

SHANXI FIANCE AND ECONOMIC SCHOOL	L
TAIYUAN	

CHINA 030006

Dear GUANG,

As you were on a F, J, M or Q type visa and did not have any US income, or your US income was below the tax threshold, you do not need to complete a full tax return. You just need to complete form 8843 as a statement that you are an exempt individual.

Enclosed, please find two copies of your 8843 tax form for 2016, which you prepared through Sprintax tax software.

File one copy with the Internal Revenue Service and retain the second copy for your records.

How do I file my 8843 tax form?

We have completed form 8843 for you. Please review this form, sign it and date it where indicated on page 2 with the pen symbol. 🗸

Your tax form must be received by the IRS by April 18th. However, we recommend you mail it as soon as possible, using the United States Post Office certified mail service or an approved delivery service that will provide proof of your mailing date, to:

#### **Department of the Treasury**

Internal Revenue Service Austin TX 73301-0215 USA

If you have any questions, please email us at hello@sprintax.com.

Sincerely,

The Sprintax team



# STATEMENT FOR EXEMPT INDIVIDUAL FOR

**GUANG YANG** 

2016

FEDERAL FILING COPY

MAIL TO THE IRS

## Form **8843**

### Statement for Exempt Individuals and Individuals With a Medical Condition

For use by alien individuals only.

OMB No. 1545-0074

▶ Information about Form 8843 and its instructions is at www.irs.gov/form8843.

Department of the Treasury Internal Revenue Service

For the year January 1—December 31, 2016, or other tax year beginning , 2016, and ending

Attachment Sequence No. **102** 

, 20

Your fire	st name and initial	Last name			Your U.S. taxpayer identification number, if any
GUA	NG	YANG			
you a	sses only if re filing this oy itself and ith your tax	Address in country of residence SHANXI FIANCE AND ECONOMIC SCHOOL CHINA 030006 TAIYUAN	627 APT	ess in the Un W 113 ST G 3F W YORK, N	
Part		   Information			
1a	Type of U.S. v	isa (for example, F, J, M, Q, etc.) and date you	u entered the Un	nited State	PS F1 00/17/2016
b	Current nonim	migrant status and date of change (see instru	ctions) > E1	mod Otal	F1 06/17/2016
b	Our ent norm				
2	Of what count	ry were you a citizen during the tax year?			
- За	What country	ry were you a citizen during the tax year?	CHINA		
b	Enter your nas	issued you a passport? CHINA			
	Enter the actu	sport number ►	itad States durin		
₹a			ited States durin	ıg.	
h	2016 <u>137</u>	2015 <u>0</u> 2014 <u>0</u> ber of days in 2016 you claim you can exclud	e for nurnoses of	of the subs	etantial presence test > 137
		rs and Trainees	o for purposes of	7 the east	stantial procence test y 161
5		enter the name, address, and telephone numb	per of the acaden	mic institu	ition where you taught in 2016 ►
		, , , , , , , , , , , , , , , , , , ,			
6	For trainees.	enter the name, address, and telephone nun	nber of the direc	ctor of th	e academic or other specialized program
		ed in during 2016 ▶			
7	Enter the type	of U.S. visa (J or Q) you held during: ▶	2010		2011
	2012	2013 2014	2015	If t	the type of visa you held during any
		changed, attach a statement showing the ne			
8	Were you pre	sent in the United States as a teacher, trair	nee, or student f	for any p	art of 2 of the 6 prior
		s (2010 through 2015)?			
		I the "Yes" box on line 8, you cannot exclude	days of presenc	ce as a te	acher or trainee unless
		Exception explained in the instructions.			
Part					
9		e, address, and telephone number of the acad		-	
	COLUMBIA UN	VERSITY, 116TH STREET AND BROADWAY, NE	W YORK, 10027, 2	212854175	4
10		e, address, and telephone number of the dire			
	in during 2016	DAVID AUSTELL, ASSOCIATE PROVOST A	ND DIRECTOR, NI	IEW YORK	, NY, 10027, 2128543587
		AL STUDENTS AND SCHOLARS OFFICE, 524 RIV			
44	Cotor the type	of LLC vice (F. L. M. ov. O) vou held during.			0044
11	coto	of U.S. visa (F, J, M, or Q) you held during: ▶	2010	If 4	2011 hold during any
	2012				the type of visa you held during any
40	=	changed, attach a statement showing the new			
12		sent in the United States as a teacher, trainee			
		the "Vee" hav an line 12 you must provide			
	If you checked the "Yes" box on line 12, you must provide sufficient facts on an attached statement to establish that you do not intend to reside permanently in the United States.			attached statement to	
46					
13		did you apply for, or take other affirmative stel			
		in the United States or have an application pending to change your status to that of a lawful permanent resident of the United States?			
14	If you chacked	I the "Yes" hox on line 13 explain			
1-		If the "Yes" box on line 13, explain ▶			

Form 8843 (2016) Page **2** 

Part	V Pi	rofessional Athletes	
15	compet	he name of the charitable sports event(s) in the United States in which you competed dutition	
16	Enter to	the name(s) and employer identification number(s) of the charitable organization(s) that	benefited from the sports
	Note: Y	You must attach a statement to verify that all of the net proceeds of the sports event(s) were cation(s) listed on line 16.	
Part 17a		ndividuals With a Medical Condition or Medical Problem be the medical condition or medical problem that prevented you from leaving the United State	too N
b	Enter th	he date you intended to leave the United States prior to the onset of the medical condition or 17a ▶	
С	Enter th	he date you actually left the United States ►	
18	Physici	ian's Statement:	
	I certify	/ that	
		Name of taxpayer	
		nable to leave the United States on the date shown on line 17b because of the medical coded on line 17a and there was no indication that his or her condition or problem was preexist	•
Name of physician or other medical official			
		Physician's or other medical official's address and telephone number	
		Physician's or other medical official's signature	Date
itself	f you ling orm by and	Under penalties of perjury, I declare that I have examined this form and the accompanying attachments, and, to they are true, correct, and complete.	ne best of my knowledge and belief,
not w	<b>I</b>		06.10.17
returi	<b>I</b>	Your signature	Date

Form **8843** (2016)



## STATEMENT FOR EXEMPT INDIVIDUAL FOR GUANG YANG

2016

YOUR COPY

RETAIN FOR YOUR RECORDS

### Statement for Exempt Individuals and Individuals With a Medical Condition

For use by alien individuals only.

