IPD INSTITUTE FOR PROFESSIONAL DEVELOPMENT

UNDERSTANDING IRS PAYROLL REGULATIONS FOR SCHOOL DISTRICTS AND MUNICIPALITIES

Approved by DCA - CMFO, CCFO - 4 CEU'S - 4 Accounting Approved for CPEs RMA, CPA, PA - 4 CPE's - Accounting & Auditing

MARCH 16, 2018 - NJ LAW CENTER, NEW BRUNSWICK, NJ

Registration & Breakfast Buffet 9am to 9:30am - Seminar Timetable 9:30 am - 12:50 pm

Worker Classification: Employee or Independent Contractor?

Workers may be: Independent Contractors-Employees - How do you know?

FIRE System: Filing Information Returns Electronically

Review of Form 941, Employer's Quarterly Federal Tax Return Review of Form 944, Employer's Annual Federal Tax Return Public Officials Earning-How should their earning be reported? 403(b) and 457(b) Plans of Government Entities-

a. Deferrals, Distributions, Sick & Vacation Pay

Understanding the Specific Requirements under Section 403(b) & 457(b) for

a. Deferrals & Distributions-Understand How to Defer Accumulated Sick and Vacation Leave

Section 403(b) Plans Overview Contributions Limits-Catch-up Contributions-Taxation Exempt from requirements of Section 457-Bona fide sick, bona fide vacation, compensatory time, severance, disability & death benefit plans

Non-Accounting Allowances (Including paying volunteers): Examination Problems, Review of the Law, Applying the Law

SPEAKER: Vincent Urciuoli, IRS Agent, Federal/State/Local Government Specialist Always check our web site the day before the Seminar to make sure Seminar is Scheduled!

Directions or	ı our web site – ''	'http://ipd2.com''
TO ASSURE PROPER POSTING, PLEASE ATTAC	H A COPY OF THIS A	PPLICATION WITH YOUR PAYMENT
Mail Checks to: Institute For Professional	Development, PO	Box 1468 Clifton, NJ 07015 (973)-777-4200
I wish to register for the March 16, 2013	8 IRS Payroll Regula	ations Seminar
		By Day of Seminar P.O. #
FAX YOUR REC	GISTRATION FOR	M TO (973)-777-0401
Cancellation Policy -48 Hrs in advance of ser	minar, in writing* D	uring inclement Weather ,Call day before
SEMINAR INCLUDES HOT BUFFET BREAKFAST	<u>Γ</u> \$ 99.00 per person	Registration At Door \$ 125.00
NAME		_TITLE
ADDRESS		
Organization or Government Unit	Telephone Numbe	er Fax Number

CLAIMANTS CERTIFICATION & DECLARATION I do solemnly declare and certify under the penalty of the law

That the within bill is correct in all particulars, the articles Have been furnished or services rendered as stated herein, that no bonus has been given or received by any person or persons within knowledge of this claimant in connection with the above Claim and that the amount charged is a reasonable one.

Michael F. Conti

Just mail your check with this application form you do not need to send your Voucher for a separate signature since the presigned certification on the left can be attached to your Voucher in lieu of sending it to us for a signature. This form has been determined by DLGS to meet the requirement of the statutes for this type of expenditure.

Michael F. Conti, Program Coordinator