



Application to Register Permanent Residence or Adjust Status

Department of Homeland Security
U.S. Citizenship and Immigration Services

USCIS
Form I-485
OMB No. 1615-0023
Expires 10/31/2021

For USCIS Use Only

Preference Category:	Receipt	Action Block
Country Chargeable:		
Priority Date:		
Date Form I-693 Received:		
<input type="checkbox"/> Applicant Interviewed <input type="checkbox"/> Interview Waived Date of Initial Interview: _____ Lawful Permanent Resident as of: _____	Section of Law <input type="checkbox"/> INA 209(a) <input type="checkbox"/> INA 249 <input type="checkbox"/> INA 209(b) <input type="checkbox"/> Sec. 13, Act of 9/11/57 <input type="checkbox"/> INA 245(a) <input type="checkbox"/> Cuban Adjustment Act <input type="checkbox"/> INA 245(i) <input type="checkbox"/> Other _____ <input type="checkbox"/> INA 245(m)	

To be completed by an attorney or accredited representative (if any).

<input type="checkbox"/> Select this box if Form G-28 is attached.	Volag Number (if any) _____	Attorney State Bar Number (if applicable) _____	Attorney or Accredited Representative USCIS Online Account Number (if any) _____
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▶ **START HERE - Type or print in black ink.**

A-Number ▶ A- _____

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, U.S. Citizenship and Immigration Services (USCIS) may deny your application.

Part 1. Information About You (individual applying for lawful permanent residence)

Your Current Legal Name (do not provide a nickname)

1.a. Family Name (Last Name) _____

1.b. Given Name (First Name) _____

1.c. Middle Name _____

3.a. Family Name (Last Name) _____

3.b. Given Name (First Name) _____

3.c. Middle Name _____

4.a. Family Name (Last Name) _____

4.b. Given Name (First Name) _____

4.c. Middle Name _____

Other Names You Have Used Since Birth (if applicable)

NOTE: Provide all other names you have ever used, including your family name at birth, other legal names, nicknames, aliases, and assumed names. If you need extra space to complete this section, use the space provided in **Part 14. Additional Information.**

Additional Information.

2.a. Family Name (Last Name) _____

2.b. Given Name (First Name) _____

2.c. Middle Name _____

Other Information About You

5. Date of Birth (mm/dd/yyyy) _____

NOTE: In addition to providing your actual date of birth, include any other dates of birth you have used in connection with any legal names or non-legal names in the space provided in **Part 14. Additional Information.**

6. Gender Male Female

7. City or Town of Birth

Part 1. Information About You (Person applying for lawful permanent residence) (continued)

8. Country of Birth

9. Country of Citizenship or Nationality

10. Alien Registration Number (A-Number) (if any)
▶ A-

NOTE: If you have **EVER** used other A-Numbers, include the additional A-Numbers in the space provided in **Part 14. Additional Information.**

11. USCIS Online Account Number (if any)
▶

12. U.S. Social Security Number (if any)
▶

U.S. Mailing Address

13.a. In Care Of Name (if any)

13.b. Street Number and Name

13.c. Apt. Ste. Flr.

13.d. City or Town

13.e. State 13.f. ZIP Code

[\(USPS ZIP Code Lookup\)](#)

Alternate and/or Safe Mailing Address

If you are applying based on the Violence Against Women Act (VAWA) or as a special immigrant juvenile, human trafficking victim (T nonimmigrant), or victim of qualifying criminal activity (U nonimmigrant) and you do not want USCIS to send notices about this application to your home, you may provide an alternative and/or safe mailing address.

14.a. In Care Of Name (if any)

14.b. Street Number and Name

14.c. Apt. Ste. Flr.

14.d. City or Town

14.e. State 14.f. ZIP Code

Recent Immigration History

Provide the information for **Item Numbers 15. - 19.** if you last entered the United States using a passport or travel document.

15. Passport Number Used at Last Arrival

16. Travel Document Number Used at Last Arrival

17. Expiration Date of this Passport or Travel Document (mm/dd/yyyy)

18. Country that Issued this Passport or Travel Document

19. Nonimmigrant Visa Number from this Passport (if any)

Place of Last Arrival into the United States

20.a. City or Town

20.b. State

21. Date of Last Arrival (mm/dd/yyyy)

When I last arrived in the United States, I:

22.a. Was inspected at a port of entry and admitted as (for example, exchange visitor; visitor, waived through; temporary worker; student):

22.b. Was inspected at a port of entry and paroled as (for example, humanitarian parole, Cuban parole):

22.c. Came into the United States without admission or parole.

