

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 10/31/2025

For USCIS Use Only							
Preference Category:			Receipt			Action Block	
Country Chargeable:							
Priority Date:							
Date Form I-693 Received:							
Applicant Interview Interviewed Waived Date of Initial Interview: Lawful Permanent Resident as of:		Section of Law INA 209(a) INA 249 INA 209(b) Sec. 13, Act of 9/11/57 INA 245(a) Cuban Adjustment Act INA 245(i) Other INA 245(m) INA 245(m)					
	To be c	ompleted by an a	ttorney o	or accred	ited represe	ntative (if any).	
Select this box if Form G-28 is attached.	Volag Nu (if any)		Attorney (if applica		ar Number	Attorney or Accredited Represe USCIS Online Account Number	
 START HERE - Type or print in black ink. NOTE TO ALL APPLICANTS: If you do not completely fill of Instructions, U.S. Citizenship and Immigration Services (USCIS) 			(USCIS) 1	may deny	plication or f your applic Family Nar	ation.	sted in the
Part 1. Information <i>A</i> for lawful permanent r		· · · · ·	lynng	3.b.	(Last Name Given Nam	,	
Your Current Legal Name (do nickname)		not provide a		3.c.	(First Name Middle Nar	,	
1.a. Family Name (Last Name)				4. a.	Family Nar (Last Name		
1.b. Given Name (First Name)				4.b.		e	
1.c. Middle Name				4.c.	Middle Nar		
Other Names You Have Used Since Birth (if applicable)			Oth	er Inform	ation About You		
** '	names vou h	nave ever used inc	luding	5.	Date of Bir	th (mm/dd/yyyy)	
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 .		,		include any connection	addition to providing your actual da other dates of birth you have used i with any legal names or non-legal n rovided in Part 14. Additional Info	in names in	
2.a. Family Name (Last Name)				6.	Sex [Male Female	
2.b. Given Name (First Name)				7.	City or Tov	vn of Birth	
2.c. Middle Name							

Part 1. Information About You (Person applying	Social Security Card
for lawful permanent residence) (continued)	14. Has the Social Security Administration (SSA) ever officially issued a Social Security card to you?
8. Country of Birth	Yes No
9. Country of Citizenship or Nationality	If you answered "Yes," provide the information requested in Item Number 15.
	15. Provide your U.S. Social Security Number (SSN).
10. Alien Registration Number (A-Number) (if any)	
► A-	16. Do you want the SSA to issue you a Social Security card?
NOTE: If you have EVER used other A-Numbers, include the additional A-Numbers in the space provided	(You must also answer "Yes" to Item Number 17. Consent for Disclosure , to receive a card).
in Part 14. Additional Information.	Yes No
11. USCIS Online Account Number (if any) ►	17. Consent for Disclosure: I authorize disclosure of information from this application to the SSA as required for the purpose of assigning me an SSN and issuing me a
U.S. Mailing Address	Social Security Card.
12.a. In Care Of Name (if any)	Recent Immigration History
	Keceni Immigration History
12.b. Street Number and Name	Provide the information for Item Numbers 18 24. if you last entered the United States using a passport or travel document.
12.c. Apt. Ste. Flr.	18. Passport Number Used at Last Arrival
12.d. City or Town	19. Travel Document Number Used at Last Arrival
12.e. State 12.f. ZIP Code	
(USPS ZIP Code Lookup)	20. Expiration Date of this Passport or Travel Document
Alternate and/or Safe Mailing Address	(mm/dd/yyyy)
If you are applying based on the Violence Against Women Act (VAWA) or as a special immigrant juvenile, human trafficking	21. Country that Issued this Passport or Travel Document
victim (T nonimmigrant), or victim of a qualifying crime (U	
nonimmigrant) and you do not want USCIS to send notices about this application to your home, you may provide an	22. Nonimmigrant Visa Number from this Passport (if any)
alternative and/or safe mailing address.	
13.a. In Care Of Name (if any)	Place of Last Arrival into the United States
	23.a. City or Town
13.b. Street Number	
and Name	
13.c. Apt. Ste. Flr.	23.b. State
13.d. City or Town	24. Date of Last Arrival (mm/dd/yyyy)
13.e. State 13.f. ZIP Code	

