## Schedule of Controlled Foreign Corporation (CFC) Information To Compute Global Intangible Low-Taxed Income (GILTI)

OMB No. 1545-0123

Attachment Sequence No. **992A** 

Internal Revenue Service

Department of the Treasury

Name of U.S. shareholder

SCHEDULE A

(Rev. December 2022)

(Form 8992)

Go to www.irs.gov/Form 8992 for instructions and the latest information.

Name of person filing this schedule

B Identifying number

A Identifying number

	<b>(b)</b> EIN or Reference ID	Calculations for Net Tested Income (see instructions)									GILTI Allocated to Tested Income CFCs (see instructions)		
<b>(a)</b> Name of CFC		<b>(c)</b> Tested Income	<b>(d)</b> Tested Loss	<b>(e)</b> Pro Rata Share of Tested Income	<b>(f)</b> Pro Rata Share of Tested Loss	(g) Pro Rata Share of Qualified Business Asset Investment (QBAI)	<b>(h)</b> Pro Rata Share of Tested Loss QBAI Amount	(i) Pro Rata Share of Tested Interest Income	(j) Pro Rata Share of Tested Interest Expense	(k) GILTI Allocation Ratio (Divide Col. (e) by Col. (e), Line 1 Total)	(I) GILTI Allocated to Tested Income CFCs (Multiply Form 8992, Part II, Line 5, by Col. (k))		
			( )		( )		( )						
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			( )		( )		( )						
<b>1.</b> Totals (see instructions)			( )		( )		( )						

Totals on line 1 should include the totals from any continuation sheets.

For Paperwork Reduction Act Notice, see Instructions for Form 8992.

## Schedule A–Continuation Sheet. Use only if you need additional space.

Name of person filing this form

Name of U.S. shareholder

<b>(a)</b> Name of CFC	<b>(b)</b> EIN or Reference ID	Calculations for Net Tested Income (see instructions)									GILTI Allocated to Tested Income CFCs (see instructions)	
		(c) Tested Income	(d) Tested Loss	<b>(e)</b> Pro Rata Share of Tested Income	<b>(f)</b> Pro Rata Share of Tested Loss	(g) Pro Rata Share of Qualified Business Asset Investment (QBAI)	<b>(h)</b> Pro Rata Share of Tested Loss QBAI Amount	(i) Pro Rata Share of Tested Interest Income	(j) Pro Rata Share of Tested Interest Expense	Allocation	(I) GILTI Allocated to Tested Income CFCs (Multiply Form 8992, Part II, Line 5, by Col. (k))	
			(	)	(		(					
					(		(					
			(			/						
			(	)	(	)	()					
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			(	)	(	)	(					
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			(	)	(	)	( )	)				
			()	)	(	)	(					
Totals (see instru	uctions)		(		(		(					

A Identifying number

B Identifying number

Totals of columns (c) through (I) should be included on line 1 Totals on page 1.

Schedule A (Form 8992) (Rev. 12-2022)