22.d. Other:

If you were issued a Form I-94 Arrival-Departure Record Number:

23.a. Form I-94 Arrival-Departure Record Number
▶

23.b. Expiration Date of Authorized Stay Shown on Form I-94 (mm/dd/yyyy)

23.c. Status on Form I-94 (for example, class of admission, or paroled, if paroled)

Part 1. Information About You (Person applying for lawful permanent residence) (continued)

24. What is your current immigration status (if it has changed since your arrival)?

Provide your name exactly as it appears on your Form I-94 (if any)

25.a. Family Name (Last Name)

25.b. Given Name (First Name)

25.c. Middle Name

Part 2. Application Type or Filing Category

1. I am filing this Form I-485 as a (select **only one** box):

- Principal applicant
- Derivative applicant

NOTE: Attach a copy of the Form I-797 receipt or approval notice for the underlying petition or application, as appropriate.

I am applying as a principal or derivative applicant to register lawful permanent residence or adjust status to that of a lawful permanent resident based on the following immigrant category (select **only one** category). (See the Form I-485 Instructions for more information, including any **Additional Instructions** that relate to the immigrant category you select.):

Family-based

- 2.a. Immediate relative spouse of a U.S. citizen, parent of a U.S. citizen if the U.S. citizen is 21 years of age or older, and unmarried child under 21 years of age of a U.S. citizen, Form I-130
- 2.b. Other relative of a U.S. citizen or relative of a lawful permanent resident under the family-based preference categories, Form I-130
- 2.c. Individual admitted to the United States as a fiancé(e) or child of a fiancé(e) of a U.S. citizen, Form I-129F (K-1/K-2 Nonimmigrant)
- 2.d. Widow or widower of a U.S. citizen, Form I-360
- 2.e. VAWA self-petitioner, Form I-360
- 2.f. Spouse, child, or parent of a deceased U.S. active duty service member in the armed forces under the National Defense Authorization Act (NDAA), Form I-130 or Form I-360

Employment-based

- 3.a. Alien worker, Form I-140 (if you select this box, you must answer **Item Number 9.a.**)
- 3.b. Alien entrepreneur, Form I-526

Special Immigrant

- 4.a. Religious worker, Form I-360
- 4.b. Special immigrant juvenile, Form I-360
- 4.c. Certain Afghan or Iraqi national, Form I-360
- 4.d. Certain international broadcaster, Form I-360
- 4.e. Certain G-4 international organization or family member or NATO-6 employee or family member, Form I-360
- 4.f. Certain U.S. armed forces members (also known as the Six and Six program), Form I-360
- 4.g. Panama Canal Zone employees, Form I-360
- 4.h. Certain Physicians, Form I-360
- 4.i. Certain employee or former employee of the U.S. Government abroad, Form I-360

Asylee or Refugee

- 5.a. Asylum status (INA section 208), Form I-589 or Form I-730
- 5.b. Refugee status (INA section 207), Form I-590 or Form I-730

Human Trafficking Victim or Victim of Qualifying Criminal Activity

- 6.a. Human trafficking victim (T Nonimmigrant), Form I-914 or derivative family member, Form I-914A
- 6.b. Victim of Qualifying Criminal Activity (U Nonimmigrant), Form I-918, derivative family member, Form I-918A, or qualifying family member, Form I-929

Part 2. Application Type or Filing Category
(continued)

Special Programs Based on Certain Public Laws

- 7.a. Applicant adjusting under the Cuban Adjustment Act
- 7.b. Applicant adjusting under the Cuban Adjustment Act for battered spouses and children
- 7.c. Applicant adjusting based on dependent status under the Haitian Refugee Immigrant Fairness Act
- 7.d. Applicant adjusting based on dependent status under the Haitian Refugee Immigrant Fairness Act for battered spouses and children
- 7.e. Lautenberg Parolees
- 7.f. Diplomats or high ranking officials unable to return home (Section 13 of the Act of September 11, 1957)
- 7.g. Applicant adjusting under the Indochinese Parole Adjustment Act of 2000
- 7.h. Applicant adjusting under the Amerasian Act (October 22, 1982), Form I-360

Additional Options

- 8.a. Diversity Visa program
- 8.b. Continuous residence in the United States since before January 1, 1972 ("Registry")
- 8.c. Individual born in the United States under diplomatic status
- 8.d. S nonimmigrants and qualifying family members (only law enforcement agencies can file Form I-485 for someone in this category.)
- 8.e. Other eligibility (see the Form I-485 Instructions, **Who May Form I-485, Item Number 3. Other Immigrant Categories** for examples)

Additional Alien Worker Information

Answer **Item Number 9.a.** only if you selected **Item Number 3.a.** "Alien worker, Form I-140."