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Part 1. Information About You (Person applying for lawful permanent residence) (continued)		rt 2. App
When I last arrived in the United States, I:		the for the un
25.a. Was inspected at a port of entry and admitted as (for example, exchange visitor; visitor, waived through; temporary worker; student):	statu follo Forn Add	a applying the state of the sta
25.b. Was inspected at a port of entry and paroled as (for example, humanitarian parole, Cuban parole):	1.a.	Family-b
		Imme
25.c. Came into the United States without admission or parole.		Other perm categ
25.d. Other:		Perso child
If you were issued a Form I-94 Arrival-Departure Record Number:		(K-1/
26.a. Form I-94 Arrival-Departure Record Number		Wido
26 b Expiration Data of Authorized Stay Shoum on Form I 04	11	
26.b. Expiration Date of Authorized Stay Shown on Form I-94 (mm/dd/yyyy)	1.b.	Employn
26.c. Status on Form I-94 (for example, class of admission, or		
paroled, if paroled)	1.c.	Special I
		- Relig
27. What is your current immigration status (if it has changed since your arrival)?		Speci
		Certa Form
Provide your name exactly as it appears on your Form I-94 (if		Certa
any) 28.a. Family Name (Last Name)		Certa mem Form
28.b. Given Name (First Name)	1.d.	Asylee or
28.c. Middle Name		Asylu Form
		Refug Form
	1.e.	Human T
		Hum

olication Type or Filing Category

a copy of the Form I-797 receipt or approval nderlying petition or application, as appropriate.

to register lawful permanent residence or adjust a lawful permanent resident based on the grant category (select only one box). (See the ructions for more information, including any tructions that relate to the immigrant category

ased

r relative of a U.S. citizen or relative of a lawful anent resident under the family-based preference ories, Form I-130

- on admitted to the United States as a fiancé(e) or of a fiancé(e) of a U.S. citizen, Form I-129F K-2 Nonimmigrant)
 - ow or widower of a U.S. citizen, Form I-360
- A self-petitioner, Form I-360

ient-based

- worker, Form I-140
- entrepreneur, Form I-526

mmigrant

- ious worker, Form I-360
- ial immigrant juvenile, Form I-360
- in Afghan or Iraqi National, Form I-360 or DS-157
- in international broadcaster, Form I-360
- in G-4 international organization or family ber or NATO-6 employee or family member, I-360

Refugee

- um status (INA section 208), Form I-589 or I-730
- gee status (INA section 207), Form I-590 or I-730

Frafficking Victim or Crime Victim

- Human trafficking victim (T Nonimmigrant), Form I-914 or derivative family member, Form I-914A
- Crime victim (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)

1.f. Special Programs Based on Certain Public Laws

- The Cuban Adjustment Act
 - The Cuban Adjustment Act for battered spouses and children
- Dependent status under the Haitian Refugee Immigrant Fairness Act
- Dependent status under the Haitian Refugee Immigrant Fairness Act for battered spouses and children
- Lautenberg Parolees

Diplomats or high ranking officials unable to return home (Section 13 of the Act of September 11, 1957)

Indochinese Parole Adjustment Act of 2000

1.g. Additional Options

Diversity Visa program

Continuous residence in the United States since before January 1, 1972 ("Registry")

- Individual born in the United States under diplomatic status
 - Other eligibility
- **2.** 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 2.**, you must have selected a family-based, employment-based, special immigrant, or Diversity Visa immigrant category listed above in **Item Numbers 1.a. - 1.g.** 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 1.a. - 1.g.**) and Supplement A Instructions.

Information About Your Immigrant Category

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

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

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

5.a.	Family Name (Last Name)
5.b.	Given Name (First Name)
5.c.	Middle Name
6.	Principal Applicant's A-Number (if any) A-
7.	Principal Applicant's Date of Birth
	(mm/dd/yyyy)
8.	Receipt Number of Principal's Underlying Petition (if an
0	
9.	Priority Date of Principal Applicant's Underlying Petition
	(if any) (mm/dd/yyyy)
Par	rt 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?
	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 .
Loca	tion of U.S. Embassy or U.S. Consulate
2.a.	City
	City
2.b.	Country
2.b. 3.	

