

Application to Register Permanent Residence or Adjust Status

Department of Homeland Security

USCIS Form I-485 OMB No. 1615-0023

U.S. Citizenship and Immigration Services Expires 03/31/2027					
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	attorney o	or accred	ited represer	ntative (if any).
Select this box if Form G-28 is (if any) Attorno (if appli				nr Number	Attorney or Accredited Representative USCIS Online Account Number (if any)
NOTE TO ALL APPLICANTS: If you do not completely fill Instructions, U.S. Citizenship and Immigration Services (USCIS Part 1. Information About You (Person applying for lawful permanent residence) Your Current Legal Name (do not provide a nickname)			3.a. 3.b.		tion.
1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name Clients Full Last Name Clients Full First Name Clients Middle Name				Family Name (Last Name) Given Name (First Name) Middle Name	
Other Names You Have Used Since Birth (if Other Information About You					ntion About You
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.			5.	NOTE: In a include any connection v	addition to providing your actual date of birth, other dates of birth you have used in with any legal names or non-legal names in ovided in Part 14. Additional Information .
2.a. Family Name (Last Name) Ask and look a	t clients docume	ents	6.	Sex	Male Female
2.b. Given Name (First Name) to see if other n	ames have been	used	7.	City or to	n of Birth wn of birth

Every page should have the Clients A#			
	A-Number ► A-		
Soc	rial Security Card		
14.	Has the Social Security Administration (SSA) ever officially issued a Social Security card to you? Yes No		
	If you answered "Yes," provide the information requested in Item Number 15.		
15.	Provide your U.S. Social Security Number (SSN). ► Clients SSN #		
16.	Do you want the SSA to issue you a Social Security card? (You must also answer "Yes" to Item Number 17. Consent for Disclosure , to receive a card). Yes No		
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 Social Security Card. Yes No		
Rec	cent Immigration History		
	ride the information for Item Numbers 18 24. if you last red the United States using a passport or travel document.		
18.	Passport Number Used at Last Arrival		
19.	Travel Document Number Used at Last Arrival		
20.	Expiration Date of this Passport or Travel Document (mm/dd/yyyy)		
21.	Country that Issued this Passport or Travel Document		

(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 a qualifying crime (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.

12.f. ZIP Code

Part 1. Information About You (Person applying

Alien Registration Number (A-Number) (if any)

NOTE: If you have **EVER** used other A-Numbers,

include the additional A-Numbers in the space provided

Clients A#

for lawful permanent residence) (continued)

Country of Citizenship or Nationality

in Part 14. Additional Information. 11. USCIS Online Account Number (if any)

8.

9.

10.

Country of Birth

U.S. Mailing Address

12.b. Street Number

12.d. City or Town

12.e. State

and Name

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

12.c. Apt. Ste. Flr.

See birth certificate

See birth certificate

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		

Place of Last Arrival into the United States

23.a. City or Town Look at the NTA

22.

23.b. State

Date of Last Arrival (mm/dd/yyyy)

Nonimmigrant Visa Number from this Passport (if any)

A-Number ► A-			

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

When	I la	st arrived in the United States, I:		
25.a.		Was inspected at a port of entry and admitted as (for example, exchange visitor; visitor, waived through; temporary worker; student):		
25.b.		Was inspected at a port of entry and paroled as (for example, humanitarian parole, Cuban parole):		
25.c.		Came into the United States without admission or parole.		
25.d.		Other:		
If you	wer	e issued a Form I-94 Arrival-Departure Record Number:		
26.a.	Fori	n I-94 Arrival-Departure Record Number		
		>		
26.b.	Exp	iration Date of Authorized Stay Shown on Form I-94		
	(mn	n/dd/yyyy)		
26.c.	Status on Form I-94 (for example, class of admission, or paroled, if paroled)			
27.	What is your current immigration status (if it has changed since your arrival)?			
	Sp	pecial Immigrant Juvenile		
Provionany)	de yo	our name exactly as it appears on your Form I-94 (if		
28.a.		nily Name triangle tr		
28.b.	_	en Name st Name)		
28.c.	Mid	dle Name		

