## Registration Form 2024 IRS Nationwide Tax Forum

## Notes & Instructions:

- Please fax this form back to (202) 403-3871 or mail it back to IRS Nationwide Tax Forum, C/O Enterprise Services & Technologies, Inc., 912 Thayer Ave., Suite 202, Silver Spring, MD 20910.
- One attendee per form.
- Please refer to the website (<u>www.irstaxforum.com</u>) for important information, rules and regulations, including: pricing and deadlines, hotel information and the cancellation policy.
- We strongly encourage you to register online to ensure prompt processing. Registrations received by mail or by fax will be processed electronically including payments. Please print clearly to avoid mistakes.
- **Privacy Act notification:** We request your personal information during registration under the authority of 5 USC 301 and 26 USC 7801. We use this information to establish a record of participants in the Nationwide Tax Forum programs. We also use the information to contact you regarding other IRS initiatives, to provide information you may be interested in, and to ask questions that help us evaluate our programs. Providing this information is voluntary. By furnishing the requested information, you are deemed to have consented to use of your data. We will use the information you provide only for the reasons you provided it. This information may be disclosed to contractors to perform the contract; to the Department of Justice for use in civil or criminal litigation; to licensing organizations for use in administering their professional licensing and continuing education programs. Your information will not be sold or released to companies or individuals for the purpose of marketing or soliciting. However, when you allow a vendor to scan your badge you are giving them permission to collect your personal information and use it as they wish.
- By signing below, I also recognize that the contractor will not be allowed to re-disclose information you provide except when necessary to perform the contract for the IRS Nationwide Tax Forum.

Signature:				Date:						
STEP I: Select Your Forum(s) (please check all t			that apply)							
	City	Dates	Ear	ly Bird Registration dline (\$255/person)*	Standard Registration Deadline (\$309/person)*					
	Chicago, IL	July 9 <sup>th</sup> – 11 <sup>th</sup>	June	e 17 <sup>th</sup> (after 5pm EST)	June 25 <sup>th</sup>					
	Orlando, FL	July 30 <sup>th</sup> – August 1 <sup>st</sup>	June 17 <sup>th</sup> (after 5pm EST)		July 16 <sup>th</sup>					
	Baltimore, MD	August 13 <sup>th</sup> – 15 <sup>th</sup>	June 17 <sup>th</sup> (after 5pm EST)		July 30 <sup>th</sup>					
	Dallas, TX	August 20 <sup>th</sup> – 22 <sup>nd</sup>	June 17 <sup>th</sup> (after 5pm EST)		August 6 <sup>th</sup>					
	San Diego, CA	September 10 <sup>th</sup> – 12 <sup>th</sup>	June	e 17 <sup>th</sup> (after 5pm EST)	August 27 <sup>th</sup>					
*Registration and payment <b>must be completed before the early/standard registration date at 5:00 PM EST.</b> In order to receive the rates listed in the table above, mailed registrations <b>must be postmarked by</b> and faxed registrations must be <b>received by</b> 5:00 PM EST on the corresponding deadline. <b>Registrations received after the standard registration deadline are subject to the rate of \$390/person.</b> Email confirmation will be sent when your registration has been processed. Contact us if you do not receive a confirmation email within 10 days.										
		<b>nation</b> (please print or typ								
Prefix: First Name:				Last Name:						
Name as it should appear on badge:				Company/Organization & Title:						
Address:										
City:				State:	Zip Code:					
Telephone Number: Fax Number:				Email Address:						
Emergency Contact Name:				Emergency Contact Number:						
CTEC Number (optional):										
Do you have a PTIN? If so, please provide PTIN Number*:										
PTIN Last Name*:										
Important note about PTIN and PTIN Last Name: For CE credits to be reported to the PTIN office, PTIN Last Name field must match EXACTLY how your last name is written in your online PTIN account. Please do not include your first or middle name(s) in the PTIN Last Name field. Please log into your PTIN account to confirm how your name is listed on your PTIN account.										