Part 3. Additional Information About You (continued)

Address History

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

vaion Addr aa 1 (a nt oddr Dh (22)

Physical Address I (current address)	
5.a. Street Number and Name	9.f. Province
	9.g. Postal Code
5.b. Apt. Ste. Flr.	9.h. Country
5.c. City or Town	
5.d. State 5.e. ZIP Code	Dates of Residence
5.f. Province	10.a. From (mm/dd/yyyy)
5.g. Postal Code	10.b. To (mm/dd/yyyy)
5.h. Country	Employment History
Dates of Residence 6.a. From (mm/dd/yyyy)	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 .
6.b. To (mm/dd/yyyy)	Employer 1 (current or most recent)
Physical Address 2	11. Name of Employer or Company
7.a. Street Number	
and Name	Address of Employer or Company
7.b. Apt. Ste. Flr.	12.a. Street Number
7.c. City or Town	and Name
7.d. State 7.e. ZIP Code	12.b. Apt. Ste. Flr.
	12.c. City or Town
7.f. Province	12.d. State 12.e. ZIP Code
7.g. Postal Code	
7.h. Country	12.f. Province
	12.g. Postal Code
Dates of Residence	12.h. Country
8.a. From (mm/dd/yyyy)	
	13. Your Occupation
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	
ted	9.b. Apt. Ste.	Flr.
a	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)	

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Part 3. Additional Information About You	Address of Employer or Company 20.a. Street Number
(continued)	and Name
Dates of Employment	20.b. Apt. Ste. Flr.
14.a. From (mm/dd/yyyy)	20.c. City or Town
14.b. To (mm/dd/yyyy)	20.d. State 20.e. ZIP Code
Employer 2	20.f. Province
15. Name of Employer or Company	20.g. Postal Code
	20.h. Country
Address of Employer or Company	
16.a. Street Number and Name	21. Your Occupation
16.b. Apt. Ste. Flr.	
16.c. City or Town	Dates of Employment
16.d. State 16.e. ZIP Code	22.a. From (mm/dd/yyyy)
16.f. Province	22.b. To (mm/dd/yyyy)
16.g. Postal Code	
16.h. Country	Part 4. Information About Your Parents
	Information About Your Parent 1
17. Your Occupation	Parent 1's Legal Name
	1.a. Family Name (Last Name)
Dates of Employment	1.b. Given Name (First Name)
18.a. From (mm/dd/yyyy)	1.c. Middle Name
18.b. To (mm/dd/yyyy)	Parent 1's Name at Birth (if different than above)
Provide your most recent employment outside of the United States (if not already listed above).	2.a. Family Name (Last Name)
19. Name of Employer or Company	2.b. Given Name (First Name)
	2.c. Middle Name
	3. Date of Birth (mm/dd/yyyy)
	4. Sex Male Female
	5. City or Town of Birth
	6. Country of Birth

A-Number ► A-

Part 4. Information About Your Parents (continued)

- 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	
Paren	it 2's Name at B	irth (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)
- **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	Divorce
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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 person)?

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 a	any)
			► A-
	6.	Current Spouse	e's Date of Birth (mm/dd/yyyy)
	7.	Date of Marria	ge to Current Spouse (mm/dd/yyyy)
	Curr	ent Spouse's Plac	ce of Birth
	8.a.	City or Town	
	8.b.	State or Provin	ce
	8.c.	Country	
	Place	e of Marriage to	Current Spouse
	9.a.	City or Town	
	9.b.	State or Provin	ce
ory	9.c.	Country	
d	10.	Is your current	spouse applying with you?
f the			

Part 5. Information About Your Marital History (continued)

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.	(Last Name)	Part	
11.b.	. Given Name (First Name)	Chile	d 1
11 c	Middle Name	Curr	en
		2.a.	F (]
12.	Prior Spouse's Date of Birth (mm/dd/yyyy)	2.b.	() () ()
13.	Date of Marriage to Prior Spouse (mm/dd/yyyy)	2.c.	N
Place	e of Marriage to Prior Spouse	3.	A
14.a.	. City or Town		
		4.	Ľ
14.b.	State or Province	5.	
14.c.	Country	6.	Is
		Chile	d 2
15.	Date Marriage with Prior Spouse Legally Ended	Curr	ent
	(mm/dd/yyyy)	7.a.	F
Place	e Where Marriage with Prior Spouse Legally Ended		(]
16.a.	City or Town	7.b.	C (1
		7.c.	N
16.b.	State or Province	8.	A
16.c.	Country	9.	Γ
		10.	0

Part 6. Information About Your Children

1. Indicate the total number of ALL living children (including adult sons and daughters) that you have.

NOTE: The term "children" includes all biological or legally adopted children, as well as current stepchildren, of any age, whether born in the United States or other countries, married or unmarried, living with you or elsewhere and includes any missing children and those born to you outside of marriage.