Part 2. Application Type or Filing Category

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

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

1.a.	Lom	:1 1	Lana.
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		·
		Immediate relative of a U.S. citizen, Form I-130
		Other relative of a U.S. citizen or relative of a lawful permanent resident under the family-based preference categories, Form I-130
		Person 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)
		Widow or widower of a U.S. citizen, Form I-360
		VAWA self-petitioner, Form I-360
1.b.	Em	ployment-based
		Alien worker, Form I-140
		Alien entrepreneur, Form I-526
1.c.	Spe	cial Immigrant
		Religious worker, Form I-360
	П	Special immigrant juvenile, Form I-360

Certain international broadcaster, Form I-360

Certain Afghan or Iraqi National, Form I-360 or

Certain G-4 international organization or family member or NATO-6 employee or family member, Form I-360

1.d. Asylee or Refugee

Form DS-157

Asylum status (INA section 208), Form I-589 or Form I-730
Refugee status (INA section 207), Form I-590 o Form I-730

1.e. Human Trafficking Victim or Crime Victim

L	Human trafficking victim (T Nonimmigrant), Form
	I-914 or derivative family member, Form I-914A
Г	Crime victim (U Nonimmigrant), Form I-918.

Crime victim (U Nonimmigrant), Form I-918, derivative family member, Form I-918A, or qualifying family member, Form I-929

	A-Number ► A-					
Info	ormation About Your Immigrant Category					
-	If you are the principal applicant , provide the following information.					
3.	Receipt Number of Underlying Petition (if any)					
	Can be found in the I-360 Approval- MSC					
4.	Priority Date from Underlying Petition (if any)					
	(mm/dd/yyyy) Priority Date					
child	u are a derivative applicant (the spouse or unmarried under 21 years of age of a principal applicant), provide the wing information for the principal applicant .					
Princ	cipal 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 any)					
9.	Priority Date of Principal Applicant's Underlying Petition					
	(if any) (mm/dd/yyyy)					
Par	t 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 .					
Loca	tion of U.S. Embassy or U.S. Consulate					
2.a.	City					
2.b.	Country					

Part 2. Application Type or Filing Category (continued)

3.

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.	

withdrawn)

Decision (for example, approved, refused, denied,

	A-Number ► A-
Part 3. Additional Information About You (continued)	Provide your most recent address outside the United States where you lived for more than one year (if not already listed above).
Address History	9.a. Street Number and Name
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 .	9.b.
Physical Address 1 (current address)	9.f. Province
5.a. Street Number and Name Clients address history from	9.g. Postal Code
5.b. Apt. Ste. Flr. the last 5 years	9.h. Country
5.c. City or Town	Country
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
	Provide your employment history for the last five years,
Dates of Residence	whether inside or outside the United States. Provide the most recent employment first. If you need extra space to complete
6.a. From (mm/dd/yyyy)	this section, use the space provided in Part 14. Additional Information .
6.b. To (mm/dd/yyyy) Present	Employer 1 (current or most recent)
Physical Address 2	11. Name of Employer or Company
7.a. Street Number and Name	Clients employment history for the last 5 years
7.b.	Address of Employer or Company
7.c. City or Town	12.a. Street Number 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	12.f. Province
7.h. Country	
Dates of Residence	12.g. Postal Code
	12.h. Country
8.a. From (mm/dd/yyyy)	13. Your Occupation
8.b. To (mm/dd/yyyy)	