STEP III: Workshop Information									
If you wish to participate in the two-hour workshop titled <i>Exempt Organizations Workshop: EO topics including Form 990</i> , please indicate below which day/time you wish to attend. Please realize that space is limited and will be assigned on a first-come, first-served basis. If we are able to accommodate your request, your Workshop will be reflected in your online registration account on www.irstaxforum.com (if you register early). Requesting a Workshop time slot on this form is NOT a guarantee.									
□ Tuesday, 2:45PM–4:40PM □ Wednesday, 9:05	5AM–11:00AM								
STEP IV: Professional Profile									
What is the primary reason(s) you attend the IRS Nationwide Tax Forum? (Check all that apply)	<ul> <li>( ) Earn CE Credits</li> <li>( ) Hear directly from the IRS</li> <li>( ) Quality of information</li> <li>( ) Network with fellow tax professionals</li> <li>( ) Visit exhibitors</li> <li>( ) Case Resolution Program</li> </ul>								
My principal credential or qualification is: (Check all that apply)	<ul> <li>( ) Attorney</li> <li>( ) Certified Public Accountant (CPA)</li> <li>( ) Enrolled Agent (EA)</li> <li>( ) Annual Filing Season Program Participant (AFSP)</li> <li>( ) Certifying Acceptance Agent (CAA)</li> <li>( ) Enrolled Actuary</li> <li>( ) Enrolled Retirement Plan Agent (ERPA)</li> <li>( ) None of the above</li> </ul>								
My clients are primarily:	<ul> <li>( ) Individuals filing Form 1040, usually no business component (Schedule C, E, or F)</li> <li>( ) Individuals filing Form 1040, with a business component (Schedule C, E, or F)</li> <li>( ) Small businesses (LLCs with more than one owner, corporations, partnerships)</li> <li>( ) Large businesses (gross receipts over \$1 million)</li> <li>( ) Exempt organizations</li> </ul>								
How many years have you worked in the tax professional industry?	( ) 1 - 5 ( ) 6 - 10 ( ) 11 - 20 ( ) 20+								
Do you plan to attend the Monday afternoon session on Practice Management? (This session does not qualify for CE credit.)	( ) Yes ( ) No								
Which social media sites do you use? (Check all that apply)	<ul> <li>( ) Facebook</li> <li>( ) X (formerly known as Twitter)</li> <li>( ) LinkedIn</li> <li>( ) Instagram</li> <li>( ) YouTube</li> <li>( ) None</li> </ul>								
Are you subject to the regulations covered in Treasury Circular 230 for attorneys, certified public accountants, enrolled agents, enrolled actuaries, Annual Filing Season Program and appraisers?	( ) Yes ( ) No								
How many hours of CPE do you earn each year?	<ul> <li>( ) 0-5</li> <li>( ) 6-10</li> <li>( ) 11-20</li> <li>( ) More than 20</li> </ul>								

What is your age?		<ul> <li>() 25 or younger</li> <li>() 26 - 35</li> <li>() 36 - 45</li> <li>() 46 - 55</li> <li>() 56 - 65</li> <li>() 65+</li> <li>() I do not wish t</li> </ul>									
PLEASE READ: Scanning Agreement											
In order to receive CPE credit for a Seminar or Workshop class you must scan your badge when entering the roomYou must initial here to acknowledge the Scanning Agreement											
STEP V: Payment Information											
<ul> <li>Early Bird registration price is \$255 per person (\$245 if you are a member of a partner association). Standard registration price is \$309. After the standard registration deadlines, the price increases to \$390 per person.</li> <li>Please note that cash is not accepted and that the registration fee is non-refundable and non-transferable. Checks should be made payable to IRS Nationwide Tax Forum and mailed to: IRS Nationwide Tax Forum, <i>C/O Enterprise Services &amp; Technologies, Inc., 912 Thayer Ave., Suite 202, Silver Spring, MD 20910</i></li> <li>Registration fees are non-refundable and non-transferable to another year. There is a \$25 charge for transferring a registration to a different forum. There is a \$75 fee applied to all returned checks.         <ul> <li>I Acknowledge the Payment/Cancellation Policy* (please check that you acknowledge this policy)</li> </ul> </li> <li>Partner Association (if applicable: check one AND provide the correct discount code AND membership ID number)         <ul> <li>**Please note that the \$10 Partner Association discount is ONLY available to the Early Registration rates**</li> <li></li></ul></li></ul>											
Check: Please select this box if you a	re paying b	by check and attach the	check to your regi	stra	tion form						
If paying by credit card, please select from:	American Express		Visa		MasterCard						
Credit Card Number:	Expiratio	n Date:	Security Code:		Approved Amount:						
If your billing address for the credit card provided is different from that provided above, please fill out below:											
Billing Address:											
Signature:	Name as it appears on card:										
If under the Americans with Disabilities Act (ADA), you require auxiliary aids, or services, please specify your needs:											