Provide the following information for each of your children. If you have more than three children, use the space provided in **Part 14. Additional Information**.

Curr	ent Legal Name
2.a.	Family Name (Last Name)
2.b.	Given Name (First Name)
2.c.	Middle Name
3.	A-Number (if any)
	► A-
4.	Date of Birth (mm/dd/yyyy)
5.	Country of Birth
6.	Is this child applying with you? Yes No
Chile	12
Curr	ent Legal Name
7 . a.	Family Name (Last Name)
7.b.	Given Name (First Name)
7.c.	Middle Name
8.	A-Number (if any)
	► A-
9.	Date of Birth (mm/dd/yyyy)
10.	Country of Birth
11.	Is this child applying with you?

	rt 6. Information About Your Children ntinued)		t 8. General Eligibility and Inadmissibility ounds
12.a. 12.b	d 3 ent Legal Name (Last Name) . Given Name (First Name) . Middle Name A-Number (if any) ► A-	Num this s Infor answ	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 u answered "Yes" to Item Number 1. , complete Item bers 2. - 13.b. below. If you need extra space to complete ection, use the space provided in Part 14. Additional mation . If you answered "No," but are unsure of your er, provide an explanation of the events and circumstances e space provided in Part 14. Additional Information.
14.	Date of Birth (mm/dd/yyyy)	Orga	nization 1
15.	Country of Birth	2.	Name of Organization
16.	Is this child applying with you? Yes No	3.a.	City or Town
Par	t 7. Biographic Information	3.b.	State or Province
1.	Ethnicity (Select only one box)		
	Hispanic or Latino	3.c.	Country
	Not Hispanic or Latino		
2.	Race (Select all applicable boxes)	4.	Nature of Group
	White Asian	Date	s of Membership or Dates of Involvement
	Black or African American	5.a.	From (mm/dd/yyyy)
	American Indian or Alaska Native	5.b.	To (mm/dd/yyyy)
3.	Height Feet Inches	Orga	nization 2
4.	Weight Pounds	6.	Name of Organization
5.	Eye Color (Select only one box)	7.a.	City or Town
	Black Blue Brown	/ .a.	
	Gray Green Hazel	7.b.	State or Province
	Maroon Pink Unknown/Other		
6.	Hair Color (Select only one box)	7.c.	Country
	Bald (No hair) Black Blond		
	Brown Gray Red	8.	Nature of Group
	Sandy White Unknown/Other		