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Part 3. Additional Information About You (continued)	Address of Employer or Company 20.a. Street Number and Name
Dates of Employment	20.b.
14.a. From (mm/dd/yyyy)	20.c. City or Town
14.b. To (mm/dd/yyyy)	20.d. State
Employer 2	20.f. Province
15. Name of Employer or Company	20.g. Postal Code
	20.h. Country
Address of Employer or Company	20.11. Country
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	Part 4. Information About Your Parents
16.h. Country	
	Information About Your Parent 1
17. Your Occupation	Parent 1's Legal Name 1.a. Family Name And the series are (IS A and I)
Data of Fundament	(Last Name) As snown on birth certificate (II Any)
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
	5. City of Town of Birth
	S. Chy of Town of Blittl
	6. Country of Birth

	t 4. Information About Your Parents atinued)	3.	How many times have you been married (including annulled marriages and marriages to the same person)?
7.	Current City or Town of Residence (if living)		
		Inf	ormation About Your Current Marriage
8.	Current Country of Residence (if living)	(inc	cluding if you are legally separated)
		-	ou are currently married, provide the following information at your current spouse.
Info	rmation About Your Parent 2	Curr	ent Spouse's Legal Name
Parer	t 2's Legal Name	4.a.	Family Name (Last Name)
9.a.	Family Name (Last Name) As shown on birth certificate (If Any)	4.b.	
9.b.	Given Name (First Name)	4.c.	Middle Name
9.c.	Middle Name	5.	A-Number (if any)
			► A-
	t 2's Name at Birth (if different than above) Family Name	6.	Current Spouse's Date of Birth (mm/dd/yyyy)
	(Last Name)		
10.b.	Given Name (First Name)	7.	Date of Marriage to Current Spouse (mm/dd/yyyy)
10.c.	Middle Name		
11.	Date of Birth (mm/dd/yyyy)	Curr	ent Spouse's Place of Birth
	Date of Birth (him/dd/yyyy)	8.a.	City or Town
12.	Sex Male Female		
13.	City or Town of Birth	8.b.	State or Province
14.	Country of Birth	8.c.	Country
15.	Current City or Town of Residence (if living)		e of Marriage to Current Spouse
		9.a.	City or Town
16.	Current Country of Residence (if living)		
		9.b.	State or Province
Par	t 5. Information About Your Marital History	9.c.	Country
1.	What is your current marital status?		
	Single, Never Married Married Divorced	10.	Is your current spouse applying with you?
	Widowed Marriage Annulled		Yes No
	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		

A-Number ► A-

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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.	Family Name (Last Name)		
11.b.	Given Name (First Name)		
11.c.	Middle Name		
12.	Prior Spouse's	Date of Birth (mm/dd/	уууу)
13.	Date of Marria	ge to Prior Spouse (mn	n/dd/yyyy)
DI.	63.6	D: 0	
Place	of Marriage to	Prior Spouse	
14.a.	City or Town		
14.b.	State or Provin	ice	
14.c.	Country		
15.	Date Marriage	with Prior Spouse Leg	ally Ended
	(mm/dd/yyyy)		
D1		l 	11 - Г. 1. 1
		ge with Prior Spouse Le	egany Ended
16.a.	City or Town		
16.b.	State or Provin	ice	
16.c.	Country		
	-		

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**.

Child 1

Curr	ent Legal Name
2.a.	Family Name

(Last Name)

2.b.	Given Name (First Name)		
2.c.	Middle Name		
3.	A-Number (if a	any)	
		► A-	
4.	Date of Birth (mm/dd/yyyy)	
5.	Country of Bir	th	

6.

Current Legal Name

7.a. Family Name (Last Name)
7.b. Given Name

Is this child applying with you?

- (First Name)

 7.c. Middle Name
- 8. A-Number (if any)

► A	۱-					

- 9. Date of Birth (mm/dd/yyyy)
- 10. Country of Birth
- 11. Is this child applying with you?