- 9.a. Did a relative file the associated Form I-140 for you or does a relative have a significant ownership interest (five percent or more) in the business that filed Form I-140 for you? (The relative must be your husband, wife, father, mother, child, adult son, adult daughter, brother, or sister.)
 Yes No

If you answered "Yes" to **Item Number 9.a.**, answer **Item Numbers 9.b. - 9.c.** If you answered "No," skip to **Item Number 10.**

- 9.b. How is your relative related to you?
 Brother or sister
 Husband, wife, father, mother, child, adult son, or adult daughter
- 9.c. This relative is a:
 U.S. citizen
 U.S. national
 Lawful permanent resident
 None of the above
- 10. Regardless of the immigrant category you are adjusting under, do you hold:
VAWA self-petitioner status Yes No
Victim of Qualifying Criminal Activity (U nonimmigrant) status Yes No
Human trafficking victim (T nonimmigrant) status Yes No

INA Section 245(i)

- 11. Are you applying for adjustment based on the Immigration and Nationality Act (INA) section 245(i)?
 Yes No

NOTE: If you answered "Yes" to **Item Number 11.**, you must have selected a family-based, employment-based, special immigrant, or Diversity Visa immigrant category listed above in **Item Numbers 2.a. - 8.e.** as the basis for your application for adjustment of status. Fill out the rest of this application **AND** Supplement A to Form I-485, Adjustment of Status Under Section 245(i) (Supplement A). For detailed filing instructions, read the Form I-485 Instructions (including any **Additional Instructions** that relate to the immigrant category that you selected in **Item Numbers 2.a. - 8.e.**) and Supplement A Instructions.

Information About Your Immigrant Category

If you are the **principal applicant**, provide the following information.

- 12. Receipt Number of Underlying Petition (if any)
- 13. Priority Date from Underlying Petition (if any) (mm/dd/yyyy)

Part 2. Application Type or Filing Category
(continued)

If you are a **derivative applicant** (the spouse or unmarried child under 21 years of age of a principal applicant), provide the following information for the **principal applicant**.

Principal Applicant's Name

14.a. Family Name (Last Name)

14.b. Given Name (First Name)

14.c. Middle Name

15. Principal Applicant's A-Number (if any)
► A-

16. Principal Applicant's Date of Birth (mm/dd/yyyy)

17. Receipt Number of Principal's Underlying Petition (if any)
►

18. Priority Date of Principal Applicant's Underlying Petition (if any) (mm/dd/yyyy)

Part 3. Additional Information About You

1. Have you ever applied for an immigrant visa to obtain permanent resident status at a U.S. Embassy or U.S. Consulate abroad? Yes No

If you answered "Yes" to **Item Number 1.**, complete **Item Numbers 2.a. - 4.** below. If you need extra space to complete this section, use the space provided in **Part 14. Additional Information.**

Location of U.S. Embassy or U.S. Consulate

2.a. City

2.b. Country

3. Decision (for example, approved, refused, denied, withdrawn)

4. Date of Decision (mm/dd/yyyy)

Address History

Provide physical addresses for everywhere you have lived during the last five years, whether inside or outside the United States. Provide your current address first. If you need extra space to complete this section, use the space provided in **Part 14. Additional Information.**

Physical Address 1 (current address)

5.a. Street Number and Name

5.b. Apt. Ste. Flr.

5.c. City or Town

5.d. State **5.e.** ZIP Code

5.f. Province

5.g. Postal Code

5.h. Country

Dates of Residence

6.a. From (mm/dd/yyyy)

6.b. To (mm/dd/yyyy)

Physical Address 2

7.a. Street Number and Name

7.b. Apt. Ste. Flr.

7.c. City or Town

7.d. State **7.e.** ZIP Code

7.f. Province

7.g. Postal Code

7.h. Country

Part 3. Additional Information About You
(continued)

Dates of Residence

8.a. From (mm/dd/yyyy)

8.b. To (mm/dd/yyyy)

Provide your most recent address outside the United States where you lived for more than one year (if not already listed above).

9.a. Street Number and Name

9.b. Apt. Ste. Flr.

9.c. City or Town

9.d. State **9.e.** ZIP Code

9.f. Province

9.g. Postal Code

9.h. Country

Dates of Residence

10.a. From (mm/dd/yyyy)

10.b. To (mm/dd/yyyy)

Employment History

Provide your employment history for the last five years, whether inside or outside the United States. Provide the most recent employment first. If you need extra space to complete this section, use the space provided in **Part 14. Additional Information**.

Employer 1 (current or most recent)

11. Name of Employer or Company

Address of Employer or Company

12.a. Street Number and Name

12.b. Apt. Ste. Flr.