				A-Number ► A-	
	t 8. General Eligibility and Inacounds (continued)	dmissibility	20.	Have you EVER had a prior final ord deportation, or removal reinstated?	der of exclusion,
Date	s of Membership or Dates of Involvemer	nt	21.	Have you EVER held lawful perman which was later rescinded?	ent resident status
	From (mm/dd/yyyy) To (mm/dd/yyyy)		22.	Have you EVER been granted volun immigration officer or an immigratio depart within the allotted time?	tary departure by an
Orga 10.	nization 3 Name of Organization		23.	Have you EVER applied for any kine protection from removal, exclusion, o	
11 . a	City or Town		24.a.	Have you EVER been a J nonimmigit who was subject to the two-year fore requirement?	
	State or Province Country		Num	u answered "Yes" to Item Number 24 I bers 24.b 24.c. If you answered "N , skip to Item Number 25.	I.a., complete Item
12.	Nature of Group			Have you complied with the foreign requirement?	residence
	s of Membership or Dates of Involvemer	nt	24.c.	Have you been granted a waiver or has State issued a favorable waiver reconfor you?	-
	From (mm/dd/yyyy)		Crit	minal Acts and Violations	
Ansy think you an ex	To (mm/dd/yyyy) wer Item Numbers 14 86.b. Choose the set of t	questions (or if inswer), provide es in the space n .	quest other enfor have quest	tem Numbers 25 45., you must ans tion that applies to you, even if your re- wise cleared, or even if anyone, inclue rement officer, or attorney, told you th a record. You must also answer "Yes tions whether the action or offense occ ed States or anywhere else in the world	cords were sealed or ling a judge, law hat you no longer " to the following curred here in the
14. 15.	Have you EVER been denied admissio States? [Have you EVER been denied a visa to	Yes No	"Yes Part that i wher	" to Item Numbers 25 45. , use the s 14. Additional Information to provid ncludes why you were arrested, cited, e you were arrested, cited, detained, or) the event occurred; and the outcome	space provided in de an explanation detained, or charged; r charged; when
16.	Have you EVER worked in the United authorization?	States without	comr	nple, no charges filed, charges dismisse nunity service).	
17.	Have you EVER violated the terms or on nonimmigrant status?	conditions of your	25.	Have you EVER been arrested, cited detained for any reason by any law et (including but not limited to any U.S official or any official of the U.S. arm	nforcement official . immigration
18.	Are you presently or have you EVER be exclusion, rescission, or deportation pro-		• -	Coast Guard)?	Yes No
19.	[Have you EVER been issued a final or deportation, or removal? [Yes No der of exclusion, Yes No	26.	Have you EVER committed a crime you were not arrested, cited, charged crime)?	-

	rt 8. General Eligibility and Inadmissibility ounds (continued)	35.	Have you EVER engaged in prostitution or are you coming to the United States to engage in prostitution?
27.	Have you EVER pled guilty to or been convicted of a crime or offense (even if the violation was subsequently expunged or sealed by a court, or if you were granted a pardon, amnesty, a rehabilitation decree, or other act of	36.	Yes No Have you EVER directly or indirectly procured (or attempted to procure) or imported prostitutes or persons for the purpose of prostitution? Yes Yes No
	clemency)? Yes No NOTE: If you were the beneficiary of a pardon, amnesty, a rehabilitation decree, or other act of clemency, provide documentation of that post-conviction action.	37. 38.	Have you EVER received any proceeds or money from prostitution? Do you intend to engage in illegal gambling or any other form of commercialized vice, such as prostitution,
28.	Have you EVER been ordered punished by a judge or had conditions imposed on you that restrained your liberty (such as a prison sentence, suspended sentence, house arrest, parole, alternative sentencing, drug or alcohol treatment, rehabilitative programs or classes, probation, or community service)?	39.	bootlegging, or the sale of child pornography, while in the United States? Yes No Have you EVER exercised immunity (diplomatic or otherwise) to avoid being prosecuted for a criminal offense in the United States? Yes No
29.	Have you EVER been a defendant or the accused in a criminal proceeding (including pre-trial diversion, deferred prosecution, deferred adjudication, or any withheld adjudication)?	40.	Have you EVER , while serving as a foreign government official, been responsible for or directly carried out violations of religious freedoms? Yes No
30.	Have you EVER violated (or attempted or conspired to violate) any controlled substance law or regulation of a state, the United States, or a foreign country?	41.	Have you EVER induced by force, fraud, or coercion (or otherwise been involved in) the trafficking of persons for commercial sex acts?
31.	Yes No 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	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.
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	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?
33.	Have you EVER knowingly aided, abetted, assisted, conspired, or colluded in the illicit trafficking of any illegal narcotic or other controlled substances?	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
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?	45.	should have known that this benefit resulted from the illicit activity of your spouse or parent? Wes No 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

