**APMA**

PREFILE CONFERENCE REQUEST

To request a prefile conference (PFC) with the APMA office, please complete the following form and email it to Heather Snodgrass ([Heather.L.Snodgrass@irs.gov](mailto:Heather.L.Snodgrass@irs.gov)).

Once the form has been reviewed for completeness, it will be added to the next scheduled intake meeting where it will be assigned to an APMA Group and then to an APMA Team Leader. You will be contacted by the assigned Team Leader to discuss scheduling the conference.

Prefiling submissions are due to the assigned Team Leader at least one week in advance of the meeting or the meeting may be rescheduled. For more information on prefiling submissions please see Rev. Proc. 2006-9 Section 3: Prefiling Conferences.

If you have any questions prior to a Team Leader being assigned, please contact Heather Snodgrass.

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**Today’s Date:**

**U.S. Taxpayer’s Name or Anonymous:**

**EIN:**

**U.S. Taxpayer’s Representative’s Name and Contact Information:**

**Case Type:**

(Is this a bilateral/unilateral APA or a U.S./foreign Initiated MAP? For APAs, please note if this is a renewal or an amendment. If unilateral APA, provide a brief statement of why a unilateral APA is justifiable under the circumstances.)

**Foreign Country/Countries Involved:**

**Years Involved:**

(Please use specific years and include rollback or ACAP, if applicable.)

**Total Transaction Size/Adjustment Amount (in USD):**

**U.S. Party’s City and State:**

(If the location has changed recently or is expected to change, please give both locations, and the past or anticipated change date.)

**Foreign Party’s City:**

(If the location has changed recently or is expected to change, please give both locations, and the past or anticipated change date.)

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**CURRENT REQUEST**

**Transaction(s):**

**Transaction Size/Adjustment Amount (in USD):**

(For APAs please list amount in most year, for MAP please breakdown total adjustment by year.)

**Brief Industry/Business Description:**

**TPM(s):**

**PLI(s) and Range(s) or Point(s):**

**Tested Party:**

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**PRIOR APA**

*(For APA renewals please complete the following section regarding the prior APA.)*

**Executed Date:**

**Team:**

**Team Leader:**

**Economist:**

**Manager:**

**Term:**

(Note rollback, if applicable.)

**Covered Transactions:**

**TPM(s):**

**Tested Party:**

**PLI(s) and Range(s) or Point(s):**

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**PREFILE MEETING**

**Proposed Dates/Times for PFC:**

(Please include several dates/times at least 3-4 weeks from time of submitting this form.)

**Meeting Length Requested:**

**Proposed Location:**

(DC, San Francisco or Laguna Niguel include whether you would like the meeting to take place at the APMA office, Taxpayer office or Representative office.)

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**ADDITIONAL INFORMATION**

**Has the U.S. Taxpayer been under Examination?**

(If so, please list one or more Exam Team Contacts.)

**Has the subject matter of the contemplated APA has been the subject of Appeals, Competent Authority, or litigation activity (including in prior years)?**

(If so, please include the details and contacts for Appeals, Competent Authority, and/or Division Counsel.)