12.c. City or Town

12.d. State **12.e.** ZIP Code

12.f. Province

12.g. Postal Code

12.h. Country

13. Your Occupation

Dates of Employment

14.a. From (mm/dd/yyyy)

14.b. To (mm/dd/yyyy)

Employer 2

15. Name of Employer or Company

Address of Employer or Company

16.a. Street Number and Name

16.b. Apt. Ste. Flr.

16.c. City or Town

16.d. State **16.e.** ZIP Code

16.f. Province

16.g. Postal Code

16.h. Country

17. Your Occupation

Dates of Employment

18.a. From (mm/dd/yyyy)

18.b. To (mm/dd/yyyy)

Part 3. Additional Information About You
(continued)

Provide your most recent employment outside of the United States (if not already listed above).

19. Name of Employer or Company

Address of Employer or Company

20.a. Street Number and Name

20.b. Apt. Ste. Flr.

20.c. City or Town

20.d. State 20.e. ZIP Code

20.f. Province

20.g. Postal Code

20.h. Country

21. Your Occupation

Dates of Employment

22.a. From (mm/dd/yyyy)

22.b. To (mm/dd/yyyy)

Part 4. Information About Your Parents

Information About Your Parent 1

Parent 1's Legal Name

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

Parent 1's Name at Birth (if different than above)

2.a. Family Name (Last Name)

2.b. Given Name (First Name)

2.c. Middle Name

3. Date of Birth (mm/dd/yyyy)

4. Gender Male Female

5. City or Town of Birth

6. Country of Birth

7. Current City or Town of Residence (if living)

8. Current Country of Residence (if living)

Information About Your Parent 2

Parent 2's Legal Name

9.a. Family Name (Last Name)

9.b. Given Name (First Name)

9.c. Middle Name

Parent 2's Name at Birth (if different than above)

10.a. Family Name (Last Name)

10.b. Given Name (First Name)

10.c. Middle Name

11. Date of Birth (mm/dd/yyyy)

12. Gender Male Female

13. City or Town of Birth

14. Country of Birth

15. Current City or Town of Residence (if living)

16. Current Country of Residence (if living)

Part 5. Information About Your Marital History

1. What is your current marital status?
 Single, Never Married Married Divorced
 Widowed Marriage Annulled
 Legally Separated
2. If you are married, is your spouse a current member of the U.S. armed forces or U.S. Coast Guard?
 N/A Yes No
3. How many times have you been married (including annulled marriages and marriages to the same individual)?

Place of Marriage to Current Spouse

- 9.a. City or Town
- 9.b. State or Province
- 9.c. Country
10. Is your current spouse applying with you? Yes No

Information About Your Current Marriage
(including if you are legally separated)

If you are currently married, provide the following information about your current spouse.

Current Spouse's Legal Name

- 4.a. Family Name (Last Name)
- 4.b. Given Name (First Name)
- 4.c. Middle Name
5. A-Number (if any) ► A-
6. Current Spouse's Date of Birth (mm/dd/yyyy)
7. Date of Marriage to Current Spouse (mm/dd/yyyy)

Information About Prior Marriages (if any)

If you have been married before, whether in the United States or in any other country, provide the following information about your prior spouse. If you have had more than one previous marriage, use the space provided in **Part 14. Additional Information** to provide the information below.

Prior Spouse's Legal Name (provide family name before marriage)

- 11.a. Family Name (Last Name)
- 11.b. Given Name (First Name)
- 11.c. Middle Name
12. Prior Spouse's Date of Birth (mm/dd/yyyy)
13. Date of Marriage to Prior Spouse (mm/dd/yyyy)

Place of Marriage to Prior Spouse

- 14.a. City or Town
- 14.b. State or Province
- 14.c. Country
15. Date Marriage with Prior Spouse Legally Ended (mm/dd/yyyy)

Current Spouse's Place of Birth

- 8.a. City or Town
- 8.b. State or Province
- 8.c. Country

Part 7. Biographic Information (continued)

3. Height Feet Inches
4. Weight Pounds
5. Eye Color (Select **only one** box)
- Black Blue Brown
- Gray Green Hazel
- Maroon Pink Unknown/Other
6. Hair Color (Select **only one** box)
- Bald (No hair) Black Blond
- Brown Gray Red
- Sandy White Unknown/Other

Dates of Membership or Dates of Involvement

5.a. From (mm/dd/yyyy)

5.b. To (mm/dd/yyyy)

Organization 2

6. Name of Organization

7.a. City or Town

7.b. State or Province

7.c. Country

8. Nature of Group

Part 8. General Eligibility and Inadmissibility Grounds

1. Have you **EVER** been a member of, involved in, or in any way associated with any organization, association, fund, foundation, party, club, society, or similar group in the United States or in any other location in the world including any military service? Yes No

