(December 2022)

Department of the Treasury Internal Revenue Service

Consent To Extend the Time To Assess Tax Related to Contested Foreign Income Taxes— **Provisional Foreign Tax Credit Agreement**

OMB No. 1545-2296

Attachment Sequence No. **XX**

Internal Revenue Service		Attach to your income tax return.		Sequence No. 🗚
Name(s	s) of consenting taxp	payer(s)	Identifying number (see instru	ctions)
			Social security number of spoutax return was filed)	se (only if a joint income
Numbe	r, street, and room	or suite no. (If a P.O. box, see instructions.)	City or town, state, and ZIP cod	de
Impor	tant. If you have	more than one contest with respect to the tax year described in item 1, com	plete a separate Form 7204	for each contest.
Check	the box below to	indicate the reason for filing Form 7204:		
	For the tax year described in item 1, below, taxpayer claimed foreign tax credit on the accrual basis. Taxpayer is filing Form 7204 to make the election in Regulations section 1.905-1(d)(4) to claim a provisional foreign tax credit for the contested foreign income taxes described in item 6			
		described in item 1, below, taxpayer claims foreign tax credit on the cash lations section 1.905-1(c)(3) to claim a provisional foreign tax credit for the		
The ta	xpayer(s) listed at	pove and the Commissioner of Internal Revenue, pursuant to Regulations sec	ctions 1.905-1(c)(3) and (d)(4)	, agree to the following:
1	The amount of any federal income tax due relating to the disallowance of a foreign tax credit claimed under section 901 or section 960 for the contested foreign income tax liability described in item 6, below, on any income tax return made by or for the above taxpayer(s) for the tax year ended			
2	The taxpayer agrees to comply with the annual notice requirement described in Regulations section 1.905-1(d)(4)(iv).			
3	This consent establishes an extended period for assessing tax. The expiration of the extended period may be suspended or otherwise affecte by the operation of law in the same manner as the original period. For example, if a notice of deficiency in tax covered by this consent issued, the period for assessing tax will not end prior to the end of the suspension period provided for by section 6503(a), plus any time that remains in the assessment period, as extended, at the time the suspension takes effect. Under no circumstances will this consent reduce the period of time otherwise provided by law for making an assessment.			
4	The consenting taxpayer(s) may file a claim for credit or refund for the tax assessed by reason of this consent within the later of six mon after the period ends for assessing tax established by this consent or the period prescribed by section 6511(d)(3)(A).			
5	The amount of any deficiency assessment covered by this consent will be limited to the amount of any federal income tax due relating to the determination by the Commissioner of Internal Revenue that the contested foreign income tax liability described in item 6, below, was not compulsory payment and is not considered paid within the meaning of Regulations section 1.901-2(e)(5), including any penalties, additions tax, and interest attributable thereto and consequential changes to other items based on that adjustment.			
6	Complete the fo	ollowing information (see instructions):		
а	Description of the contest, the contested foreign income tax liability, and the income to which the contested foreign income tax liability relates			
b		and payor's EIN or reference ID number:		
С		umber for the contested foreign income tax:		
d		Country or U.S. territory to which tax was paid (enter code — see instructions):		
е	Amount of cont	ested income tax liability remitted, in local currency, and date(s) of remittan	ce(s) (mm/dd/yyyy):	
true, co		I declare that I have examined this consent, including accompanying statements and a signed consent, properly completed in accordance with this form and its instruction	-	
Siç	gnature of consentin	g taxpayer (see instructions)	Date	
Siç	gnature of spouse (c	complete only if a joint return is filed)	Date	
 Ta	xpayer's representa	tive sign here	Date	
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Cc	rnorate officer(s) sic	in nere	Date	