OMB No. 1545-0074

Department of the Treasury Internal Revenue Service

beginning

▶ Information about Form 8843 and its instructions is at www.irs.gov/form8843.

For the year January 1—December 31, 2016, or other tax year , 2016, and ending

, 20

Attachment Sequence No. 102

Your fire	t name and initial	Last name		Your U.S. taxpayer identification number, if any
GUAI	NG	YANG		
you ar	sses only if re filing this by itself and ith your tax	Address in country of residence SHANXI FIANCE AND ECONOMIC SCHOOL CHINA 030006 TAIYUAN	Address in the U 627 W 113 S APT 3F NEW YORK,	
Part		Information		
		isa (for example, F, J, M, Q, etc.) and date you entere	ed the United Stat	tes > E1 09/17/2016
b	Current nonim	migrant status and date of change (see instructions)	► E1	F1 08/17/2016
b	Our Crit Horiin			
2	Of what count	ry were you a citizen during the tax year?		
<u>-</u> За	What country	ry were you a citizen during the tax year? CHINA		
b	Enter your nas	ssued you a passport? CHINA		
	Enter the actu	sport number ► <sub>E01886741</sub> al number of days you were present in the United Sta	ates during:	
<del></del> a			ates during.	
h	2016 <u>137</u>	2015_0 2014_0 ber of days in 2016 you claim you can exclude for pu	irnoses of the sub	estantial presence test > 137
		rs and Trainees	il poses of the sur	Startial presence test P 101
5		enter the name, address, and telephone number of the	ne academic instit	ution where you taught in 2016
_	,	, , , , , , , , , , , , , , , , , , , ,		
		······	·	<del></del>
6	For trainees	enter the name, address, and telephone number of	the director of the	ne academic or other specialized program
•		ed in during 2016		
	7 - 1 1			
7	Enter the type	of U.S. visa (J or Q) you held during: ▶ 20	)10	2011
	2012			the type of visa you held during any
		changed, attach a statement showing the new visa t		
8		sent in the United States as a teacher, trainee, or		
		s (2010 through 2015)?		
	If you checked	I the "Yes" box on line 8, you cannot exclude days o	f presence as a to	eacher or trainee unless
	you meet the	Exception explained in the instructions.		
Part				
9	Enter the nam	e, address, and telephone number of the academic in	nstitution you atte	nded during 2016 ►
	COLUMBIA UN	VERSITY, 116TH STREET AND BROADWAY, NEW YORK	K, 10027, 21285417	54
10		e, address, and telephone number of the director of		
	in during 2016	► DAVID AUSTELL, ASSOCIATE PROVOST AND DIRE	ECTOR, NEW YOR	K, NY, 10027, 2128543587
	INTERNATION	AL STUDENTS AND SCHOLARS OFFICE, 524 RIVERSIDE	DRIVE,	
11	Enter the type	of U.S. visa (F, J, M, or Q) you held during: ► 20	)10	2011
	2012			the type of visa you held during any
	-	changed, attach a statement showing the new visa t	• •	•
12		ent in the United States as a teacher, trainee, or stud	• •	
	If you checked the "Yes" box on line 12, you must provide sufficient facts on an attached statement to			attached statement to
	establish that	you do not intend to reside permanently in the United	d States.	
13		lid you apply for, or take other affirmative steps to ap		
		States or have an application pending to change ye		
	resident of the	United States?		Yes 🛚 No
14	If you checked	I the "Yes" box on line 13, explain ▶		

Form 8843 (2016) Page 2

Part	IV Professional Athletes		
15	Enter the name of the charitable sports event(s) in the United States in which you competed competition ▶	-	
16	Enter the name(s) and employer identification number(s) of the charitable organization(s) the event(s) ▶	at benefited from the sports	
Part	Note: You must attach a statement to verify that all of the net proceeds of the sports event(s) wer organization(s) listed on line 16.  Individuals With a Medical Condition or Medical Problem	e contributed to the charitable	
17a	Describe the medical condition or medical problem that prevented you from leaving the United St	ates ►	
b	Enter the date you intended to leave the United States prior to the onset of the medical condition on line 17a ▶	or medical problem described	
С	Enter the date you actually left the United States ▶		
18 Physician's Statement:			
	I certify that		
	Name of taxpayer		
	was unable to leave the United States on the date shown on line 17b because of the medical		
	described on line 17a and there was no indication that his or her condition or problem was preexis	sting.	
	Name of physician or other medical official		
	Name of physician of other medical official		
	Physician's or other medical official's address and telephone number		
	Physician's or other medical official's signature	Date	
Sign only i	f you they are true, correct, and complete.	the best of my knowledge and belief,	
itself			
not w	tax	06.10.17	
returi	Your signature	Date Form <b>8843</b> (2016)	
		1 01111 33-13 (2010)	