If you answered "Yes" to **Item Number 1.**, complete **Item Numbers 2. - 13.b.** below. If you need extra space to complete this section, use the space provided in **Part 14. Additional Information.** If you answered "No," but are unsure of your answer, provide an explanation of the events and circumstances in the space provided in **Part 14. Additional Information.**

Organization 1

2. Name of Organization

3.a. City or Town

3.b. State or Province

3.c. Country

4. Nature of Group

Dates of Membership or Dates of Involvement

9.a. From (mm/dd/yyyy)

9.b. To (mm/dd/yyyy)

Organization 3

10. Name of Organization

11.a. City or Town

11.b. State or Province

11.c. Country

12. Nature of Group

Dates of Membership or Dates of Involvement

13.a. From (mm/dd/yyyy)

13.b. To (mm/dd/yyyy)

Part 8. General Eligibility and Inadmissibility Grounds (continued)

- 31. Have you **EVER** been convicted of two or more offenses (other than purely political offenses) for which the combined sentences to confinement were five years or more? Yes No
- 32. Have you **EVER** illicitly (illegally) trafficked or benefited from the trafficking of any controlled substances, such as chemicals, illegal drugs, or narcotics? Yes No
- 33. Have you **EVER** knowingly aided, abetted, assisted, conspired, or colluded in the illicit trafficking of any illegal narcotic or other controlled substances? Yes No
- 34. Are you the spouse, son, or daughter of a foreign national who illicitly trafficked or aided (or otherwise abetted, assisted, conspired, or colluded) in the illicit trafficking of a controlled substance, such as chemicals, illegal drugs, or narcotics and you obtained, within the last five years, any financial or other benefit from the illegal activity of your spouse or parent, although you knew or reasonably should have known that the financial or other benefit resulted from the illicit activity of your spouse or parent? Yes No
- 35. Have you **EVER** engaged in prostitution or are you coming to the United States to engage in prostitution? Yes No
- 36. Have you **EVER** directly or indirectly procured (or attempted to procure) or imported prostitutes or persons for the purpose of prostitution? Yes No
- 37. Have you **EVER** received any proceeds or money from prostitution? Yes No
- 38. Do you intend to engage in illegal gambling or any other form of commercialized vice, such as prostitution, bootlegging, or the sale of child pornography, while in the United States? Yes No
- 39. Have you **EVER** exercised immunity (diplomatic or otherwise) to avoid being prosecuted for a criminal offense in the United States? Yes No
- 40. Have you **EVER**, while serving as a foreign government official, been responsible for or directly carried out violations of religious freedoms? Yes No
- 41. Have you **EVER** induced by force, fraud, or coercion (or otherwise been involved in) the trafficking of persons for commercial sex acts? Yes No

- 42. Have you **EVER** trafficked a person into involuntary servitude, peonage, debt bondage, or slavery? Trafficking includes recruiting, harboring, transporting, providing, or obtaining a person for labor or services through the use of force, fraud, or coercion. Yes No
- 43. Have you **EVER** knowingly aided, abetted, assisted, conspired, or colluded with others in trafficking persons for commercial sex acts or involuntary servitude, peonage, debt bondage, or slavery? Yes No
- 44. Are you the spouse, son or daughter of a foreign national who engaged in the trafficking of persons and have received or obtained, within the last five years, any financial or other benefits from the illicit activity of your spouse or your parent, although you knew or reasonably should have known that this benefit resulted from the illicit activity of your spouse or parent? Yes No
- 45. Have you **EVER** engaged in money laundering or have you **EVER** knowingly aided, assisted, conspired, or colluded with others in money laundering or do you seek to enter the United States to engage in such activity? Yes No

Security and Related

Do you intend to:

- 46.a. Engage in any activity that violates or evades any law relating to espionage (including spying) or sabotage in the United States? Yes No
- 46.b. Engage in any activity in the United States that violates or evades any law prohibiting the export from the United States of goods, technology, or sensitive information? Yes No
- 46.c. Engage in any activity whose purpose includes opposing, controlling, or overthrowing the U.S. Government by force, violence, or other unlawful means while in the United States? Yes No
- 46.d. Engage in any activity that could endanger the welfare, safety, or security of the United States? Yes No
- 46.e. Engage in any other unlawful activity? Yes No
- 47. Are you engaged in or, upon your entry into the United States, do you intend to engage in any activity that could have potentially serious adverse foreign policy consequences for the United States? Yes No

Part 8. General Eligibility and Inadmissibility Grounds (continued)

Have you **EVER**:

