

TABLE OF CHANGES – FORM
Form I-829, Petition by Entrepreneur to Remove Conditions on Permanent Resident Status
OMB Number: 1615-0045
4/14/2017

Reason for Revision: Information collection revision, to include standard language updates.

Current Page Number and Section	Current Text	Proposed Text
<p>Page 1, To be completed by an attorney or accredited representative (if any).</p>	<p>[page 1]</p> <p>To be completed by an attorney or accredited representative (if any).</p> <p><input type="checkbox"/> Select this box if Form G-28 is attached to represent the petitioner.</p> <p>Attorney State Bar Number (if applicable)</p> <p>Attorney or Accredited Representative USCIS ELIS Account Number (if any)</p> <p>START HERE - Type or print legibly in black ink.</p>	<p>[page 1]</p> <p>To be completed by an attorney or accredited representative (if any).</p> <p><input type="checkbox"/> Select this box if Form G-28 is attached.</p> <p>Attorney State Bar Number (if applicable)</p> <p>Attorney or Accredited Representative USCIS Online Account Number (if any)</p> <p>START HERE - Type or print in black ink.</p>
<p>Page 1, Part 1. Information About Regional Center</p>	<p>[page 1]</p> <p>Part 1. Information About Regional Center</p> <p>1. Was the investment by the entrepreneur associated with an approved regional center? Yes/No</p> <p>If you answered “Yes” to Item Number 1., please complete Item Numbers 2.a. - 2.c.</p> <p>2.a. Name of Regional Center</p> <p>2.b. Regional Center Identification Number</p> <p>2.c. Receipt number for the approved Form I-924, Application For Regional Center Under the Immigrant Investor Program, upon which the related Form I-526, Immigrant Petition by Alien Entrepreneur, was based</p> <p>[moved up from Part 2.]</p>	<p>[page 1]</p> <p>Part 1. Basis for Petition</p> <p>1. Is the investment associated with a Regional Center? Yes/No</p> <p>If you answered “Yes” to Item Number 1., complete Item Numbers 2.a. and 2.b.</p> <p>2.a. What is the name of the Regional Center?</p> <p>2.b. Regional Center Identification Number</p>

		<p>3.a. What is the name of the New Commercial Enterprise (NCE)?</p> <p>3.b. NCE Identification Number Select only one box</p> <p>4. <input type="checkbox"/> I am a conditional permanent resident based on my investment in a commercial enterprise.</p> <p>5. <input type="checkbox"/> I am a conditional permanent resident who is the spouse, former spouse, or child of an entrepreneur, and I am filing separately from the entrepreneur's Form I-829.</p> <p>6. <input type="checkbox"/> I am a conditional permanent resident spouse or child of an entrepreneur who has died.</p>
<p>Page 1, Part 2. Basis for Petition</p>	<p>[page 1]</p> <p>Part 2. Basis for Petition</p> <p>Select only one box.</p> <p>1. <input type="checkbox"/> I am a conditional permanent resident based on my investment in a commercial enterprise.</p> <p>2. <input type="checkbox"/> I am a conditional permanent resident who is the spouse, former spouse, or child of an entrepreneur, and I am filing separately from the entrepreneur's Form I-829.</p> <p>3. <input type="checkbox"/> I am a conditional permanent resident spouse or child of an entrepreneur who has died.</p> <p>[moved up from Part 3.]</p>	<p>[page 1]</p> <p>Part 2. Information About You</p> <p>1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name</p> <p>2. Alien Registration Number (A-Number) (if any)</p> <p>3. USCIS Online Account Number (if any)</p> <p>4. U.S. Social Security Number (if any)</p> <p>5. Date of Birth (mm/dd/yyyy)</p> <p>6. Gender</p> <p>7. Country of Birth</p> <p>8. Country of Citizenship or Nationality</p>

9. Date of Admission as a Conditional Permanent Resident

10. Form I-526 Receipt Number on Which This Petition is Based

[page 2]

11. Any additional Form I-526 or Form I-829 Receipt Numbers for other petitions filed by entrepreneur

Other Names You Have Used

List all other names you have ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information.**

12.a. Family Name (Last Name)

12.b. Given Name (First Name)

12.c. Middle Name

13.a. Family Name (Last Name)

13.b. Given Name (First Name)

13.c. Middle Name

Your U.S. Mailing Address

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

14.b. Street Number and Name

14.c. Apt. Ste. Flr.

