## Certain Individuals with NO Income Must File Form 8843



What is Form 8843? Form 8843 is not an income tax return. Form 8843 is merely an informational statement required by the U.S. government for certain Nonresident Aliens (including the spouses or dependents of Nonresident Aliens).

Who must file Form 8843? All Nonresident Aliens who are present in the U.S. under an F-1, F-2, J-1, J-2, M-1, M-2, Q-1, or Q-2 immigration status MUST file Form 8843 "Statement for Exempt Individuals and Individuals With a Medical Condition" even if they received NO income during 2016. Form 8843 must be filed if an individual is:

- ✓ present in the U.S. during 2016,
- a Nonresident Alien, and
- present in the U.S. under an F, J, M or Q immigration status (either the "-1" or the "-2").

If an individual meets all three qualifications above, the individual **must** file Form 8843, regardless of his or her age and even if he or she is not required to file a U.S. income tax return (Form 1040NR or Form 1040NR-EZ).

Is a Social Security Number ("SSN") or Individual Taxpayer Identification Number ("ITIN") required to file ONLY Form 8843? If you already have an SSN or ITIN, the number must be included on Form 8843. However, if you do not have an SSN or ITIN, you do not need to apply for one if you have no U.S.-source income and only need to file Form 8843.

However, an exception to this rule applies for Nonresident Aliens from a very limited number of countries (see below). Such individuals may claim dependents on their U.S. income tax return. To do so, the dependent must have or apply for an SSN or ITIN, regardless of whether or not the dependent has any U.S. income. The countries from which a dependent may be claimed are: American Samoa, Canada, Korea, Mexico, Northern Mariana Islands, and India (applicable only to F-1, J-1, M-1 Students).

How do I submit Form 8843? Form 8843 is typically attached to an income tax return. If, however, you have NO income and are ONLY filing Form 8843, you must print, sign and mail it by **June 15, 2017** to:

Department of the Treasury Internal Revenue Service Center Austin, TX 73301-0215 USA

(there is no street address needed)

Note: EACH individual who has NO income and files ONLY a Form 8843 MUST send the form in a separate envelope.

Do not include more than one Form 8843 per envelope. For example, Juanita Garcia is present in the U.S. under an F-1 immigration status with her husband and 3 year old daughter (both present on F-2 immigration status). Juanita is the only person in the family who received U.S. source income during the tax year. Therefore, Juanita will file an income tax return (Forms 1040NR/1040NR-EZ) with Form 8843 attached. Juanita's husband will file Form 8843 and mail in a separate envelope. Juanita must complete a Form 8843 for her daughter and must submit her daughter's Form 8843 in a separate envelope.

THANK YOU for using GTP!

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Department of the Treasury

Internal Revenue Service Your first name and initial

## **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.

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

Last name

Sequence No. 102

Your U.S. taxpayer identification number, if any

Naman Rajpal 790789759 Fill in your Address in country of residence Address in the United States addresses only if K-19, Karmyogi Enclave 3800 SW, 34th Street you are filing this Kamla Nagar AA #261 form by itself and Agra 282005 Gainesville, FL 32608 not with your tax India United States of America return Part I **General Information** 1a Type of U.S. visa (for example, F, J, M, Q, etc.) and date you entered the United States ►F1 12/27/2015 b Current nonimmigrant status and date of change (see instructions) ► F1 Student Of what country were you a citizen during the tax year? India What country issued you a passport? India Enter your passport number ► J3775881 4a Enter the actual number of days you were present in the United States during: 2015 5 2014 0 Enter the number of days in 2016 you claim you can exclude for purposes of the substantial presence test > 279 **Teachers and Trainees** For teachers, enter the name, address, and telephone number of the academic institution where you taught in 2016 ▶ ------For trainees, enter the name, address, and telephone number of the director of the academic or other specialized program you participated in during 2016 ► Enter the type of U.S. visa (J or Q) you held during: ▶ 2010 2014 2013 2015 . If the type of visa you held during any of these years changed, attach a statement showing the new visa type and the date it was acquired. Were you present in the United States as a teacher, trainee, or student for any part of 2 of the 6 prior If you checked the "Yes" box on line 8, you cannot exclude days of presence as a teacher or trainee unless you meet the Exception explained in the instructions. Students Enter the name, address, and telephone number of the academic institution you attended during 2016 University of Florida 1765 Stadium Road Suite 170 HUB Gainesville, FL 32611 10 Enter the name, address, and telephone number of the director of the academic or other specialized program you participated in during 2016 ▶ Debra Anderson University of Florida 1765 Stadium Road Suite 170 HUB Gainesville, FL 32611 11 Enter the type of U.S. visa (F, J, M, or Q) you held during: ▶ 2010 2011 2014 \_\_\_\_\_ 2015 F-1 . If the type of visa you held during any of these years changed, attach a statement showing the new visa type and the date it was acquired. Were you present in the United States as a teacher, trainee, or student for any part of more than 5 calendar 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. During 2016, did you apply for, or take other affirmative steps to apply for, lawful permanent resident status 13 in the United States or have an application pending to change your status to that of a lawful permanent 14 If you checked the "Yes" box on line 13, explain ▶

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Part	Professional Athletes
15	Enter the name of the charitable sports event(s) in the United States in which you competed during 2016 and the dates of competition
16	Enter the name(s) and employer identification number(s) of the charitable organization(s) that benefited from the sports event(s)
Part	
17a	Describe the medical condition or medical problem that prevented you from leaving the United States ▶
b	Enter the date you intended to leave the United States prior to the onset of the medical condition or medical problem described on line 17a
С	Enter the date you actually left the United States ►
18	Physician's Statement:
	certify that
	Name of taxpayer
	was unable to leave the United States on the date shown on line 17b because of the medical condition or medical problem described on line 17a and there was no indication that his or her condition or problem was preexisting.
	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
Sign only i are fi this fe itself not w	they are true, correct, and complete.  m by nd h
returi	Your signature Date
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