Yes N	o
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Yes

No

	A-Number ► A-
Part 6. Information About Your Children (continued)	Part 8. General Eligibility and Inadmissibility Grounds
Child 3	1. Have you EVER been a member of, involved in, or in
Current Legal Name	any way associated with any organization, association, fund, foundation, party, club, society, or similar group in
12.a. Family Name (Last Name) 12.b. Given Name	the United States or in any other location in the world including any military service? Yes No
(First Name)	If you answered "Yes" to Item Number 1., complete Item
12.c. Middle Name	Numbers 2 13.b. below. If you need extra space to complete this section, use the space provided in Part 14. Additional
13. A-Number (if any)	Information. If you answered "No," but are unsure of your
► A-	answer, provide an explanation of the events and circumstances in the space provided in Part 14. Additional Information .
14. Date of Birth (mm/dd/yyyy)	Organization 1
15. Country of Birth	2. Name of Organization
16. Is this child applying with you?	3.a. City or Town
Part 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	Dates 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)
Native Hawaiian or Other Pacific Islander	
3. Height Feet Inches	Organization 2
4. Weight Pounds Pounds	6. Name of Organization
5. Eye Color (Select only one box)	7.a. City or Town
☐ Black ☐ Blue ☐ Brown	
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

Unknown/Other

White

Sandy

	t 8. General Eligibility and Incunds (continued)	admissibility	20.	Have you EVER had a prior final order of exclusion, deportation, or removal reinstated? Yes No	
Dates	of Membership or Dates of Involvem	ent	21.	Have you EVER held lawful permanent resident status which was later rescinded? Yes No	
	From (mm/dd/yyyy) To (mm/dd/yyyy)		22.	Have you EVER been granted voluntary departure by an immigration officer or an immigration judge but failed to depart within the allotted time? Yes No	
Organ	Name of Organization		23.	Have you EVER applied for any kind of relief or protection from removal, exclusion, or deportation? Yes No	
11.a.	City or Town		24.a.	Have you EVER been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement? Yes No	
	11.b. State or Province 11.c. Country			u answered "Yes" to Item Number 24.a., complete Item bers 24.b 24.c. If you answered "No" to Item Number, skip to Item Number 25.	
12.	Nature of Group			Have you complied with the foreign residence requirement? Yes No Have you been granted a waiver or has Department of	
	of Membership or Dates of Involvem	ent	24. C.	State issued a favorable waiver recommendation letter for you? Yes No	
	From (mm/dd/yyyy) To (mm/dd/yyyy)		Crin	minal Acts and Violations	
think you a an ex	rer Item Numbers 14 86.b. Choose is correct. If you answer "Yes" to any unswer "No," but are unsure of your planation of the events and circumstanded in Part 14. Additional Information Have you EVER been denied admissing States?	questions (or if answer), provide tees in the space on.	quest other enfor have quest Unite "Yes	tem Numbers 25 45., you must answer "Yes" to any tion that applies to you, even if your records were sealed or wise cleared, or even if anyone, including a judge, law rement officer, or attorney, told you that you no longer a record. You must also answer "Yes" to the following tions whether the action or offense occurred here in the ed States or anywhere else in the world. If you answer "to Item Numbers 25 45., use the space provided in 14. Additional Information to provide an explanation	
15.	Have you EVER been denied a visa to Have you EVER worked in the Unite	Yes No	that includes why you were arrested, cited, detained, or where you were arrested, cited, detained, or charged; (date) the event occurred; and the outcome or disposit example, no charges filed, charges dismissed, jail, pro		
16. 17.	Have you EVER worked in the Unite authorization? Have you EVER violated the terms o nonimmigrant status?	Yes No	25.	Have you EVER been arrested, cited, charged, or detained for any reason by any law enforcement official (including but not limited to any U.S. immigration official or any official of the U.S. armed forces or U.S.	
18.	Are you presently or have you EVER exclusion, rescission, or deportation p		26.	Coast Guard)? Yes No Have you EVER committed a crime of any kind (even if	
19.	Have you EVER been issued a final of deportation, or removal?			you were not arrested, cited, charged with, or tried for that crime)? Yes No	

