

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

**2018**

Attachment Sequence No. **102**

Department of the Treasury  
Internal Revenue Service

▶ Go to [www.irs.gov/Form8843](http://www.irs.gov/Form8843) for the latest information.

For the year January 1—December 31, 2018, or other tax year \_\_\_\_\_, 20\_\_\_\_, 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:  
2018 \_\_\_\_\_ 2017 \_\_\_\_\_ 2016 \_\_\_\_\_
- b Enter the number of days in 2018 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 2018 ▶ \_\_\_\_\_
- 6 For trainees, enter the name, address, and telephone number of the director of the academic or other specialized program you participated in during 2018 ▶ \_\_\_\_\_
- 7 Enter the type of U.S. visa (J or Q) you held during: ▶ 2012 \_\_\_\_\_ 2013 \_\_\_\_\_  
2014 \_\_\_\_\_ 2015 \_\_\_\_\_ 2016 \_\_\_\_\_ 2017 \_\_\_\_\_. 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 (2012 through 2017)? . . . . .  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 2018 ▶  
GRAND VALLEY STATE UNIVERSITY  
1 CAMPUS DR. ALLENDALE MI 49401 616 331 5000
- 10 Enter the name, address, and telephone number of the director of the academic or other specialized program you participated in during 2018 ▶ KATE STOETWER, GVSU, 1 CAMPUS DR  
ALLENDALE MI 49401 616 331 3898
- 11 Enter the type of U.S. visa (F, J, M, or Q) you held during: ▶ 2012 \_\_\_\_\_ 2013 \_\_\_\_\_  
2014 \_\_\_\_\_ 2015 \_\_\_\_\_ 2016 \_\_\_\_\_ 2017 \_\_\_\_\_. 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 2018, 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 2018 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



# U.S. Income Tax Return for Certain Nonresident Aliens With No Dependents

# 2018

Department of the Treasury  
Internal Revenue Service

Go to [www.irs.gov/Form1040NREZ](http://www.irs.gov/Form1040NREZ) for instructions and the latest information.

Identifying number (see instructions)

Please print or type. See separate instructions.

Your first name and initial: [Redacted] Last name: [Redacted] Identifying number: **SSN**

Present home address (number, street, and apt. no., or rural route). If you have a P.O. box, see instructions. [Redacted] *Michigan Address*

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below. See instructions. [Redacted]

Foreign country name: [Redacted] Foreign province/state/county: [Redacted] Foreign postal code: [Redacted]

**Filing Status**  
Check only one box.

**1**  Single nonresident alien **2**  Married nonresident alien

**Attach Form(s) W-2 or 1042-S here.** Also attach Form(s) 1099-R if tax was withheld.

<b>3</b>	Wages, salaries, tips, etc. Attach Form(s) W-2	<b>3</b>	[Redacted]
<b>4</b>	Taxable refunds, credits, or offsets of state and local income taxes	<b>4</b>	[Redacted]
<b>5</b>	Scholarship and fellowship grants. Attach Form(s) 1042-S or required statement.	<b>5</b>	[Redacted]
<b>6</b>	Total income exempt by a treaty from page 2, Item J(1)(e)	<b>6</b>	[Redacted]
<b>7</b>	Add lines 3, 4, and 5	<b>7</b>	[Redacted]
<b>8</b>	Scholarship and fellowship grants excluded	<b>8</b>	[Redacted]
<b>9</b>	Student loan interest deduction	<b>9</b>	[Redacted]
<b>10</b>	Subtract the sum of line 8 and line 9 from line 7. This is your <b>adjusted gross income</b>	<b>10</b>	[Redacted]
<b>11</b>	<b>Itemized deductions.</b> See the instructions for limitation	<b>11</b>	[Redacted]
<b>12</b>	<b>Reserved.</b>	<b>12</b>	[Redacted]
<b>13</b>	<b>Reserved.</b>	<b>13</b>	[Redacted]
<b>14</b>	<b>Taxable income.</b> Subtract line 11 from line 10. If line 11 is more than line 10, enter -0-	<b>14</b>	[Redacted]
<b>15</b>	<b>Tax.</b> Find your tax in the tax table in the instructions	<b>15</b>	[Redacted]
<b>16</b>	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	<b>16</b>	[Redacted]
<b>17</b>	Add lines 15 and 16. This is your <b>total tax</b>	<b>17</b>	[Redacted]
<b>18a</b>	Federal income tax withheld from Form(s) W-2 and 1099-R	<b>18a</b>	[Redacted]
<b>18b</b>	Federal income tax withheld from Form(s) 1042-S	<b>18b</b>	[Redacted]
<b>19</b>	2018 estimated tax payments and amount applied from 2017 return	<b>19</b>	[Redacted]
<b>20</b>	Credit for amount paid with Form 1040-C	<b>20</b>	[Redacted]
<b>21</b>	Add lines 18a through 20. These are your <b>total payments</b>	<b>21</b>	[Redacted]

**Refund**

Direct deposit? See instructions.

