

## Instructions

### How Should I Complete This Form?

- Print clearly or type your answers using CAPITAL letters.
- Use black or blue ink.
- If you need extra space to answer any item:
  - Attach a separate sheet of paper (or more sheets if necessary);
  - Write your name, U.S. Social Security number and the words "Form I-864A" on the top right corner of the sheet; and
  - Write the number and subject of each question for which you are providing additional information.

### What Is This Form?

Form I-864A, Contract Between Sponsor and Household Member, is an attachment to Form I-864, Affidavit of Support Under Section 213A of the Immigration and Nationality Act. It is an optional form, completed and signed by two individuals: a sponsor who is completing Form I-864, and a household member who is promising to make his or her income and/or assets available to the sponsor to help support the sponsored immigrant(s). The combined signing of this form constitutes an agreement that the household member is responsible along with the sponsor for the support of the individual(s) named in this form.

A separate Form I-864A must be used for each household member whose income and/or assets are being used by a sponsor to qualify. This form must be submitted simultaneously with Form I-864.

Form I-864A may only be used when a sponsor's income and assets do not meet the income requirements of Form I-864 and the qualifying household member chooses to combine his or her resources with the income and/or assets of a sponsor to meet the requirements. The obligations of the household member under this contract terminate when the obligations of the sponsor under the Affidavit of Support terminate.

For additional information, see section 213A of the Immigration and Nationality Act, and part 213a of title 8 of the Code of Federal Regulations. For more information about Form I-864, or to obtain related forms please contact:

- The USCIS website ([www.uscis.gov](http://www.uscis.gov));
- The National Customer Service Center (NCSC) telephone line at 1-800-375-5283 TTY: (1-800-767-1833); or
- Your local USCIS office by using InfoPass.

### What Is a Sponsor?

A "sponsor" is a person, either the petitioning relative, a relative with a significant ownership interest in the petitioning entity, a substitute in the case of a deceased petitioner, or another person accepting joint and several liability with the sponsor, who completes and files Form I-864, Affidavit of Support under Section 213A of the Act on behalf of an intending immigrant. A sponsor must be an individual and may not be an enterprise, a business, or any other type of organization.

### Who May Be Considered a "Household Member" for Purposes of This Form?

For purposes of this form, a "household member" is:

- A relative who has the same principal residence as the sponsor and is related to the sponsor as a spouse, adult child, parent, or sibling;
- A relative or other person whom the sponsor has lawfully claimed as a dependent on the sponsor's most recent Federal income tax return even if that person does not live at the same residence as the sponsor;
- The intending immigrant, in certain circumstances. (See "How Can the Intending Immigrant Be Considered a Household Member"?)

### How Can the Intending Immigrant Be Considered a Household Member?

Listed below are two ways that the intending immigrant may be considered to be a household member for the purposes of pooling income with the sponsor to meet the Affidavit of Support requirements:

- The intending immigrant has the same principal residence as the sponsor and the intending immigrant can establish that his or her income will continue from the same source, even after acquisition of permanent residence.
- The intending immigrant is the sponsor's spouse and the intending immigrant can show that his or her income will continue from the same source after acquisition of permanent residence.

### Why Does a Household Member Complete This Form?

A household member completes this form if the household member's income and/or assets will be used to demonstrate the sponsor's ability to meet the income requirements and to maintain the sponsored immigrant at an annual income at the level specified in section 213A(f)(1)(E) or 213A(f)(3) of the Act.

## If the Intending Immigrant Is a Household Member, Must He or She Complete This Form?

If you are the intending immigrant and the sponsor is including your income on Form I-864 to meet the eligibility requirements, you need to complete this form only if you have accompanying dependents. If you are the intending immigrant and the sponsor is including only your assets on Form I-864, you do not need to complete this form, even if you have accompanying dependents.

### Step-by-Step Instructions.

This form is divided into three parts. The sponsor completes Part 2 of this form and gives it to the household member. The household member completes Parts 1 and 3 of this form. The information below gives detailed information on completing this form. The Privacy Act Notice and information on penalties for misrepresentation or fraud are included on the instructions to Form I-864.