A-Number ► A-

	et 8. General Eligibility and Inadmissibility bunds (continued)	35.	Have you EVER engaged in prostitution or are you coming to the United States to engage in prostitution? Yes No				
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		Have you EVER directly or indirectly procured (or attempted to procure) or imported prostitutes or persons for the purpose of prostitution? Yes No				
	clemency)?	37.	Have you EVER received any proceeds or money from prostitution? Yes No				
	a rehabilitation decree, or other act of clemency, provide documentation of that post-conviction action.	38.	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		bootlegging, or the sale of child pornography, while in the United States? Yes No				
t	arrest, parole, alternative sentencing, drug or alcohol treatment, rehabilitative programs or classes, probation, or community service)? 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				
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? Yes No				
31.	Yes No Have you EVER been convicted of two or more offenses (other than purely political offenses) for which the	42.	Have you EVER trafficked a person into involuntary servitude, peonage, debt bondage, or slavery? Traffickin includes recruiting, harboring, transporting, providing, or obtaining a person for labor or services through the use of				
	combined sentences to confinement were five years or more? Yes No	43.	force, fraud, or coercion. Yes No Have you EVER knowingly aided, abetted, assisted,				
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		conspired, or colluded with others in trafficking person for commercial sex acts or involuntary servitude, peonage, debt bondage, or slavery? Yes Yes				
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	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				
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		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				
	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	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				
	from the illicit activity of your spouse or parent? Yes No		_ 100 _ 100				

	A-Number ► A-
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
46.a. locati	E: If you answered "Yes" to any part of Item Numbers - 50. , explain what you did, including the dates and ion of the circumstances, or what you intend to do in the exprovided in Part 14. Additional Information .
Are y	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
-----	--	----

Part 8. General Eligibility and Inadmissibility
Grounds (continued)
Security and Related

Sec	urity and Related				
Do y	ou intend to:				
46.a.	Engage in any activity that violates or relating to espionage (including spying United States?			age i	
46.b.	Engage in any activity in the United S evades any law prohibiting the export States of goods, technology, or sensiti	fron	n the U	Jnite	d
46.c.	Engage in any activity whose purpose controlling, or overthrowing the U.S. force, violence, or other unlawful mea United States?	Gove	ernme	nt by	
46.d.	Engage in any activity that could enda safety, or security of the United States		the w	elfaı	
		Ш	Yes	Ш	No
46.e.	Engage in any other unlawful activity?		Yes		No
47.	Are you engaged in or, upon your entr States, do you intend to engage in any have potentially serious adverse foreig consequences for the United States?	acti	vity th		
Have	you EVER :				
48.a.	Committed, threatened to commit, attaconspired to commit, incited, endorsed planned, or prepared any of the follow sabotage, kidnapping, political assassi weapon or explosive to harm another substantial damage to property?	d, ad ving: natio	vocate hijac on, or	ed, king, use o	, of a
48.b.	Participated in, or been a member of, organization that did any of the activit Item Number 48.a. ?	ies d			n No
48.c.	Recruited members or asked for mone for a group or organization that did an described in Item Number 48.a. ?				
48.d.	Provided money, a thing of value, servany other assistance or support for any described in Item Number 48.a. ?				

		A-Number ► A-
	t 8. General Eligibility and Inadmissibility bunds (continued)	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
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	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.
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	Public Charge61. Are you subject to the public charge ground of inadmissibility under INA section 212(a)(4)?
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	Yes No 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 space 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)? Yes No	62. What is the size of your household?63. Indicate your annual household income.
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	\$0-27,000 \$27,001-52,000 \$52,001-85,000 \$85,001-141,000 Over \$141,000
	you EVER ordered, incited, called for, committed, assisted, d with, or otherwise participated in any of the following:	64. Identify the total value of your household assets.
58.b.	Acts involving torture or genocide?	\$18,401-136,000 \$136,001-321,400 \$321,401-707,100 Over \$707,100
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	