**22** If line 21 is more than line 17, subtract line 17 from line 21. This is the amount you **overpaid**

**23a** Amount of line 22 you want **refunded to you**. If Form 8888 is attached, check here

**b** Routing number [Redacted] **c** Type:  Checking  Savings

**d** Account number [Redacted]

**e** If you want your refund check mailed to an address outside the United States not shown above, enter that address here: \_\_\_\_\_

**24** Amount of line 22 you want **applied to your 2019 estimated tax**

**25** **Amount you owe.** Subtract line 21 from line 17. For details on how to pay, see instructions

**26** Estimated tax penalty (see instructions)

*You either overpaid - fill in 22. or underpaid fill in 25. [Not BOTH]*

**Third Party Designee**

Do you want to allow another person to discuss this return with the IRS? See instructions.  Yes. Complete the following.  No

Designee's name: \_\_\_\_\_ Phone no.: \_\_\_\_\_ Personal identification number (PIN): \_\_\_\_\_

**Sign Here**

Keep a copy of this return for your records.

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and accurately list all amounts and sources of U.S. source income I received during the tax year. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature: [Redacted] Date: [Redacted] Your occupation in the United States: **STUDENT**

If the IRS sent you an Identity Protection PIN, enter it here (see inst.): \_\_\_\_\_

**Paid Preparer Use Only**

Print/Type preparer's name: \_\_\_\_\_ Preparer's signature: \_\_\_\_\_ Date: \_\_\_\_\_ Check  if self-employed PTIN: \_\_\_\_\_

Firm's name: \_\_\_\_\_ Firm's EIN: \_\_\_\_\_

Firm's address: \_\_\_\_\_ Phone no.: \_\_\_\_\_



**Schedule OI—Other Information** (see instructions)  
Answer all questions

- A** Of what country or countries were you a citizen or national during the tax year? \_\_\_\_\_
- B** In what country did you claim residence for tax purposes during the tax year? \_\_\_\_\_
- C** Have you ever applied to be a green card holder (lawful permanent resident) of the United States? . . . . .  Yes  No
- D** Were you ever:
1. A U.S. citizen? . . . . .  Yes  No
2. A green card holder (lawful permanent resident) of the United States? . . . . .  Yes  No
- If you answer "Yes" to (1) or (2), see Pub. 519, chapter 4, for expatriation rules that may apply to you.
- E** If you had a visa on the last day of the tax year, enter your visa type. If you did not have a visa, enter your U.S. immigration status on the last day of the tax year. \_\_\_\_\_
- F** Have you ever changed your visa type (nonimmigrant status) or U.S. immigration status? . . . . .  Yes  No
- If "Yes," indicate the date and nature of the change. ► \_\_\_\_\_
- G** List all dates you entered and left the United States during 2018. See instructions.  
**Note:** If you are a resident of Canada or Mexico AND commute to work in the United States at frequent intervals, **check the box for Canada or Mexico** and skip to item H . . . . .  Canada  Mexico

Date entered United States mm/dd/yy	Date departed United States mm/dd/yy
_____	_____
_____	_____
_____	_____
_____	_____

Date entered United States mm/dd/yy	Date departed United States mm/dd/yy
_____	_____
_____	_____
_____	_____
_____	_____

- H** Give number of days (including vacation, non-workdays, and partial days) you were present in the United States during: 2016 \_\_\_\_\_, 2017 \_\_\_\_\_, and 2018 \_\_\_\_\_
- I** Did you file a U.S. income tax return for any prior year? . . . . .  Yes  No
- If "Yes," give the latest year and form number you filed ► if you filed last year  
2017 1040 10EZ
- J** Income Exempt from Tax—If you are claiming exemption from income tax under a U.S. income tax treaty with a foreign country, complete (1) through (3) below. See Pub. 901 for more information on tax treaties.

1. Enter the name of the country, the applicable tax treaty article, the number of months in prior years you claimed the treaty benefit, and the amount of exempt income in the columns below. Attach Form 8833 if required. See instructions.

(a) Country	(b) Tax treaty article	(c) Number of months claimed in prior tax years	(d) Amount of exempt income in current tax year

**(e) Total.** Enter this amount on Form 1040NR-EZ, line 6. Do not enter it on line 3 or line 5 . . . . .

2. Were you subject to tax in a foreign country on any of the income shown in 1(d) above? . . . . .  Yes  No
3. Are you claiming treaty benefits pursuant to a Competent Authority determination? . . . . .  Yes  No
- If "Yes," attach a copy of the Competent Authority determination letter to your return.