Part 8. General Eligibility and Inadmissibility Grounds (continued)	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			
Security and Related	Item Number 48.a.?			
Do you intend to:	49. Have you EVER received any type of military, paramilitary, or weapons training?			
46.a. Engage in any activity that violates or evades any law				
relating to espionage (including spying) or sabotage in the United States?	50. Do you intend to engage in any of the activities listed in any part of Item Numbers 48.a 49. ? 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 	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 .			
46.c. Engage in any activity whose purpose includes opposing,	Are you the spouse or child of an individual who EVER :			
controlling, or overthrowing the U.S. Government by force, violence, or other unlawful means while in the United States?	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			
46.d. Engage in any activity that could endanger the welfare, safety, or security of the United States?	weapon or explosive to harm another individual or cause substantial damage to property? Yes No			
46.e. Engage in any other unlawful activity? Yes No	51.b. Participated in, or been a member or a representative of a group or organization that did any of the activities			
47. Are you engaged in or, upon your entry into the United	described in Item Number 51.a. ? Yes No			
States, do you intend to engage in any activity that could have potentially serious adverse foreign policy consequences for the United States? 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			
Have you EVER :	51.d. Provided money, a thing of value, services or labor, or			
48.a. Committed, threatened to commit, attempted to commit, conspired to commit, incited, endorsed, advocated,	any other assistance or support for any of the activities described in Item Number 51.a. ? Yes No			
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.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.? 			
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	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. ?			
48.c. Recruited members or asked for money or things of value for a group or organization that did any of the activities	Yes No			
for a group or organization that did any of the activities described in Item Number 48.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			
48.d. Provided money, a thing of value, services or labor, or any other assistance or support for any of the activities	in Part 14. Additional Information.			
described in Item Number 48.a.?	52. Have you EVER assisted or participated in selling,			

2. 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

	rt 8. General Eligibility and Inadmissibility ounds (continued)	60. Have you EVER used any person under 15 years of ag to take part in hostilities, or to help or provide services people in combat?
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?	NOTE: If you answered "Yes" to any part of Item Number 52 60., explain what occurred, including the dates and location of the circumstances, in the space provided in Part 1 Additional Information.
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?	 <i>Public Charge</i> 61. Are you subject to the public charge ground of inadmissibility under INA section 212(a)(4)? Yes Yes Yes
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?	If you answered "Yes" to Item Number 61., complete Item Numbers 62 68.d. below. If you answered "No" to Item Number 61., go to Item Number 69.a. If you need extra sp to complete this section, use the space provided in Part 14. Additional Information.
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)?	62. What is the size of your household?63. Indicate your annual household income.
help 58.a 58.b 58.c	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 e you EVER ordered, incited, called for, committed, assisted, ed with, or otherwise participated in any of the following: No Acts involving torture or genocide? Yes No Killing any person? Yes No Intentionally and severely injuring any person? Yes No Engaging in any kind of sexual contact or relations with Killion Killion	 \$0-27,000 \$27,001-52,000 \$52,001-85,000 \$85,001-141,000 Over \$141,000 64. Identify the total value of your household assets. \$0-18,400 \$18,401-136,000 \$136,001-321,400 \$321,401-707,100 Over \$707,100
	any person who did not consent or was unable to consent, or was being forced or threatened? Yes No . Limiting or denying any person's ability to exercise	
59.	religious beliefs? 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	

			A-Number ► A-			
Par	t 8. General Eligibility and Inadmis	ssibility Grounds (co	ntinued)			
65.	65. Identify the total value of your household liabilities (including both secured and unsecured liabilities).					
	\$0 \$1-10,100 \$10,101-57	,700 \$57,701	-186,800 Over \$	186,800		
66.	What is the highest degree or level of school	l you have completed?				
	Grades 1 through 11 12 th grade	- no diploma 🗌 High scl	nool diploma, GED, or alt	ernative credential		
	1 or more years of college credit, no deg	gree Associa	te's degree 🗌 Bachel	or's degree		
	Master's degree Professiona	l degree (JD, MD, DMD, e	etc.) Doctor	ate degree		
67.	List your certifications, licenses, skills obtain	ned through work experien	ce, and educational certifi	cates.		
68. a.	Have you ever received Supplemental Secur (TANF), or State, Tribal, territorial, or local, "General Assistance" in the State context, bu	cash benefit programs for	income maintenance (ofte			
68.b.	Have you ever received long-term institution	alization at government ex	pense?	Yes No		
68.c.	c. If your answer to Item Number 68.a. is "Yes," list the specific benefit(s) you received, the start and end dates of each period of receipt, and the dollar amount of benefits received.					
	Benefit Received	Start Date	End Date	Dollar Amount		

68.d. If your answer to **Item Number 68.b.** is "Yes," list the name, city, and state for each institution, the start and end dates of each period of institutionalization, and the reason you were institutionalized.

