**TABLE OF CHANGES – FORM**

**Form** **I-526, Immigrant Petition by Alien Entrepreneur**

**OMB Number: 1615-0026**

**12/14/2016**

|  |
| --- |
| **Reason for Revision:** EB-5Notice of Proposed Rulemaking |

|  |  |  |
| --- | --- | --- |
| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Page 1,** **Part 1. Information About You** | **START HERE- Type or print in black ink.****Part 1. Information About You**Family NameGiven NameMiddle NameAddress- In Care of Name, if applicableStreet Number and NameApt. NumberCityState or ProvinceCountryZip/Postal CodeDate of Birth (*mm/dd/yyyy*)Country of BirthSocial Security Number (if any)A-Number (if any)**If you are in the United States, provide the following information:**Date of Arrival *(mm/dd/yyyy)*I-94 NumberPassport NumberTravel Document NumberExpiration Date for Passport or Travel DocumentCountry of Issuance for Passport or Travel DocumentCurrent Nonimmigrant StatusDate Current Status Expires *(mm/dd/yyyy)*Daytime Telephone Number (with Area Code) | **[Page 1]****[No Change]** |
| **Page 1,****Part 2. Application Type *(Check one)*** | 1. \_\_This petition is based on an investment in a commercial enterprise in a targeted employment area for which the required amount of capital invested has been adjusted downward
2. \_\_This petition is based on an investment in a commercial enterprise in an area for which the required amount of capital invested has been adjusted upward.
3. \_\_This petition is based on an investment in a commercial enterprise that is not in either a targeted area or in an upward adjustment area.
 | **[Page 1]****[No Change]** |
| **Pages 1-2,****Part 3., Information About Your Investment** | **[Page 1]**Name of commercial enterprise in which funds are invested ***(Required Field - Do Not Leave Blank)***Street AddressPhone Number with Area CodeBusiness organized as (corporation, partnership, etc.)**[Page 2]** Kind of business (e.g. furniture manufacturer)Date established (mm/dd/yyyy)IRS Tax #Date of your initial investment (mm/dd/yyyy)  Amount of your initial investmentYour total capital investment in the enterprise to datePercentage of the enterprise you own\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_If you are not the sole investor in the new commercial enterprise, list on separate paper the names of all other parties (natural and non- natural) who hold a percentage share of ownership of the new enterprise and indicate whether any of these parties is seeking classification as an alien entrepreneur. Include the name, percentage of ownership, and whether or not the person is seeking classification under section 203(b)(5). **NOTE:** A "natural" party would be an individual person, and a "non-natural" party would be an entity such as a corporation, consortium, investment group, partnership, etc.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_If you indicated in **Part 2** that the enterprise is in a targeted employment area or in an upward adjustment area, name the county and State.CountyState | **[Page 1]****[No Change]**Kind of business (e.g., furniture manufacturer)**[No Change]** |
| **Page 2,****Part 4., Additional Information About the Enterprise** | **Type of Enterprise (check one)**\_\_New commercial enterprise resulting from the creation of a new business. \_\_New commercial enterprise resulting from the purchase of an existing business. \_\_New commercial enterprise resulting from a capital investment in an existing business.**Composition of the Petitioner’s Investment**Total amount in U.S. bank accountTotal value of all assets purchased for use in the enterpriseTotal value of all property transferred from abroad to the new enterpriseTotal of all debt financingTotal stock purchasesOther (explain on separate paper)**Total**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Income:**When you made the investmentGross NetNow Gross Net**Net worth:**When you made the investment Gross Now | **[Page 2]****[No Change]** |
| **Page 3,****Part 5. Employment Creation Information** | **Number of full-time employees in the enterprise in U.S.** (excluding you, your spouse, sons, and daughters)When you made your initial investment? Now DifferenceHow many of these new jobs were created by your investment?How many additional new jobs will be created by your additional investment?What is your position, office, or title with the new commercial enterprise?Briefly describe your duties, activities, and responsibilities.What is your salary? $\_\_\_\_\_\_\_\_\_\_\_What is the cost of your benefits? $ | **[Page 3]****Number of full-time employees in the enterprise in the United States** (excluding you, your spouse, sons, and daughters)**[No Change]** |
| **Page 3,****Part 6. Processing Information** | **Check One:**\_\_The person named in **Part 1** is now in the United States, and an application to adjust status to permanent resident will be filed if this petition is approved.\_\_If the petition is approved and the person named in **Part 1** wishes to apply for an immigrant visa abroad, complete the following for that person:Country of nationalityCountry of current residence or, if now in the United States, last permanent residence abroad:If you provided a United States address in **Part 1**, print the person's foreign address:If the person's native alphabet is other than Roman letters, write the foreign address in the native alphabet:Are you in deportation or removal proceedings? Yes (Explain on separate paper) NoHave you ever worked in the United States without permission? Yes (Explain on separate paper) No | **[Page 3]****[No Change]** |
| **Page 3,****Part 7. Signature** *Read the information on penalties in the instructions before completing this section.* | I certify, under penalty of perjury under the laws of the United States of America, that this petition and the evidence submitted with it, is all true and correct. I authorize the release of any information from my records that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking.**Signature**DateMobile Phone NumberE-Mail Address**NOTE:** *If you do not completely fill out this form or fail to submit the required documents listed in the instructions, you may not be found eligible for the immigration benefit you are seeking and this petition may be denied.* | **[Page\_3]****[No Change]** |
| **Page 3,****Part 8. Signature of the Person Preparing Form, If Other Than Above (Sign below)** | I declare that I prepared this application at the request of the above person, and it is based on all information of which I have knowledge.**Signature**Print Your NameDateFirm NameDaytime phone # with area codeAddress | **[Page 3]****[No Change]** |