rt 8. General Eligibility and Inac	dmissibility Groun	ds (continued)		
Identify the total value of your househol			unsecured liabili	ties).
•		\$57,701-186,800		186,800
What is the highest degree or level of so	chool you have complet	ted?		
	ade - no diploma		ma. GED. or alt	ernative credential
1 or more years of college credit, no	· <u> </u>	Associate's degree		or's degree
Master's degree Profess	sional degree (JD, MD,	DMD, etc.)	Doctor	ate degree
List your certifications, licenses, skills of	obtained through work	experience, and ed	ucational certifi	cates.
. Have you ever received Supplemental S	•		•	Samilies
(TANF), or State, Tribal, territorial, or l	ocal, cash benefit progr	c ·		100
"General Assistance" in the State contex	1 0			100
"General Assistance" in the State contex	xt, but which also exist	under other names		en called Tes Tito
	xt, but which also exist	under other names		100
. Have you ever received long-term institution. If your answer to Item Number 68.a. is	ext, but which also exist utionalization at govern a "Yes," list the specific	under other names nment expense?	\$)?	en called Yes No
. Have you ever received long-term instit	ext, but which also exist utionalization at govern a "Yes," list the specific	under other names nment expense? benefit(s) you rec	\$)?	en called Yes No
. Have you ever received long-term instit If your answer to Item Number 68.a. is receipt, and the dollar amount of benefit	wt, but which also exist utionalization at govern s "Yes," list the specific ts received.	under other names nment expense? benefit(s) you rec	s)?	en called Yes No and end dates of each period o
. Have you ever received long-term instit If your answer to Item Number 68.a. is receipt, and the dollar amount of benefit	wt, but which also exist utionalization at govern s "Yes," list the specific ts received.	under other names nment expense? benefit(s) you rec	s)?	en called Yes No and end dates of each period o
. Have you ever received long-term instit If your answer to Item Number 68.a. is receipt, and the dollar amount of benefit	wt, but which also exist utionalization at govern s "Yes," list the specific ts received.	under other names nment expense? benefit(s) you rec	s)?	en called Yes No and end dates of each period o
. Have you ever received long-term instit If your answer to Item Number 68.a. is receipt, and the dollar amount of benefit	wt, but which also exist utionalization at govern s "Yes," list the specific ts received.	under other names nment expense? benefit(s) you rec	s)?	en called Yes No and end dates of each period o
. Have you ever received long-term instit If your answer to Item Number 68.a. is receipt, and the dollar amount of benefit Benefit Received	utionalization at govern s "Yes," list the specific ts received. Start D	under other names nment expense? benefit(s) you rec ate F	ceived, the start	Yes No and end dates of each period o Dollar Amount
. Have you ever received long-term instit If your answer to Item Number 68.a. is receipt, and the dollar amount of benefit Benefit Received	st, but which also exist utionalization at govern s "Yes," list the specific ts received. Start D	under other names nment expense? benefit(s) you rece ate Expense Figure 1.2. Expense 1.2. Expense 2.2. Expense 2.2. Expense 3.2. Expense 4.2. Expe	ceived, the start	Yes No and end dates of each period o Dollar Amount
. Have you ever received long-term instit If your answer to Item Number 68.a. is receipt, and the dollar amount of benefit Benefit Received I. If your answer to Item Number 68.b. is	st, but which also exist utionalization at govern s "Yes," list the specific ts received. Start D	under other names nment expense? benefit(s) you rece ate Expense Figure 1.2. Expense 1.2. Expense 2.2. Expense 2.2. Expense 3.2. Expense 4.2. Expe	ceived, the start	Yes No and end dates of each period o Dollar Amount
. Have you ever received long-term instit If your answer to Item Number 68.a. is receipt, and the dollar amount of benefit Benefit Received I. If your answer to Item Number 68.b. is period of institutionalization, and the received	s "Yes," list the specific ts received. Start D s "Yes," list the name, of ason you were institution	under other names nment expense? be benefit(s) you rece ate E city, and state for e onalized.	ceived, the start	Yes No and end dates of each period o Dollar Amount the start and end dates of each
. Have you ever received long-term instit If your answer to Item Number 68.a. is receipt, and the dollar amount of benefit Benefit Received I. If your answer to Item Number 68.b. is period of institutionalization, and the received	s "Yes," list the specific ts received. Start D s "Yes," list the name, of ason you were institution	under other names nment expense? be benefit(s) you rece ate E city, and state for e onalized.	ceived, the start	Yes No and end dates of each period o Dollar Amount the start and end dates of each
. Have you ever received long-term instit If your answer to Item Number 68.a. is receipt, and the dollar amount of benefit Benefit Received I. If your answer to Item Number 68.b. is period of institutionalization, and the received	s "Yes," list the specific ts received. Start D s "Yes," list the name, of ason you were institution	under other names nment expense? be benefit(s) you rece ate E city, and state for e onalized.	ceived, the start	Yes No and end dates of each period o Dollar Amount the start and end dates of each

