8843 Instructions 2017 (for 2016 tax year)

Scroll down to find the form 8843 (can be filled in by hand or online: http://www.irs.gov/pub/irs-pdf/f8843.pdf). If you have a pre-printed 8843 from Human Resources (usually sent at the end of February), you can use the preprinted form.

All students and dependents considered non-residents for Federal Tax purposes must file the 8843 even if you did not earn any money in the U.S. (See the OISS website to determine if you are a resident or non-resident for Federal tax purposes). Those who earned income and have to file a 1040NR or 1040NR-EZ should attach the 8843 with their tax return which can be completed using the Windstar System. See the OISS tax website for details.

Name and Address:
- Fill in "First name", "Last name", and "Social Security number". If you do not have a Social Security Number leave this blank.
- Fill in the "Address in county of residence" box with your home country address
- Fill in the "Address in the United States" box with your local address

Part I: All students and scholars including dependents:
1a. Enter visa status and date when you last entered the U.S. This information can be found on your I-94 card, the white card that was given to you when you entered the U.S.
1b. Enter your current immigration status. It will be the same as above unless you changed your status in the U.S. since your last entry.
2. 3. and 3a. Enter citizenship and relevant information.
4a and 4b. 4b will be the number of days you were in the U.S in 2016

Part II: J Visiting Professor, Scholar or Researcher
5. Enter: Boston College, 140 Commonwealth Ave. Chestnut Hill MA. If you were a researcher or professor at more than one university, enter the most recent university in 2016
6. Enter the name, address (use the BC address above) and the phone number for the department chair or your faculty sponsor.
7. Complete if you held a J or Q status in the listed years.
8. Only list the years that you were that you were considered a non-resident in A, G, F, J, M, or Q status.

Part III: Students
9. Enter the most recent academic institution you attended in 2016. For Boston College enter: Boston College, 140 Commonwealth Ave. Chestnut Hill, MA 02467
10. Enter: Adrienne Nussbaum, Office of International Students and Scholars, 72 College Rd. Chestnut Hill MA 02467

Part IV and Part V: Skip

Sign and Mail:
- Sign and date the form at the bottom
- Make a photocopy of your completed Form 8843 to keep for your records.

Mail to:
Internal Revenue Service Austin, TX 73301-0215 (Note: There is NO street address)

Filing deadlines:
- If you had no U.S. earned income and are filing only Form 8843, the deadline for filing this form is June 15. YOU DO NOT NEED A WINDSTAR PASSWORD TO COMPLETE THIS FORM.
- If you must file Form 1040NR-EZ or 1040NR, then you must complete Form 8843 and mail with your tax return before the filing deadline, which is April 15.
Form 8843

Statement for Exempt Individuals and Individuals With a Medical Condition
For use by alien individuals only.

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 beginning , 2016, and ending , 20 .

Your first name and initial Last name Your U.S. taxpayer identification number, if any

Fill in your addresses only if you are filing this form by itself and not with your tax return

Address in country of residence Address in the United States

Part I General Information

1a Type of U.S. visa (for example, F, J, M, Q, etc.) and date you entered the United States ➤

1b Current nonimmigrant status and date of change (see instructions) ➤

2 Of what country were you a citizen during the tax year?

3a What country issued you a passport?

3b Enter your passport number ➤

4a Enter the actual number of days you were present in the United States during:

2016 _______ 2015 _______ 2014 _______

4b Enter the number of days in 2016 you claim you can exclude for purposes of the substantial presence test ➤

Part II Teachers and Trainees

5 For teachers, enter the name, address, and telephone number of the academic institution where you taught in 2016 ➤

6 For trainees, enter the name, address, and telephone number of the director of the academic or other specialized program you participated in during 2016 ➤

7 Enter the type of U.S. visa (J or Q) you held during:

2010 _______ 2011 _______

2012 _______ 2013 _______ 2014 _______ 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.

8 Were you present in the United States as a teacher, trainee, or student for any part of 2 of the 6 prior calendar years (2010 through 2015)? □ Yes □ No

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.

Part III Students

9 Enter the name, address, and telephone number of the academic institution you attended during 2016 ➤

10 Enter the name, address, and telephone number of the director of the academic or other specialized program you participated in during 2016 ➤

11 Enter the type of U.S. visa (F, J, M, or Q) you held during:

2010 _______ 2011 _______

2012 _______ 2013 _______ 2014 _______ 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.

12 Were you present in the United States as a teacher, trainee, or student for any part of more than 5 calendar years? □ Yes □ No

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.

13 During 2016, did you apply for, or take other affirmative steps to apply for, lawful permanent resident status in the United States or have an application pending to change your status to that of a lawful permanent resident of the United States? □ Yes □ No

14 If you checked the “Yes” box on line 13, explain ➤
Part IV  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) ▶

Note: You must attach a statement to verify that all of the net proceeds of the sports event(s) were contributed to the charitable organization(s) listed on line 16.

Part V  Individuals With a Medical Condition or Medical Problem

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 ▶

c 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 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 here only if you are filing this form by itself and not with your tax return

Under penalties of perjury, I declare that I have examined this form and the accompanying attachments, and, to the best of my knowledge and belief, they are true, correct, and complete.

Your signature

Date