14.d. City or Town

14.e. State

14.f. ZIP Code

15. Is your mailing address the same as your physical address? Yes/No

If you answered “No” to **Item Number 15.**, you **MUST** provide your current physical address in the **Item Numbers 16.a. - 16.h.** If you need extra space to complete this section, use the space provided in **Part 12. Additional Information.**

Physical Address

Provide your physical addresses for the last five years. Provide you present address first. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information.**

16.a. Street Number and Name

16.b. Apt. Ste. Flr.

16.c. City or Town

16.d. State

16.e. ZIP Code

		<p>16.f. Province 16.g. Postal Code 16.h. Country</p> <p>Criminal History</p> <p>17. Since becoming a conditional permanent resident, have you EVER been arrested, cited, charged, indicted, convicted, fined, or imprisoned for violating any law or ordinance (excluding minor traffic violations)? Yes/No</p> <p>18. Since becoming a conditional permanent resident, have you EVER committed any crime for which you were not arrested? Yes/No</p> <p>If you answered “Yes” to Item Number 17., you must provide certified court dispositions, arrest reports, statements of charges, indictment information, or any other charging documents that were issued. If you answered “Yes” to Item Number 18., provide the date and location (town or city/state or province/country) of the events and provide an explanation in the space provided in Part 12. Additional Information.</p>
<p>Page 1, Part 3. Information About You</p>	<p>[page 1]</p> <p>Part 3. Information About You</p> <p>1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name</p> <p>2. Alien Registration Number (A-Number) (if any)</p> <p>3. USCIS ELIS Account Number (if any)</p> <p>4. U.S. Social Security Number (if any)</p> <p>5. Form I-526 Receipt Number on which this petition is based</p> <p>Other Names You Have Used (including maiden name, nicknames, and aliases, if any)</p> <p>6.a. Family Name (Last Name) 6.b. Given Name (First Name) 6.c. Middle Name</p> <p>7.a. Family Name (Last Name) 7.b. Given Name (First Name) 7.c. Middle Name</p> <p>Your U.S. Mailing Address</p> <p>8.a. In Care Of Name (if any) 8.b. Street Number and Name 8.c. Apt. Ste. Flr.</p>	

8.d. City or Town

8.e. State

8.f. ZIP Code

9. Is your mailing address the same as your physical address? Yes/No

If your mailing address and the address where you currently live (physical address) are **not** the same, you **MUST** provide your current physical address in the **Item Numbers 10.a. - 10.h.**

Your Physical Address

10.a. Street Number and Name

10.b. Apt. Ste. Flr.

10.c. City or Town

10.d. State

10.e. ZIP Code

10.f. Province

10.g. Postal Code

10.h. Country

Other Information About You

11. Date of Birth (mm/dd/yyyy)

12. Gender

13. Country of Birth

14. Country of Citizenship or Nationality

Criminal History

15. Since becoming a conditional permanent resident, have you **EVER** been arrested, cited, charged, indicted, convicted, fined, or imprisoned for violating any law or ordinance (excluding minor traffic violations)? Yes/No

16. Since becoming a conditional permanent resident, have you **EVER** committed any crime for which you were not arrested? Yes/No

If you answered “Yes” to **Item Number 15.**, you must provide certified court dispositions, arrest reports, statements of charges, indictment information, or any other charging documents that were issued. If you answered “Yes” to **Item Number 16.**, provide the date and location (town or city/state or province/country) of the events and provide an explanation in **Part 11. Additional Information.**

[moved up from **Part 4.**]

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Part 3. Information About Your Current or Former Conditional Permanent Resident Spouse

NOTE: If you have both a current spouse and a former conditional permanent resident spouse, use the space provided in **Part 12. Additional Information** to provide this same information about your current spouse or former conditional permanent resident spouse who you did not already include in **Part 3.** below.

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

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2. Gender

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

4. USCIS Online Account Number (if any)

5. Date of Birth (mm/dd/yyyy)

Other Names Used

List all other names your current spouse or former conditional permanent resident spouse has ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information.**

6.a. Family Name (Last Name)

6.b. Given Name (First Name)

6.c. Middle Name

7.a. Family Name (Last Name)

7.b. Given Name (First Name)

7.c. Middle Name

Physical Address

Provide your current spouse or former conditional permanent resident spouse's physical addresses for the last five years. Provide the present address first. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information.**

8.a. Street Number and Name

8.b. Apt. Ste. Flr.

