



Central/South Central Joint Education Committee
Monday, December 12th and Tuesday, December 13th, 2016

Camp Hill, Radisson Hotel
1150 Camp Hill Bypass
Camp Hill, PA 17011
Hotel Phone: 1-800-589-9514

Registration: 7:30 am
Start/End Time: 8:00 am–4:30 pm
Course Level: Basic
CPE: 16 Credits Federal Tax
**Also qualifies for 14 Hours CLE credits for Attorneys*

PSTAP is an approved continuing professional education sponsor.
 PA #PX-000501L, NJ #20CE0015920, NY #002280, IRS CE #E3S5R

Speakers: Richard Parchman, CPA and Abe Carnow, CPA

1040 Tax Seminar Course Description:

This comprehensive course covers key tax issues for completing complicated individual returns. All topics include coverage of new legislation, revenue rulings and procedures, as well as case law to help the busy practitioner keep current. Speakers are all practicing preparers who share practical tips and insights to help you get ready for this tax season. Some of the specific topics for the 1040 seminar include:

- Health care coverage and additional guidance expected in 2016
- Coverage of the Mortgage Relief Act of 2015
- Full coverage of the many extenders and permanent features in the PATH Act
- Continued coverage of the changes in elections and safe harbors in the capitalization regulations
- Updates and case law from late 2015 through 2016

PSTAP Members: \$310

Non Members: \$385

- Registration fee includes seminar workbook, continental breakfast, lunch & refreshment breaks
- **REGISTER Online: www.pstapcpe.com** Mail: PSTAP, Attn: Seminar Registrations, 20 Erford Road, Suite 200A, Lemoyne, PA 17043
- Seminar Confirmations—Sent upon registration, via email only—please provide your email address below
- Questions??? Contact PSTAP Executive Office at 1-800-270-3352 or by email at info@pstap.org
- Refund Policy: Cancellations received by **December 5, 2016** will be refunded less a \$35 service fee, 50% refunded thereafter.
- No Show—No Refund—No Exceptions. Overnight Accommodations: Call the Camp Hill Radisson Hotel at 1-800-589-9514

Registration Form: (one form per registration—photocopy for additional registrants)

REGISTRATION DEADLINE: 12/5/2016

First Name _____ MI _____ Last _____ PSTAP ID #: _____

Firm: _____ Phone: () _____

Street Address _____ City _____ State _____ Zip _____

Email Address _____ License Number—CPA/PA—Required _____

Please Circle Rate

Check Enclosed—Payable to Joint Education Committee—Mailed to the above address **

PSTAP Member \$310 VISA Acct # _____ Exp: _____ CVV: _____
 Non Member \$385 MASTERCARD Acct # _____ Exp: _____ CVV: _____

*Please include additional \$21 for CLE credits Signature: _____

** Please do not combine meeting & seminar fees on same check.