### Part 1. Information on the Household Member.

#### 8. Household Member's Relationship to the Sponsor.

If you, the household member, are also the sponsored immigrant, check box (a) or (b) as applicable.

If you check box (a) (married to the sponsor), you do not have to reside with the sponsor, but you must provide proof that your income will continue from the same source after immigration. If you check box (b) (not married to the sponsor), you must provide proof that you currently have the same principal residence as the sponsor and that your income will continue from the same source after immigration.

If you are the household member completing this form, but are not the intending immigrant, check box (c), and check the box below that describes your relationship to the sponsor. If you check "dependent," you must be listed as a dependent on the sponsor's most recent Federal tax return. You do not have to provide proof that you have the same principal residence as the sponsor. If you check any other relative except for spouse, you must provide proof of the relationship and that you have the same principal residence as the sponsor.

#### 9. Household Member's Employment.

Check all boxes that apply to you. A sponsor may not rely on a household member's income from illegal activities, such as proceeds from illegal gambling or drug sales, to meet the income requirements, even if the household member paid taxes on that income.

#### 10. Current Individual Annual Income.

Enter your current individual earned or retirement annual income that you are using to meet the requirements of this form and indicate the total on this line.

You may include evidence supporting your claim about your expected income for the current year if you believe that submitting this evidence will help you establish ability to maintain sufficient income. **You are not required to submit this evidence, however, unless specifically instructed to do so by a Government official.** For example, you may include a recent letter from your employer, showing your employer's address and telephone number, and indicating your annual salary. You may also provide pay stub(s) showing your income for the previous six months. If your claimed income includes alimony, child support, dividend or interest income, or income from any other source, you may also include evidence of ability to maintain that income.

#### 11. Household Member's Federal Income Tax Information.

You must provide either an IRS transcript or a photocopy from your own records of your Federal individual income tax return for the most recent tax year. If you believe additional returns may help you to establish your ability to maintain sufficient income, you may submit transcripts or photocopies of your Federal individual income tax returns for the three most recent years.

You are not required to have the IRS certify the transcript or photocopy unless specifically instructed to do so by a Government official; a plain transcript or photocopy is acceptable. Telefile tax records are not acceptable proof of filing.

Do not submit copies of your State income tax returns. **Do not** submit any tax returns that you filed with any foreign government unless you are claiming that you were not required to file a Federal tax return with the United States government and you wish to rely on the foreign return solely to establish the amount of your income that was not subject to tax in the United States.

If you provide a photocopy of your tax return(s), you must include a copy of each and every Form W-2 and Form 1099 that relates to your return(s). Do not include copies of these Forms if you provide an IRS transcript of your return(s) rather than a photocopy.

If you checked box 9(b) (self-employed), you should have completed one of the following forms with your Federal income tax return: Schedule C (Profit or Loss from Business), Schedule D (Capital Gains), Schedule E (Supplemental Income or Loss) or Schedule F (Profit or Loss from Farming). You must include each and every Form 1040 Schedule, if any, that you filed with your Federal tax return.

If you were required to file a Federal income tax return during any of the previous three tax years but did not do so, you must file any and all late returns with IRS and attach an IRS-generated tax return transcript documenting your late filing before submitting the Form I-864A. If you were not required to file a Federal income tax return under U.S. tax law because your income was too low, attach a written explanation

If you were not required to file a Federal income tax return under U.S. tax law for any other reason, attach a written explanation including evidence of the exemption and how you qualified for it. Residence outside of the United States does not exempt U.S. citizens or lawful permanent residents from filing a U.S. Federal income tax return. See "Filing Requirements" in the IRS Form 1040 Filing Instructions to determine whether you were required to file.

For purposes of this form, the line for gross (total) income on IRS Forms 1040 and 1040A will be considered when determining income. For persons filing IRS Form 1040 EZ, the line for adjusted gross income will be considered.

**Obtaining Tax Transcripts.** You may use Internal Revenue Service (IRS) Form 4506-T to request tax transcripts from the IRS. Complete IRS Form 4506-T with the ending date for each of your three most recent tax years listed on line 9. Follow all instructions for completing and filing Form 4506-T with the IRS.

## 12. Assets.

Complete this item only if the sponsor is using the value of your assets to help meet the requirements of the affidavit of support. If you are using only your income to help the sponsor meet the requirements, do not complete this item.