Institution Name/City/State	Date From	Date To	Reason

Part 8. General Eligibility and Inadmissibility Grounds (continued)

Illegal Entries and Other Immigration Violations

- **69.a.** Have you **EVER** failed or refused to attend or to remain in attendance at any removal proceeding filed against you on or after April 1, 1997? Yes No
- **69.b.** If your answer to **Item Number 69.a.** is "Yes," do you believe you had reasonable cause? ☐ Yes ☐ No
- **69.c.** If your answer to **Item Number 69.b.** is "Yes," attach a written statement explaining why you had reasonable cause.
- **70.** Have you **EVER** submitted fraudulent or counterfeit documentation to any U.S. Government official to obtain or attempt to obtain any immigration benefit, including a visa or entry into the United States? ☐ Yes ☐ No
- 71. Have you EVER lied about, concealed, or misrepresented any information on an application or petition to obtain a visa, other documentation required for entry into the United States, admission to the United States, or any other kind of immigration benefit?
- 72. Have you EVER falsely claimed to be a U.S. citizen (in writing or any other way)? ☐ Yes ☐ No
- 73. Have you EVER been a stowaway on a vessel or aircraft arriving in the United States? ☐ Yes ☐ No
- 74. Have you EVER knowingly encouraged, induced, assisted, abetted, or aided any foreign national to enter or to try to enter the United States illegally (alien smuggling)?
- **75.** Are you under a final order of civil penalty for violating INA section 274C for use of fraudulent documents?

Yes No

Removal, Unlawful Presence, or Illegal Reentry After Previous Immigration Violations

76. Have you **EVER** been excluded, deported, or removed from the United States or have you ever departed the United States on your own after having been ordered excluded, deported, or removed from the United States?

Yes No

77. Have you **EVER** entered the United States without being inspected and admitted or paroled? ☐ Yes ☐ No

Since April 1, 1997, have you been unlawfully present in the United States:

78.a.	For more than 180 days but less than a	a yea	r, and	then	l I
	departed the United States?		Yes		No

78.b. For one year or more and then departed the United States?

Yes No

NOTE: You were unlawfully present in the United States if you entered the United States without being inspected and admitted or inspected and paroled, or if you legally entered the United States but you stayed longer than permitted.

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

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

Miscellaneous Conduct

80. Do you plan to practice polygamy in the United States?

Yes No

81. 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

- 82. 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?
- **83.** Have you **EVER** voted in violation of any Federal, state, or local constitutional provision, statute, ordinance, or regulation in the United States? Yes No
- 84. Have you EVER renounced U.S. citizenship to avoid being taxed by the United States?

Have you EVER:

85.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?

Part 8. General Eligibility and Inadmissibility Grounds (continued)

85.b. Been relieved or discharged from such training or service on the ground that you are a foreign national?

Yes No

- **85.c.** Been convicted of desertion from the U.S. armed forces? \Box Yes \Box No
- **86.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
- **86.b.** If your answer to **Item Number 86.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, Declaration, 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.

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)

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

Applicant's Declaration and 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)

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)

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

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 Declaration and 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. <u>Preparer's Daytime Telephone Number</u>
- 5. Preparer's Mobile Telephone Number (if any)
- 6. Preparer's Email Address (if any)

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 Declaration and 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)

			A-Num	iber 🕨	• A-		
Par	t 14. Additional Information	5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
within space to cor sheet at the Num	n need extra space to provide any additional information n this application, use the space below. If you need more than what is provided, you may make copies of this page nplete and file with this application or attach a separate of paper. Type or print your name and A-Number (if any) top of each sheet; indicate the Page Number, Part ber , and Item Number to which your answer refers; and nd date each sheet.	5.d.					
	Family Name (Last Name) Given Name						
	(First Name) Middle Name	ſ		()		(
	A-Number (if any) ► A-	6.a.	Page Number	6.D.	Part Number	6.C.	Item Number
3. a.	Page Number 3.b. Part Number 3.c. Item Number	6.d.					
3.d.							
		7.a. 7.d.	Page Number	7.b.	Part Number	7.c.	Item Number
4. a.	Page Number 4.b. Part Number 4.c. Item Number						
4.d.							