8.c. City or Town

8.d. State

8.e. ZIP Code

8.f. Province

8.g. Postal Code

8.h. Country

Other Information

		<p>9. <input type="checkbox"/> Current Spouse</p> <p><input type="checkbox"/> Former Conditional Permanent Resident Spouse</p> <p>10. Date of Marriage (mm/dd/yyyy)</p> <p>11. Date Marriage Terminated (mm/dd/yyyy) (if applicable)</p> <p>12. Is this spouse currently living with you? Yes/No</p> <p>13. Is this spouse applying with you? Yes/No</p> <p>14. Current Immigration Status (for example, conditional permanent resident, tourist/visitor, entered without inspection)</p> <p>15. Is the current immigration status of your spouse or former spouse based on your current immigration status?</p>
<p>Page 2, Part 4. Information About Your Current Spouse or Your Former Conditional Permanent Resident Spouse</p>	<p>[page 2]</p> <p>Part 4. Information About Your Current Spouse or Your Former Conditional Permanent Resident Spouse</p> <p>1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name</p> <p>2. Gender</p> <p>3. A-Number (if any)</p> <p>4. USCIS ELIS Account Number (if any)</p> <p>5. Date of Birth (mm/dd/yyyy)</p> <p>Other Names Used (if applicable)</p> <p>6.a. Family Name (Last Name) 6.b. Given Name (First Name) 6.c. Middle Name</p> <p>7.a. Family Name (Last Name) 7.b. Given Name (First Name) 7.c. Middle Name</p> <p>Mailing Address</p> <p>8.a. Street Number and Name 8.b. Apt. Ste. Flr. 8.c. City or Town 8.d. State 8.e. ZIP Code 8.f. Province 8.g. Postal Code 8.h. Country</p>	

Other Information

9. Current Spouse

Former Conditional Permanent Resident Spouse

10. Date of Marriage (mm/dd/yyyy)

11. Date Marriage Terminated (mm/dd/yyyy)

12. Is this spouse currently living with you?
Yes/No

13. Is this spouse applying with you? Yes/No

14. Current Immigration Status (for example, conditional resident, tourist/visitor, entered without inspection)

15. Is the current immigration status of your spouse or former spouse based on your current immigration status?

NOTE: If you have both a current spouse and a former conditional permanent resident spouse, use **Part 11. Additional Information** to provide this same information about your current spouse or former conditional permanent resident spouse who you did not already include in **Part 4.** above.

[moved up from **Part 5.**]

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Part 4. Information About Your Children

Provide the following information about your children.

Child 1

1.a. Family Name (Last Name)

1.b. Given Name (First Name)

1.c. Middle Name

2. Gender

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

4. USCIS Online Account Number (if any)

5. Date of Birth (mm/dd/yyyy)

Other Names Your Child Has Used

List all other names your child has ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 12. Additional**

Information.

- 6.a. Family Name (Last Name)
- 6.b. Given Name (First Name)
- 6.c. Middle Name

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Mailing Address

- 7.a. Street Number and Name
- 7.b. Apt. Ste. Flr.
- 7.c. City or Town
- 7.d. State
- 7.e. ZIP Code
- 7.f. Province
- 7.g. Postal Code
- 7.h. Country

8. Is this child currently living with you?
Yes/No

9. Is this child applying with you? Yes/No

10. Current Immigration Status (for example, conditional **permanent** resident, tourist/visitor, entered without inspection)

Child 2

- 11.a. Family Name (Last Name)
- 11.b. Given Name (First Name)
- 11.c. Middle Name

12. Gender

13. **Alien Registration Number (A-Number) (if any)**

14. USCIS **Online** Account Number (if any)

15. Date of Birth (mm/dd/yyyy)

Other Names Your Child Has Used

List all other names your child has ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information.**

- 16.a. Family Name (Last Name)
- 16.b. Given Name (First Name)
- 16.c. Middle Name

Mailing Address

- 17.a. Street Number and Name
- 17.b. Apt. Ste. Flr.
- 17.c. City or Town
- 17.d. State