If you are the intending immigrant and have no accompanying dependents, then do not list your assets on this form. Instead, your assets must be listed on item 24 of Form I-864.

Only assets that can be converted into cash within 1 year and without considerable hardship or financial loss to the owner may be included. The owner of the asset must include a description of the asset, proof of ownership, and the basis for the owner's claim of its net cash value.

You may include the net value of your home as an asset. The net value of the home is the appraised value of the home, minus the sum of any and all loans secured by a mortgage, trust deed, or other lien on the home.

If you wish to include the net value of your home, this, you must include documentation demonstrating that you own it, a recent appraisal by a licensed appraiser, and evidence of the amount of any and all loans secured by a mortgage, trust deed, or other lien on the home. You may not include the net value an automobile unless you show that you have more than one automobile, and at least one automobile is not included as an asset.

## Part 2. Sponsor's Promise.

If the sponsor you are promising to make your income available to is sponsoring the the principal intending immigrant (the sponsor should have "Yes" as his or her answer to item number 8 of his or her Form I-864), you should list the intending immigrant on line "a" of Item 13 and then list on lines "b" through "f" any spouse and any and all children that appear on lines 9a through 9e of the sponsor's Form I-864.

If the sponsor you are promising to make your income available to is not sponsoring the intending immigrant (this should be true only in cases with two joint sponsors, with "No" checked on item 8 of the sponsor's Form I-864), then do not list the intending immigrant on line "a" of Item 13 on this form. Instead, list on lines "a" through "f" any spouse and any and children that appear on lines 9a through 9e of the sponsor's Form I-864.

## Part 3. Household Member's Promise.

Read the household member's promise carefully, print your name, and then sign and date the form. **If you do not print your name on line 15 and sign and date the form on line 16, the intending immigrant cannot be issued a visa or be granted adjustment of status based upon the income and/or assets listed on this form.**

## Other Information.

### Penalties.

The Government may pursue verification of any information provided on or in support of this form, including employment, income, or assets with the employer, financial or other institutions, the Internal Revenue Service, or the Social Security Administration. If you include in this form any information that you know to be false, you may be liable for criminal prosecution under the laws of the United States.

### Privacy Act Notice.

Authority for the collection of the information requested on this form is contained in 8 U.S.C. 1182a(4), 1183a, 1184(a), and 1258.

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The information will be used principally by USCIS, a Consular Officer, or an immigration judge to whom it is furnished, to accompany a sponsor's Form I-864, Affidavit of Support, which supports an alien's application for benefits under the Immigration and Nationality Act, specifically the assertion that he or she has adequate means of financial support and will not become a public charge.

If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, write to U.S. Citizenship and Immigration Services, Regulatory Management Division, 111 Massachusetts Avenue N.W., Washington, D.C. 20529; OMB No. 1615-0075. **Do not mail your completed form to this address.**

Submission of the information is voluntary. Failure to provide the information may result in denial of the application for an immigrant visa or adjustment of status.

The information may as a matter of routine use be disclosed to other Federal, State and local agencies providing means-tested public benefits for use in civil action against the sponsor for breach of contract. Social Security numbers may be verified with the Social Security Administration. It may also be disclosed as a matter of routine use to other Federal, State, local, and foreign law enforcement and regulatory agencies to enable these entities to carry out their law enforcement responsibilities.

### **USCIS Forms and Information.**

To order USCIS forms, call our toll-free forms line at **1-800-870-3676**. You can also obtain forms and information on immigration laws, regulations and procedures by telephoning our National Customer Service Center at **1-800-375-5283** or visiting our internet website at **[www.uscis.gov](http://www.uscis.gov)**.

### **Use InfoPass for Appointments.**

As an alternative to waiting in line for assistance at your local USCIS office, you can now schedule an appointment through our internet-based system, **InfoPass**. To access the system, visit our website at **[www.uscis.gov](http://www.uscis.gov)**. Use the **InfoPass** appointment scheduler and follow the screen prompts to set up your appointment. **InfoPass** generates an electronic appointment notice that appears on the screen. Print the notice and take it with you to your appointment. The notice gives the time and date of your appointment, along with the address of the USCIS office.