- 48.a.** Committed, threatened to commit, attempted to commit, conspired to commit, incited, endorsed, advocated, planned, or prepared any of the following: hijacking, sabotage, kidnapping, political assassination, or use of a weapon or explosive to harm another individual or cause substantial damage to property? Yes No
- 48.b.** Participated in, or been a member of, a group or organization that did any of the activities described in **Item Number 48.a.**? Yes No
- 48.c.** Recruited members or asked for money or things of value for a group or organization that did any of the activities described in **Item Number 48.a.**? Yes No
- 48.d.** Provided money, a thing of value, services or labor, or any other assistance or support for any of the activities described in **Item Number 48.a.**? Yes No
- 48.e.** Provided money, a thing of value, services or labor, or any other assistance or support for an individual, group, or organization who did any of the activities described in **Item Number 48.a.**? Yes No
- 49.** Have you **EVER** received any type of military, paramilitary, or weapons training? Yes No
- 50.** Do you intend to engage in any of the activities listed in any part of **Item Numbers 48.a. - 49.**? Yes No

NOTE: If you answered “Yes” to any part of **Item Numbers 46.a. - 50.**, explain what you did, including the dates and location of the circumstances, or what you intend to do in the space provided in **Part 14. Additional Information.**

Are you the spouse or child of an individual who **EVER**:

- 51.a.** Committed, threatened to commit, attempted to commit, conspired to commit, incited, endorsed, advocated, planned, or prepared any of the following: hijacking, sabotage, kidnapping, political assassination, or use of a weapon or explosive to harm another individual or cause substantial damage to property? Yes No
- 51.b.** Participated in, or been a member or a representative of a group or organization that did any of the activities described in **Item Number 51.a.**? Yes No
- 51.c.** Recruited members, or asked for money or things of value, for a group or organization that did any of the activities described in **Item Number 51.a.**? Yes No

- 51.d.** Provided money, a thing of value, services or labor, or any other assistance or support for any of the activities described in **Item Number 51.a.**? Yes No
- 51.e.** Provided money, a thing of value, services or labor, or any other assistance or support to an individual, group, or organization who did any of the activities described in **Item Number 51.a.**? Yes No
- 51.f.** Received any type of military, paramilitary, or weapons training from a group or organization that did any of the activities described in **Item Number 51.a.**? Yes No

NOTE: If you answered “Yes” to any part of **Item Number 51.**, explain the relationship and what occurred, including the dates and location of the circumstances, in the space provided in **Part 14. Additional Information.**

- 52.** Have you **EVER** assisted or participated in selling, providing, or transporting weapons to any person who, to your knowledge, used them against another person? Yes No
- 53.** Have you **EVER** worked, volunteered, or otherwise served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons? Yes No
- 54.** Have you **EVER** been a member of, assisted, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so? Yes No
- 55.** Have you **EVER** served in, been a member of, assisted, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerilla group, militia, insurgent organization, or any other armed group? Yes No
- 56.** Have you **EVER** been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party (in the United States or abroad)? Yes No
- 57.** During the period from March 23, 1933 to May 8, 1945, did you ever order, incite, assist, or otherwise participate in the persecution of any person because of race, religion, national origin, or political opinion, in association with either the Nazi government of Germany or any organization or government associated or allied with the Nazi government of Germany? Yes No

Part 8. General Eligibility and Inadmissibility Grounds (continued)

Have you **EVER** ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:

- 58.a. Acts involving torture or genocide? Yes No
- 58.b. Killing any person? Yes No
- 58.c. Intentionally and severely injuring any person? Yes No
- 58.d. Engaging in any kind of sexual contact or relations with any person who did not consent or was unable to consent, or was being forced or threatened? Yes No
- 58.e. Limiting or denying any person's ability to exercise religious beliefs? Yes No
- 59. Have you **EVER** recruited, enlisted, conscripted, or used any person under 15 years of age to serve in or help an armed force or group? Yes No
- 60. Have you **EVER** used any person under 15 years of age to take part in hostilities, or to help or provide services to people in combat? Yes No

NOTE: If you answered “Yes” to any part of **Item Numbers 52. - 60.**, explain what occurred, including the dates and location of the circumstances, in the space provided in **Part 14. Additional Information.**

Public Charge

Those who are subject to the public charge ground of inadmissibility under INA section 212(a)(4) must complete Form I-944, Declaration of Self-Sufficiency, and may also have to submit Form I-864, Affidavit of Support Under Section 213A of the INA. Answer the questions below to determine whether you need to submit these forms together with this Form I-485.

