

# PAYROLL WORKSHOP

## Preparing for the Year End and beginning for 2016

### For Municipalities and School Districts

DECEMBER 4, 2015 - JUMPING BROOK COUNTRY CLUB, NEPTUNE, NJ

Approved by DCA-CMFO, CCFO - 4 CEU'S- 2 Financial/Debt Mgt. & 2 Accounting

Approved CPA, RMA , PA - 4 CEU's - Finance

#### Registration and Breakfast Buffet 9am to 9:30am - Seminar 9:30am to 12:50pm

• **Year-End Preparation**

Tasks to be Done throughout the Year Tasks to be Done at Year-End

Tasks that must be done before processing first Payroll in 2016 Tasks to be done after Year-End Processing

• **Annual Changes to various rates**

Business mileage Medical Mileage Rate Charitable Mileage Rate

• **Transportation Fringe Rate FSA Limit HAS Limit**

• **Year-End Reporting and Taxation of Fringe Benefits**

Special Accounting Rules Group-term Life Dependent Life Insurance Personal Use of Company Vehicle

Year-end Reporting Issues

Health Care costs on W-2 Health Benefits for same sex Partners Third Party Sick Pay Election Workers

Mandatory Social Security and Medicare Coverage

Picking up Plans 401(a) 457(b) 403(b)

**Forms Review & Revisions Form 941 Form 941 Schedule B Form W-2 NJ W-3 Form 1099-MISC**

INSTRUCTOR: Michael Pappas, CPP

Directions on our web site - <http://ipd2.com>

TO ASSURE PROPER POSTING, PLEASE ATTACH A COPY OF THIS APPLICATION WITH YOUR PAYMENT

Mail Checks to: Institute For Professional Development

P.O. Box 1468, Clifton, New Jersey 07015-1468 Telephone (973)-777-4200

**PAYMENT OR PURCHASE ORDER DUE BY DAY OF SEMINAR**

P.O. # \_\_\_\_\_

\_\_\_\_\_ I wish to register for the December 4, 2015 Payroll Workshop

Cost \$ 99.00 Cost at Door \$ 125.00

FAX YOUR REGISTRATION FORM TO (973)-777-0401

Cancellation Policy - 48 Hours in advance of seminar, in writing

\*\* During inclement Weather, Call the Day Before the Seminar\*\*

SEMINAR INCLUDES HOT BREAKFAST BUFFET \$ 99.00 per person \$125 at door

NAME \_\_\_\_\_ TITLE \_\_\_\_\_

ADDRESS \_\_\_\_\_

Organization or Government Unit Telephone Number 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.

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

P.O. Box 1468, Clifton, NJ 07015-1468 (973)-777-4200 - FAX (973) 777-0401