17.e. ZIP Code
17.f. Province
17.g. Postal Code
17.h. Country

18. Is this child currently living with you?
 Yes/No

19. Is this child applying with you? Yes/No

20. Current Immigration Status (for example, conditional **permanent** resident, tourist/visitor, entered without inspection)

Child 3

21.a. Family Name (Last Name)
21.b. Given Name (First Name)
21.c. Middle Name

22. Gender

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

24. USCIS Online Account Number (if any)

25. Date of Birth (mm/dd/yyyy)

Other Names Your Child Has Used

List all other names your child has ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information**

26.a. Family Name (Last Name)
26.b. Given Name (First Name)
26.c. Middle Name

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Mailing Address

27.a. Street Number and Name
27.b. Apt. Ste. Flr.
27.c. City or Town
27.d. State
27.e. ZIP Code
27.f. Province
27.g. Postal Code
27.h. Country

28. Is this child currently living with you?
 Yes/No

29. Is this child applying with you? Yes/No

30. Current Immigration Status (for example, conditional **permanent** resident, tourist/visitor,

		<p>entered without inspection)</p> <p>Child 4</p> <p>31.a. Family Name (Last Name) 31.b. Given Name (First Name) 31.c. Middle Name</p> <p>32. Gender</p> <p>33. Alien Registration Number (A-Number) (if any)</p> <p>34. USCIS Online Account Number (if any)</p> <p>35. Date of Birth (mm/dd/yyyy)</p> <p>Other Names Your Child Has Used</p> <p>List all other names your child has ever used, including aliases, maiden name, and nicknames. If you need extra space to complete this section, use the space provided in Part 12. Additional Information.</p> <p>36.a. Family Name (Last Name) 36.b. Given Name (First Name) 36.c. Middle Name</p> <p>Mailing Address</p> <p>37.a. Street Number and Name 37.b. Apt. Ste. Flr. 37.c. City or Town 37.d. State 37.e. ZIP Code 37.f. Province 37.g. Postal Code 37.h. Country</p> <p>38. Is this child currently living with you? Yes/No</p> <p>39. Is this child applying with you? Yes/No</p> <p>40. Current Immigration Status (for example, conditional permanent resident, tourist/visitor, entered without inspection)</p> <p>If you need extra space to complete this section, use the space provided in Part 12. Additional Information.</p>
<p>Page 3, Part 5. Information About Your Children</p>	<p>[page 3]</p> <p>Part 5. Information About Your Children</p> <p>Provide the following information about your children.</p> <p>Child 1</p>	

1.a. Family Name (Last Name)
1.b. Given Name (First Name)
1.c. Middle Name

2. Gender

3. A-Number (if any)

4. USCIS ELIS Account Number (if any)

5. Date of Birth (mm/dd/yyyy)

Other Names Used (if applicable)

6.a. Family Name (Last Name)
6.b. Given Name (First Name)
6.c. Middle Name

Mailing Address

7.a. Street Number and Name
7.b. Apt. Ste. Flr.
7.c. City or Town
7.d. State
7.e. ZIP Code
7.f. Province
7.g. Postal Code
7.h. Country

8. Is this child currently living with you?
Yes/No

9. Is this child applying with you? Yes/No

10. Current Immigration Status (for example, conditional resident, tourist/visitor, entered without inspection)

Child 2

11.a. Family Name (Last Name)
11.b. Given Name (First Name)
11.c. Middle Name

12. Gender

13. A-Number (if any)

14. USCIS ELIS Account Number (if any)

15. Date of Birth (mm/dd/yyyy)

Other Names Used (if applicable)

16.a. Family Name (Last Name)
16.b. Given Name (First Name)
16.c. Middle Name

Mailing Address

17.a. Street Number and Name
17.b. Apt. Ste. Flr.
17.c. City or Town
17.d. State
17.e. ZIP Code
17.f. Province
17.g. Postal Code
17.h. Country

18. Is this child currently living with you?
 Yes/No

19. Is this child applying with you? Yes/No

20. Current Immigration Status (for example, conditional resident, tourist/visitor, entered without inspection)

Child 3

21.a. Family Name (Last Name)
21.b. Given Name (First Name)
21.c. Middle Name

22. Gender

23. A-Number (if any)

24. USCIS ELIS Account Number (if any)

25. Date of Birth (mm/dd/yyyy)

Other Names Used (if applicable)