Declaration of Self-Sufficiency (Form I-944)

- 61. Are you exempt from the public charge ground of inadmissibility? Yes No

To determine if you are exempt from the public charge ground of inadmissibility, and therefore exempt from filing Form I-944, read the Form I-485 Instructions, **What Evidence Must You Submit, Item Number 9. Public Charge: Declaration of Self-Sufficiency (Form I-944) and Affidavit of Support Under Section 213A of the INA (Form I-864).** If you answered “Yes” to **Item Number 61.**, proceed to **Item Number 63.a.** If you answered “No,” complete Form I-944 and include it with your Form I-485 filing, and proceed to **Item Number 62.a.**

Affidavit of Support Under Section 213A of the INA (Form I-864)

You may need to file Form I-864. For more information, read the Form I-485 Instructions, **What Evidence Must You Submit, Item Number 9. Public Charge: Declaration of Self-Sufficiency (Form I-944) and Affidavit of Support Under INA section 213A (Form I-864).**

I am EXEMPT from filing Form I-864 because:

- 62.a. I have earned or can receive credit for 40 qualifying quarters (credits) of work in the United States (as defined by the Social Security Act (SSA)). (Attach your SSA earnings statements. Do not count any quarters during which you received a means-tested public benefit).
 - 62.b. I am under 18 years of age, unmarried, immigrating as the child of a U.S. citizen, and will automatically become a U.S. citizen under the Child Citizenship Act of 2000 upon my admission to the United States.
 - 62.c. I am applying under the widow or widower of a U.S. citizen (Form I-360) immigrant category.
 - 62.d. I am applying under an alien worker (Form I-140) employment-based preference immigrant category and both of the following apply:
 - (1) I am not a relative of the Form I-140 petitioner; and
 - (2) I do not have a relative with a significant ownership interest (at least five percent) in the business that filed Form I-140.
 - 62.e. I am applying under the alien entrepreneur (Form I-526) immigrant category.
 - 62.f. I am applying under the human trafficking victim (T nonimmigrant) immigrant category (INA section 245(l)).
 - 62.g. I am applying under a category other than the human trafficking victim (T nonimmigrant) category (INA section 245(l)), or as an alien worker under the employment-based preference categories where a relative filed Form I-140 for me or has a five percent or more ownership interest in the business that filed Form I-140, and I either have a pending application for T nonimmigrant status or I am an individual who is in valid T nonimmigrant status.
- NOTE:** If, when USCIS adjudicates your adjustment application, your Form I-914 is no longer pending a decision or you are no longer in valid T nonimmigrant status, you may have to submit a Form I-944 and Form I-864.
- 62.h. I am applying under the victim of qualifying criminal activity (U nonimmigrant) immigrant category (INA section 245(m)).

Part 8. General Eligibility and Inadmissibility Grounds (continued)

Since April 1, 1997, have you **EVER** reentered or attempted to reenter the United States without being inspected and admitted or paroled after:

- 73.a. Having been unlawfully present in the United States for more than one year in the aggregate? Yes No
- 73.b. Having been deported, excluded, or removed from the United States? Yes No

Miscellaneous Conduct

- 74. Do you plan to practice polygamy in the United States? Yes No
- 75. Are you accompanying another foreign national who requires your protection or guardianship but who is inadmissible after being certified by a medical officer as being helpless from sickness, physical or mental disability, or infancy, as described in INA section 232(c)? Yes No
- 76. Have you **EVER** assisted in detaining, retaining, or withholding custody of a U.S. citizen child outside the United States from a U.S. citizen who has been granted custody of the child? Yes No
- 77. Have you **EVER** voted in violation of any Federal, state, or local constitutional provision, statute, ordinance, or regulation in the United States? Yes No
- 78. Have you **EVER** renounced U.S. citizenship to avoid being taxed by the United States? Yes No

Have you **EVER**:

- 79.a. Applied for exemption or discharge from training or service in the U.S. armed forces or in the U.S. National Security Training Corps on the ground that you are a foreign national? Yes No
- 79.b. Been relieved or discharged from such training or service on the ground that you are a foreign national? Yes No
- 79.c. Been convicted of desertion from the U.S. armed forces? Yes No

- 80.a. Have you **EVER** left or remained outside the United States to avoid or evade training or service in the U.S. armed forces in time of war or a period declared by the President to be a national emergency? Yes No
- 80.b. If your answer to **Item Number 80.a.** is "Yes," what was your nationality or immigration status immediately before you left (for example, U.S. citizen or national, lawful permanent resident, nonimmigrant, parolee, present without admission or parole, or any other status)?

Part 9. Accommodations for Individuals With Disabilities and/or Impairments

NOTE: Read the information in the Form I-485 Instructions before completing this part.

