

## Gear Up

# 1040 Tax Seminar

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

### Central/South Central Joint Education Committee Thursday & Friday, December 7 & 8, 2023

#### Gettysburg Wyndham Hotel 95 Presidential Circle Gettysburg, PA 17325 Hotel Phone: 717-339-0020

For discounted overnight hotel accommodations at a rate of \$102 (taxes, etc. not included), make your reservation by 11/13/23—Call 717-339-0020, room block "Central/South Central Joint Education Comm."

Registration: 7:30 am

Start/End Time: 8:00 am-4:00 pm

Course Level: Basic

**CPE: 16 Credits Federal Tax** 

\*Also qualifies for 14 Hours CLE credits for Attorneys

#### **Speakers: Rick Oelerich & Timothy Sundstrom, CPA**

1040 Tax Seminar Course Description: This comprehensive course covers key tax issues for completing complicated individual returns, including in-depth coverage of recent legislation, case law developments, and relevant notices, announcements, revenue rulings and procedures to help the busy practitioner stay current. Speakers are all practicing preparers who share practical tips to help you get ready for this tax season.

PSTAP Members: \$435 Non Members: \$515

- Registration fee includes seminar workbook, continental breakfast, lunch & refreshment breaks
- Registration Options: Online: www.pstapcpe.com Mail: PSTAP, 150 Corporate Center Dr., Ste. 205, Camp Hill, PA 17011, or by FAX: 717-614-8663
- 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 **November 30**, **2023** will be refunded less a \$35 service fee, 50% refunded thereafter.
- No Show—No Refund—No Exceptions. Overnight Accommodations: Call the Gettysburg Wyndham Hotel: 717-339-0020.

Registration Form: (one form per	registration—photocopy for additional registrants)	REGISTRATION DEADLINE: 11/30/202. PSTAP ID #:
First Name MI	Last	
Firm:	Phone: (	)
Street Address	City	State Zip
Email Address	License Numb	er—CPA/PA—Required
Please Circle Rate	☐ Check Enclosed—Payable to Joint Education Committee—Mailed to the above address	
□ PSTAP Member \$435	□ VISA/Amex Acct #	Exp:CVV:
□ Non Member \$515	□ MASTERCARD Acct #	Exp:CVV:
*Please include additional \$21 for C	LE credits Signature:	