


**NO
INCOME?**

FORM 8843

INTERNATIONAL STUDENT
LIFE



WHAT IS FORM 8843?



Form **8843** **Statement for Exempt Individuals and Individuals With a Medical Condition**
For use by alien individuals only.

OMB No. 1545-0074

2020

Attachment Sequence No. 102

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form8843 for the latest information.

For the year January 1—December 31, 2020, or other tax year beginning _____, 2020, 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 ▶ _____

b Current nonimmigrant status. If your status has changed, also enter date of change and previous status. See instructions. _____


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

3a What country or countries issued you a passport? _____

b Enter your passport number(s) ▶ _____

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

2020	2019	2018
_____	_____	_____



It is required by the U.S. government for specific nonresident aliens, including dependents of nonresident aliens.

WHO NEEDS TO FILE FORM 8843?

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If an individual meets ***ALL 3*** of these qualifications,
Form 8843 must be filed.

1.

Physically present in
the US in the previous
calendar year (even
for one day!)

2.

Nonresident alien

3.

Present under the
F-1, F-2, J-1, or J-2
status

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HOW DO I FILE FORM 8843?

IF YOU ARE *NOT* REQUIRED TO FILE A FEDERAL TAX RETURN:

Form 8843 must be sent to the
Department of Treasury.

IF YOU ARE FILING A FEDERAL TAX RETURN:

Attach Form 8843 to the back of
your tax return.

HELPFUL TIPS

FOR COMPLETING FORM 8843:

Form 8843	Statement for Exempt Individuals and Individuals With a Medical Condition For use by alien individuals only. ▶ Go to www.irs.gov/Form8843 for the latest information. For the year January 1 – December 31, 2020, or other tax year beginning January 1 , 2020, and ending December 31 , 20 20 .		OMB No. 1545-0074
Department of the Treasury Internal Revenue Service			2020 Attachment Sequence No. 102
Your first name and initial	Last name		Your U.S. taxpayer identification number, if any
FIRST NAME	MIDDLE INITIAL	LAST NAME	SSN, ITIN, or leave blank if you have neither
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
	ADDRESS IN YOUR HOME COUNTRY		MAILING ADDRESS IN THE UNITED STATES

If you do not have a Social Security Number or an ITIN Number, leave the field "Your U.S. taxpayer identification number" blank.

2. PART I: GENERAL INFORMATION

Part I General Information

- 1a Type of U.S. visa (for example, F, J, M, Q, etc.) and date you entered the United States ► **Visa Type, MM/DD/YYYY**
- b Current nonimmigrant status. If your status has changed, also enter date of change and previous status. See instructions.
N/A if this doesn't apply to you. A change would be F-2 to F-1. Obtaining a new F-1 visa is NOT a change.
- 2 Of what country or countries were you a citizen during the tax year? **Country of Citizenship**
- 3a What country or countries issued you a passport? **Passport Associated with your Visa (likely your country of citizenship)**
- b Enter your passport number(s) ► **Passport Number**
- 4a Enter the actual number of days you were present in the United States during:
2020 2019 2018 **Count the days you were physically in the US during these years.**
- b Enter the number of days in 2020 you claim you can exclude for purposes of the substantial presence test ► **Number of days you WERE NOT physically present in the U.S. in 2020**

CBP Travel History Website:

i94.cbp.dhs.gov

Question 4B: Enter the number of days in 2020 you were NOT present in the US. If you were physically present the entire year, enter 0.

3. PART II: TEACHERS AND
TRAINEES

Part II Teachers and Trainees

5 For teachers, enter the name, address, and telephone number of the academic institution where you taught in 2020 ▶
University of Georgia
1324 S. Lumpkin Street, Athens, GA, 30602, 706-542-2900

6 For trainees, enter the name, address, and telephone number of the director of the academic or other specialized program you participated in during 2020 ▶ Robin Catmur-Smith, PDSO
University of Georgia
1324 S. Lumpkin Street, Athens, GA, 30602, 706-542-2900

7 Enter the type of U.S. visa (J or Q) you held during: ▶ 2014 2015
2016 2017 2018 2019 . 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 (2014 through 2019)? 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.

To be completed by J-1 scholars and their dependents **ONLY**

4. PART III: STUDENTS

Part III Students

9 Enter the name, address, and telephone number of the academic institution you attended during 2020 ▶
University of Georgia
1324 S. Lumpkin Street, Athens, GA, 30602, 706-542-2900

10 Enter the name, address, and telephone number of the director of the academic or other specialized program you participated in during 2020 ▶
Robin Catmur-Smith, PDSO
University of Georgia
1324 S. Lumpkin Street, Athens, GA, 30602, 706-542-2900

11 Enter the type of U.S. visa (F, J, M, or Q) you held during: ▶ 2014 2015
2016 2017 2018 2019 . 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 2020, 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 ▶

To be completed by F-1 and J-1 students and their dependents **ONLY**

5. PART IV & V

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Part IV Professional Athletes

15 Enter the amount(s) in the United States in _____ Dates of _____

16 Enter the amount(s) of the _____ from the sports event(s) ▶ _____

Note: You must attach _____ contributed to the charitable organization(s) listed on _____

Part V Individuals With _____

17a Describe the medical condition or medical problem described on line 17a ▶ _____

b Enter the date you intended to leave _____

c Enter the date you actually left the _____

18 **Physician's Statement:**

I certify that _____

_____ was unable to leave _____ on _____ due to the _____ condition or medical problem described on line _____

Physician or other medical official's address _____

Physician's or other medical official's signature _____ Date _____

Parts IV and V should **NOT** be be completed!

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PRINT, SIGN, & DATE FORM 8843

Make a copy for your records.

MAIL TO:

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

STILL HAVE QUESTIONS?

Email us at isltax@uga.edu.

**YOU'RE
ALMOST
DONE!**