- 1. Are you requesting an accommodation because of your disabilities and/or impairments? Yes No
If you answered "Yes" to **Item Number 1.**, select any applicable box in **Item Numbers 2.a. - 2.c.** and provide an answer.
 - 2.a. I am deaf or hard of hearing and request the following accommodation. (If you are requesting a sign-language interpreter, indicate for which language (for example, American Sign Language).):
 - 2.b. I am blind or have low vision and request the following accommodation:
 - 2.c. I have another type of disability and/or impairment. (Describe the nature of your disability and/or impairment and the accommodation you are requesting.)

Part 10. Applicant's Statement, Contact Information, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-485 Instructions before completing this part. You must file Form I-485 while in the United States.

Part 10. Applicant's Statement, Contact Information, Certification, and Signature
(continued)

Applicant's Statement

NOTE: Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.**

- 1.a. I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.
- 1.b. The interpreter named in **Part 11.** read to me every question and instruction on this application and my answer to every question in , a language in which I am fluent, and I understood everything.
- 2. At my request, the preparer named in **Part 12.**, , prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

- 3. Applicant's Daytime Telephone Number
- 4. Applicant's Mobile Telephone Number (if any)
- 5. Applicant's Email Address (if any)

Applicant's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I understand that if I am a male who is 18 to 26 years of age, submitting this application will automatically register me with the Selective Service System as required by the Military Selective Service Act.

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- 1) I reviewed and understood all of the information contained in, and submitted with, my application; and
- 2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.

Applicant's Signature

- 6.a. Applicant's Signature (sign in ink)
- 6.b. Date of Signature (mm/dd/yyyy)

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 11. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

- 1.a. Interpreter's Family Name (Last Name)
- 1.b. Interpreter's Given Name (First Name)
- 2. Interpreter's Business or Organization Name (if any)

Part 11. Interpreter's Contact Information, Certification, and Signature (continued)

Interpreter's Mailing Address

3.a. Street Number and Name

3.b. Apt. Ste. Flr.

3.c. City or Town

3.d. State 3.e. ZIP Code

3.f. Province

3.g. Postal Code

3.h. Country

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

5. Interpreter's Mobile Telephone Number (if any)

6. Interpreter's Email Address (if any)

Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and , which is the same language specified in **Part 10., Item Number 1.b.**, and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the **Applicant's Certification**, and has verified the accuracy of every answer.

Interpreter's Signature

7.a. Interpreter's Signature (sign in ink)

7.b. Date of Signature (mm/dd/yyyy)

Part 12. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant

Provide the following information about the preparer.

Preparer's Full Name

1.a. Preparer's Family Name (Last Name)

1.b. Preparer's Given Name (First Name)

2. Preparer's Business or Organization Name (if any)

Preparer's Mailing Address

3.a. Street Number and Name

3.b. Apt. Ste. Flr.

3.c. City or Town

3.d. State 3.e. ZIP Code

3.f. Province

3.g. Postal Code

3.h. Country

Preparer's Contact Information

4. Preparer's Daytime Telephone Number

5. Preparer's Mobile Telephone Number (if any)

6. Preparer's Email Address (if any)

Part 12. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant
(continued)

Preparer's Statement

- 7.a. I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.
- 7.b. I am an attorney or accredited representative and my representation of the applicant in this case extends does not extend beyond the preparation of this application.

NOTE: If you are an attorney or accredited representative, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Preparer's Signature

- 8.a. Preparer's Signature (sign in ink)
- 8.b. Date of Signature (mm/dd/yyyy)

NOTE: Do not complete Part 13. until the USCIS Officer instructs you to do so at the interview.

Part 13. Signature at Interview

I swear (affirm) and certify under penalty of perjury under the laws of the United States of America that I know that the contents of this Form I-485, Application to Register Permanent Residence or Adjust Status, subscribed by me, including the corrections made to this application, numbered through , are complete, true, and correct. All additional pages submitted by me with this Form I-485, on numbered pages through are complete, true, and correct. All documents submitted at this interview were provided by me and are complete, true, and correct.

Subscribed to and sworn to (affirmed) before me
USCIS Officer's Printed Name or Stamp

Date of Signature (mm/dd/yyyy)

Applicant's Signature (sign in ink)

USCIS Officer's Signature (sign in ink)

Part 14. Additional Information

If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number, Part Number, and Item Number** to which your answer refers; and sign and date each sheet.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

2. A-Number (if any) ► A-

3.a. Page Number 3.b. Part Number 3.c. Item Number

3.d.

4.a. Page Number 4.b. Part Number 4.c. Item Number

4.d.

5.a. Page Number 5.b. Part Number 5.c. Item Number

5.d.

6.a. Page Number 6.b. Part Number 6.c. Item Number

6.d.

7.a. Page Number 7.b. Part Number 7.c. Item Number

7.d.