			A-Number ► A-				
	et 8. General Eligibility and Inadmissibility bunds (continued)		April 1, 1997, have you been unlawfully present in the d States:				
	gal Entries and Other Immigration Violations	78.a. For more than 180 days but less than a year, a departed the United States?					
	Have you EVER failed or refused to attend or to remain in attendance at any removal proceeding filed against you	78.b.	For one year or more and then departed the United States? Yes No				
69.b.	on or after April 1, 1997? Yes No If your answer to Item Number 69.a. is "Yes," do you believe you had reasonable cause? Yes No	you e admit	E: You were unlawfully present in the United States if ntered the United States without being inspected and ted or inspected and paroled, or if you legally entered the d States but you stayed longer than permitted.				
69.c.	If your answer to Item Number 69.b. is "Yes," attach a written statement explaining why you had reasonable cause.	reente	April 1, 1997, have you EVER reentered or attempted to er the United States without being inspected and admitted roled after:				
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	79.a.	Having been unlawfully present in the United States for more than one year in the aggregate? Yes No				
71.	visa or entry into the United States? Yes No Have you EVER lied about, concealed, or misrepresented	79.b.	Having been deported, excluded, or removed from the United States? Yes No				
/ 1.	any information on an application or petition to obtain a visa, other documentation required for entry into the	Mis	cellaneous Conduct				
	United States, admission to the United States, or any other kind of immigration benefit? Yes No	80.	Do you plan to practice polygamy in the United States? Yes No				
72.	Have you EVER falsely claimed to be a U.S. citizen (in writing or any other way)? Yes No	81.	Are you accompanying another foreign national who requires your protection or guardianship but who is				
73.	Have you EVER been a stowaway on a vessel or aircraft arriving in the United States? Yes No		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)?				
74.	Have you EVER knowingly encouraged, induced, assisted, abetted, or aided any foreign national to enter or		☐ Yes ☐ No				
	to try to enter the United States illegally (alien smuggling)? 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				
75.	Are you under a final order of civil penalty for violating INA section 274C for use of fraudulent documents?		custody of the child?				
D	☐ Yes ☐ No	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				
	noval, Unlawful Presence, or Illegal Reentry er Previous Immigration Violations	01					
76.	Have you EVER been excluded, deported, or removed from the United States or have you ever departed the	84.	Have you EVER renounced U.S. citizenship to avoid being taxed by the United States? Yes No				
	United States on your own after having been ordered	Have	you EVER:				
77.	excluded, deported, or removed from the United States? Yes No Have you EVER entered the United States without being	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 forcing patients?				

☐ Yes ☐ No

foreign national?

inspected and admitted or paroled?

