-of-pocket health care costs (e.g. average monthly cost of prescription drugs, medical services, and medical supplies like eyeglasses, hearing aids, etc.)	(45) \$
Court-ordered payments (e.g., monthly cost of any alimony, child support, etc.)	(46) \$
Child/dependent care payments (e.g., daycare, etc.)	(47) \$
Life insurance premiums Life insurance policy amount	(48) \$
Current monthly taxes (e.g., monthly cost of federal, state, and local tax, personal property tax, etc.)	(49) \$
Secured debts/Other (e.g., any loan where you pledged an asset as collateral not previously listed, government guaranteed student loan, employer required retirement or dues) List debt(s)/expense(s)	(50) \$
Enter the amount of your monthly delinquent state and/or local tax payment(s). Total tax owed	(51) \$
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 (39) through (51) and enter the amount in Box E =	Box E Total Household Expenses \$
Round to the nearest whole dollar. Do not enter a negative number. If any line item is a negative, enter "0" on that line. Subtract Box E from Box D and enter the amount in Box F =	Box F Remaining Monthly Income \$

# Calculate Your Minimum Offer Amount

The next steps calculate your minimum offer amount. The amount of time you take to pay your offer in full will affect your minimum offer amount. Paying over a shorter period of time will result in a smaller minimum offer amount.

# Note: The multipliers below (12 and 24) and the calculated offer amount (which included the amount(s) allowed for vehicles and bank accounts) do not apply if the IRS determines you have the ability to pay your tax debt in full within the legal period to collect.

#### Round to the nearest whole dollar.

If you will pay your offer in 5 or fewer payments within 5 months or less, multiply "Remaining Monthly Income" (Box F) by 12 to get "Future Remaining Income" (Box G). Do not enter a number less than \$0.

Enter the total from Box F		Box G Future Remaining Income
\$	X 12 =	\$

If you will pay your offer in 6 to 24 months, multiply "Remaining Monthly Income" (Box F) by 24 to get "Future Remaining Income" (Box H). Do not enter a number less than \$0.

Enter the total from Box F		Box H Future Remaining Income
\$	X 24 =	\$

Determine your minimum offer amount by adding the total available assets from Box A and Box B (if applicable) to the amount in either Box G or Box H.

Enter the amount from Box A plus Box B <i>(if applicable)</i>		Enter the amount from either Box G or Box H		Offer Amount Your offer must be more than zero (\$0). Do not leave blank. Use whole dollars only.
\$	+	\$	=	\$

Place the offer amount shown above on the Form 656, Section 4, Payment Terms, unless you cannot pay that amount due to special circumstances. If you cannot pay that amount due to special circumstances, place the amount you can pay on the Form 656, Section 4, Payment Terms, and explain your special circumstances on the Form 656, Section 3, Reason for Offer.

### Section 9 Other Information

Section 8

Additional information IRS needs to consider settlement of your tax debt. If you or your business are currently in a bankruptcy proceeding, you are not eligible to apply for an offer.

Are you a party to or involved in litigation (if yes, answer the following)								Yes	No No	
Plaintiff	Location of filing	Represented	Represented by				Docket/Case number			
Defendant										
Amount of dispute	Possible completion date (mmddyyyy) Subject of litigation						•			
\$										
Have you filed bankruptc	y in the past 7 years (if yes, answe	r the follo	owing)					Yes	No No	
Date filed (mmddyyyy)	Date dismissed (mmddyyyy)	Date dismissed (mmddyyyy) Date discharge		harged (mmddyyyy) Petiti		ion no.	Location f	Location filed		
In the past 10 years, have you lived outside of the U.S. for 6 months or longer ( <i>if yes, answer the following</i> )										
Dates lived abroad: From (mmddyyyy) To (mmddyyyy)										
Are you or have you ever been party to any litigation involving the IRS/United States (including any tax litigation) Yes No							No No			
If yes and the litigation included tax debt, provide the types of tax and periods involved										
Are you the beneficiary of a trust, estate, or life insurance policy, including those located in foreign countries or jurisdictions Yes No ( <i>if yes, answer the following</i> )										
Place where recorded						EIN				
Name of the trust, estate, or policy				Anticipated amount to be received			When will the amount be received			
				\$						
Are you a trustee, fiduciary, or contributor of a trust							Yes	No No		
Name of the trust EIN					EIN					
Do you have a safe deposit box (business or personal) including those located in foreign countries or jurisdictions (if yes, answer Yes No the following)								No No		
Location (name, address and box number(s))				Contents			Value			
								\$		

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Section	9 (Continued) Other Informa	tion					
	10 years, have you transferred any as heir full value <i>(if yes, answer the follow</i>		more than \$10,000 inc	cluding real pr	operty, for	Yes [	No
List asset(s	3)	Value at time of transfer \$	Date transferred (mmdo	<i>dyyyy)</i> To v	To whom or where was it transferred		
Do vou hav	e any assets or own any real property				Yes	No	
	ide description, location, and value					L	
	• • •						
Do you hav	ve any funds being held in trust by a th	ird party				Yes	No
If yes, how	much \$ Where						
Section	10 Signatures						
	alties of perjury, I declare that I hav rrect, and complete.	e examined this offer, inclu	ding accompanying d	locuments, a	nd to the best of	my kno	wledge it
Signature	e of Taxpayer		Date	e ( <i>mm/dd/yyy</i>	y)		
Signature	e of Spouse		Date	e ( <i>mm/dd/yyy</i>	v)		
-				( )))	,		
Remembe	er to include all applicable attac	hments listed below.					
Cop	pies of the most recent pay stub, e	arnings statement, etc., fro	om each employer.				
Cop	pies of the most recent statement f	or each investment and re	tirement account.				
inte sup pro	bies of the most recent statement, rest and dividends (including any port, alimony, royalties, agricultura viding on-demand work, services o bsite, etc., and recurring capital ga	received from a related pa al subsidies, gambling inco or goods (e.g., Uber, Lyft, <i>i</i>	rtnership, corporation ome, oil credits, rent s AirBnB, VRBO), inco	n, LLC, LLP subsidies, sl ome through	, etc.), court ord naring economy digital platforms	er for ch income	nild e from
	bies of individual complete bank st st recent complete statements for		-	ou operate	a business, cop	ies of th	ie six
	npleted Form 433-B (Collection In ty other than a sole-proprietorship		usinesses) if you or y	your spouse	have an interes	st in a bu	usiness
	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	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, if applicable.						
Cop	Copies of court orders for child support/alimony payments claimed in monthly expense section.						
Cop	pies of Trust documents if applicat	le per Section 9.					
	cumentation to support any specia	l circumstances described	in the "Explanation of	of Circumsta	nces" on Form	656, if a	pplicable.
to reliste	Attach a Form 2848, <i>Power of Attorney and Declaration of Representative</i> , if you would like your attorney, CPA, or enrolled agent to represent you and you do not have a current form on file with the IRS. Ensure all years and forms involved in your offer are listed on Form 2848 and include the current tax year. Check the appropriate box to ensure copies of communications are sent to your representative.						
Cor	npleted and signed current Form 6	656.					