### **Reporting Burden**

A person is not required to respond to a collection of information unless it displays a currently valid OMB control number.

We try to create forms and instructions that are accurate, can be easily understood, and which impose the least burden on you to provide us with information. Often this is difficult because some immigration laws are very complex.

The estimated average time to complete and file this form is as follows: (1) 20 minutes to learn about the law and form; (2) 55 minutes to complete the form; and (3) 30 minutes to assemble and file the form; for a total estimated average of 1 hour and 45 minutes per form.

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

## I-864A, Contract Between Sponsor and Household Member

<b>Part 1. Information on the Household Member. (You.)</b>		<b>For Government Use Only</b>						
<b>1. Name</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 5px;">Last Name</td> </tr> <tr> <td style="width: 50%; padding: 5px;">First Name</td> <td style="padding: 5px;">Middle Name</td> </tr> </table>	Last Name		First Name	Middle Name	<p><b>This I-864A relates to a household member who:</b></p> <p><input type="checkbox"/> is the intending immigrant.</p> <p><input type="checkbox"/> is not the intending immigrant.</p> <p>_____ Reviewer</p> <p>_____ Location</p> <p>_____ Date (mm/dd/yyyy)</p>		
Last Name								
First Name	Middle Name							
<b>2. Mailing Address</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 5px;">Street Number and Name <i>(include apartment number)</i></td> </tr> <tr> <td style="width: 50%; padding: 5px;">City</td> <td style="padding: 5px;">State or Province</td> </tr> <tr> <td style="padding: 5px;">Country</td> <td style="padding: 5px;">Zip/Postal Code</td> </tr> </table>	Street Number and Name <i>(include apartment number)</i>		City	State or Province		Country	Zip/Postal Code
Street Number and Name <i>(include apartment number)</i>								
City	State or Province							
Country	Zip/Postal Code							
<b>3. Place of Residence</b> <i>(if different from mailing address)</i>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 5px;">Street Number and Name <i>(include apartment number)</i></td> </tr> <tr> <td style="width: 50%; padding: 5px;">City</td> <td style="padding: 5px;">State or Province</td> </tr> <tr> <td style="padding: 5px;">Country</td> <td style="padding: 5px;">Zip/Postal Code</td> </tr> </table>	Street Number and Name <i>(include apartment number)</i>		City	State or Province	Country	Zip/Postal Code	
Street Number and Name <i>(include apartment number)</i>								
City	State or Province							
Country	Zip/Postal Code							
<b>4. Telephone Number</b>	<i>(Include area code or country and city codes)</i>							
<b>5. Date of Birth</b>	<i>(mm/dd/yyyy)</i>							
<b>6. Place of Birth</b>	<table style="width: 100%; border: none;"> <tr> <td style="width: 33%; border: none;">City</td> <td style="width: 33%; border: none;">State/Province</td> <td style="width: 33%; border: none;">Country</td> </tr> </table>	City	State/Province	Country				
City	State/Province	Country						
<b>7. U.S. Social Security Number</b> <i>(if any)</i>								
<b>8. Relationship to Sponsor</b> (Check either a, b or c)								
<p><b>a.</b> <input type="checkbox"/> I am the intending immigrant and also the sponsor's spouse.</p> <p><b>b.</b> <input type="checkbox"/> I am the intending immigrant and also a member of the sponsor's household.</p> <p><b>c.</b> <input type="checkbox"/> I am not the intending immigrant. I am the sponsor's household member. I am related to the sponsor as his/her.</p> <p style="margin-left: 40px;"><input type="checkbox"/> Spouse</p> <p style="margin-left: 40px;"><input type="checkbox"/> Son or daughter <i>(at least 18 years old)</i></p> <p style="margin-left: 40px;"><input type="checkbox"/> Parent</p> <p style="margin-left: 40px;"><input type="checkbox"/> Brother or sister</p> <p style="margin-left: 40px;"><input type="checkbox"/> Other dependent (specify)</p>								

**9. I am currently:**

- a.  Employed as a/an \_\_\_\_\_.  
 Name of Employer # 1 (if applicable) \_\_\_\_\_.  
 Name of Employer #2 (if applicable) \_\_\_\_\_.
- b.  Self-employed as a/an \_\_\_\_\_.
- c.  Retired from \_\_\_\_\_ since \_\_\_\_\_.  
 (Company Name) (mm/dd/yyyy)
- d.  Unemployed since \_\_\_\_\_.  
 (mm/dd/yyyy)

**For Government  
Use Only**

**10. My current individual annual income is:** \$ \_\_\_\_\_.

**11. Federal income tax information.**

I have filed a Federal tax return for each of the three most recent tax years. I have attached the required photocopy or transcript of my Federal tax return for only the most recent tax year.

