

**Table of Changes for the “Form I-129S”**  
**OMB No. 1615-0010**  
**October 15, 2010**

| <b>Location</b>   | <b>Current Form I-129S</b>   | <b>Changes or Description</b>  |
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| <p>Page 1</p> <p>Add new part 1a. Data collection to the bottom of “Part 1. Information About Employer”</p> | <p><b>Part 1. Information About Employer</b><br/>           *****</p> <p>City or Town<br/>           [Text box]</p> <p>State or Province<br/>           [Text box]</p> <p>Country<br/>           [Text box]</p> <p>Zip/Postal Code<br/>           [Text box]</p> <p>*****</p>  | <p><b>Part 1. Information About Employer</b><br/>           *****</p> <p>City or Town<br/>           [Text box]</p> <p>State or Province<br/>           [Text box]</p> <p>Country<br/>           [Text box]</p> <p>Zip/Postal Code<br/>           [Text box]</p> <p><b>Part 1A. Data Collection</b></p> <p>Does the petitioner employ 50 or more individuals in the U.S.?<br/> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, are more than 50% of those employees in H-1B or L nonimmigrant status?<br/> <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>*****</p> |
| <p>Page 3</p> <p>Delete one word from signature block.</p>  | <p><b>Part 5. Signature</b> <i>Read the information on penalties in the instructions before completing this section.</i></p> <p>*****</p> <p>I authorize the release of any information from my records, or from the petitioning organizations records that the U.S. Citizenship and Immigration Services needs to</p> | <p><b>Part 5. Signature</b> <i>Read the information on penalties in the instructions before completing this section.</i></p> <p>*****</p> <p>I authorize the release of any information from my records, or from the petitioning organizations records that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit</p>   |

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|--|--|----------------------------|
|  | determine eligibility for the benefit being sought.<br><br>***** | being sought.<br><br>***** |
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