Yes No

	A-Number A-
Part 8. General Eligibility and Inadmissibility Grounds (continued)	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
85.b. Been relieved or discharged from such training or service on the ground that you are a foreign national? Yes No	requesting.)
85.c. Been convicted of desertion from the U.S. armed forces? Yes No 86.a. Have you EVER left or remained outside the United States to avoid or evade training or service in the U.S.	Part 10. Applicant's Statement, Contact Information, Declaration, Certification, and Signature
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	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.
your nationality or immigration status immediately before you left (for example, U.S. citizen or national, lawful	Applicant's Statement
permanent resident, nonimmigrant, parolee, present without admission or parole, or any other status)?	NOTE: Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.
Part 9. Accommodations for Individuals With Disabilities and/or Impairments NOTE: Read the information in the Form I-485 Instructions before completing this part.	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
Are you requesting an accommodation because of your disabilities and/or impairments? Yes No	a language in which I am fluent, and I understood everything.
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	At my request, the preparer named in Part 12. , prepared this application for me based only upon information I provided or authorized.
following accommodation. (If you are requesting a sign-language interpreter, indicate for which language (for example, American Sign Language).):	Applicant's Contact Information 3. Applicant's Daytime Telephone Number
2.b. I am blind or have low vision and request the following accommodation:	4. Applicant's Mobile Telephone Number (if any)
	5. Applicant's Email Address (if any)

A-Number	>	A-					

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.

Inte	erpreter'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)								
_									
Inte	erpreter'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								
Inte	erpreter's Contact Information								
4.	Interpreter's Daytime Telephone Number								
5.	Interpreter's Mobile Telephone Number (if any)								
6.	Interpreter's Email Address (if any)								

	t 11. Interpreter's Contact Information tification, and Signature (continued)		parer's Mailing Address
CCI	tineation, and Signature (continued)	3.a.	Street Number and Name
Inte	erpreter's Certification	3.b.	Apt. Ste. Flr.
I am whice 1.b., every answ she u appli Cert	fluent in English and his the same language specified in Part 10., Item Number and I have read to this applicant in the identified language question and instruction on this application and his or her ter to every question. The applicant informed me that he or understands every instruction, question, and answer on the cation, including the Applicant's Declaration and iffication, and has verified the accuracy of every answer. *Expreter's Signature* Interpreter's Signature (sign in ink)	3.f. 3.g. 3.h.	City or Town State 3.e. ZIP Code Province Postal Code Country Parer's Contact Information Preparer's Daytime Telephone Number
Par Sign	t 12. Contact Information, Declaration, and nature of the Person Preparing this plication, if Other Than the Applicant	5.6.	Preparer's Mobile Telephone Number (if any) Preparer's Email Address (if any)
Prov	ide the following information about the preparer.	Pre	parer's Statement
1.a.	Preparer's Full Name Preparer's Family Name (Last Name) Preparer's Given Name (First Name) Preparer's Business or Organization Name (if any)	7.a. 7.b.	 I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent. I am an attorney or accredited representative and my representation of the applicant in this case
			Appearance as Attorney or Accredited Representative, with this application.

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

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.

иррп	reality provided to life of additionized in	ic to obtain of use.
Pre	parer's Signature	
8.a.	Preparer's Signature (sign in ink)	
8.h.	Date of Signature (mm/dd/yyyy)	
0.0.	Dute of Signature (mini ad 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) Clients Full Last Name Clients Full First Name 6.a. Page Number 6.b. Part Number 6.c. Item Number 1.c. Item Number 6.c. Item Number 1.c. Item Number 6.c. Item Number 1.c. Item Number 1.c. Item Number 6.c. Item Number 1.c.	the
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 (Lients Full Last Name) Clients Full First Name Clients Full First Name	er
(Last Name) 1.b. Given Name (First Name) Clients Full First Name	
(First Name) Clients Full First Name	
1.c. Middle Name Clients Middle Name 6.a. Page Number 6.b. Part Number 6.c. Item Number	
	er
2. A-Number (if any) ► A- Clients A# 6.d.	
3.a. Page Number 3.b. Part Number 3.c. Item Number	
3.d.	
If the client responded "YES" to Page 10, Part 8, Item 23, write the following example: I petitioned for Special Immigrant Juvenile Status (SIJS) and was approved. My approved SIJS petition is the basis for this application to adjust my status and become a legal permanent resident. 7.a. Page Number 7.b. Part Number 7.c. Item Number	ner
Tage Planteer 7100 Plant Planteer 7100 Plant Planteer 7100 Plant Planteer 7100 Plantee	
7.d.	
4.a. Page Number 4.b. Part Number 4.c. Item Number	
4.d.	