My total income (adjusted gross income on IRS Form 1040EZ) as reported on my Federal tax returns for the most recent three years was:

Tax Year	Total Income
_____ (most recent)	\$ _____
_____ (2nd most recent)	\$ _____
_____ (3rd most recent)	\$ _____

(Optional) I have attached photocopies or transcripts of my Federal tax returns for my second and third most recent tax years.

**12. My assets (complete only if necessary)**

- a. Enter the balance of all cash, savings, and checking accounts. \$ \_\_\_\_\_.
- b. Enter the net cash value of real-estate holdings. (Net means assessed value minus mortgage debt.) \$ \_\_\_\_\_.
- c. Enter the cash value of all stocks, bonds, certificates of deposit, and other assets not listed on line a or b. \$ \_\_\_\_\_.
- d. Add together Lines a, b, and c and enter the number here. \$ \_\_\_\_\_.

**Part 2. Sponsor's Promise.**

**For Government  
Use Only**

13. I, **THE SPONSOR**, \_\_\_\_\_  
*(Print Name)*

in consideration of the household member's promise to support the following intending immigrant(s) and to be jointly and severally liable for any obligations I incur under the affidavit of support, promise to complete and file an affidavit of support on behalf of the following \_\_\_\_\_ named intending immigrant(s) (see Step-by-Step instructions).  
*(Indicate Number)*

Name	Date of Birth <i>(mm/dd/yyyy)</i>	A-number <i>(if any)</i>	U.S. Social Security Number <i>(if any)</i>
a.			
b.			
c.			
d.			
e.			

14. \_\_\_\_\_  
*(Sponsor's Signature)* \_\_\_\_\_ *(Date--mm/dd/yyyy)*

**Part 3. Household Member's Promise.**

15. I, **THE HOUSEHOLD MEMBER**, \_\_\_\_\_  
*(Print Name)*

in consideration of the sponsor's promise to complete and file an affidavit of support on behalf of the above \_\_\_\_\_ named intending immigrant(s):  
*(Number from line 13)*

- a. Promise to provide any and all financial support necessary to assist the sponsor in maintaining the sponsored immigrant(s) at or above the minimum income provided for in section 213A(a)(1)(A) of the Act (not less than 125 percent of the Federal Poverty Guidelines) during the period in which the affidavit of support is enforceable;
- b. Agree to be jointly and severally liable for payment of any and all obligations owed by the sponsor under the affidavit of support to the sponsored immigrant(s), to any agency of the Federal Government, to any agency of a State or local government, or to any other private entity that provides means-tested public benefit;
- c. Certify under penalty under the laws of the United States that all the information provided on this form is true and correct to the best of my knowledge and belief and that the Federal income tax returns submitted in support of the contract are true copies or unaltered tax transcripts filed with the Internal Revenue Service.
- d. **Consideration where the household member is also the sponsored immigrant:** I understand that if I am the sponsored immigrant and a member of the sponsor's household that this promise relates only to my promise to be jointly and severally liable for any obligation owed by the sponsor under the affidavit of support to any of my dependents, to any agency of the Federal Government, to any agency of a State or local government, and to provide any and all financial support necessary to assist the sponsor in maintaining any of my dependents at or above the minimum income provided for in section 213A(s)(1)(A) of the Act (not less than 125 percent of the Federal poverty line) during the period which the affidavit of support is enforceable.
- e. I authorize the Social Security Administration to release information about me in its records to the Department of State and U.S. Citizenship and Immigration Services.

16. \_\_\_\_\_  
*(Household Member's Signature)* \_\_\_\_\_ *(Date--mm/dd/yyyy)*