26.a. Family Name (Last Name)
26.b. Given Name (First Name)
26.c. Middle Name

Mailing Address

27.a. Street Number and Name
27.b. Apt. Ste. Flr.
27.c. City or Town
27.d. State
27.e. ZIP Code
27.f. Province
27.g. Postal Code
27.h. Country

28. Is this child currently living with you?
 Yes/No

29. Is this child applying with you? Yes/No

30. Current Immigration Status (for example, conditional resident, tourist/visitor, entered without inspection)

Child 4

31.a. Family Name (Last Name)

31.b. Given Name (First Name)

31.c. Middle Name

32. Gender

33. A-Number (if any)

34. USCIS ELIS Account Number (if any)

35. Date of Birth (mm/dd/yyyy)

Other Names Used (if applicable)

36.a. Family Name (Last Name)

36.b. Given Name (First Name)

36.c. Middle Name

Mailing Address

37.a. Street Number and Name

37.b. Apt. Ste. Flr.

37.c. City or Town

37.d. State

37.e. ZIP Code

37.f. Province

37.g. Postal Code

37.h. Country

38. Is this child currently living with you?
Yes/No

39. Is this child applying with you? Yes/No

40. Current Immigration Status (for example, conditional resident, tourist/visitor, entered without inspection)

If you need extra space to list additional children, use the space provided in **Part 11. Additional Information** 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.

[moved up from **Part 6.**]

[page 5]

Part 5. Biographic Information

1. Ethnicity (Select **only one** box)

Hispanic or Latino

Not Hispanic or Latino

2. Race (Select **all applicable** boxes)

White

Asian

Black or African American

American Indian or Alaska Native

		<input type="checkbox"/> Hawaiian or Other Pacific Islander 3. Height Feet Inches 4. Weight Pounds 5. Eye Color (Select only one box) <input type="checkbox"/> Black <input type="checkbox"/> Blue <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Green <input type="checkbox"/> Hazel <input type="checkbox"/> Maroon <input type="checkbox"/> Pink <input type="checkbox"/> Unknown/Other 6. Hair Color (Select only one box) <input type="checkbox"/> Bald (No hair) <input type="checkbox"/> Black <input type="checkbox"/> Blond <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Sandy <input type="checkbox"/> White <input type="checkbox"/> Unknown/Other
Page 5, Part 6. Your Biographic Information	<p>[page 5]</p> <p>Part 6. Your Biographic Information</p> <p>1. Ethnicity (Select only one box)</p> <p><input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Not Hispanic or Latino</p> <p>2. Race (Select all applicable boxes)</p> <p><input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Hawaiian or Other Pacific Islander</p> <p>3. Height Feet Inches</p> <p>4. Weight Pounds</p> <p>5. Eye Color (Select only one box)</p> <p><input type="checkbox"/> Black <input type="checkbox"/> Blue <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Green <input type="checkbox"/> Hazel <input type="checkbox"/> Maroon <input type="checkbox"/> Pink <input type="checkbox"/> Unknown/Other</p> <p>6. Hair Color (Select only one box)</p> <p><input type="checkbox"/> Bald (No hair) <input type="checkbox"/> Black <input type="checkbox"/> Blond <input type="checkbox"/> Brown <input type="checkbox"/> Gray <input type="checkbox"/> Red <input type="checkbox"/> Sandy <input type="checkbox"/> White <input type="checkbox"/> Unknown/Other</p> <p>[moved up from Part 7.]</p>	<p>[page 6]</p> <p>Part 6. Additional Information About the Regional Center and the New Commercial Enterprise (NCE)</p> <p>1. Receipt Number for the Approved Form I-924, Application For Regional Center Designation Under the Immigrant Investor Program, Upon Which the Related Form I-526, Immigrant Petition by Alien Entrepreneur, Was Based</p>

2. Was the Regional Center associated with the entrepreneur terminated? Yes/No

Physical Address of the NCE

3.a. Street Number and Name

3.b. Apt. Ste. Flr.

3.c. City or Town

3.d. State

3.e. ZIP Code

4. Telephone Number

5. Internet Web site Address (if established)

6. Included Industries (select North American Industry Classification System (NAICS) code or codes)

7. IRS Tax Identification Number

8. Date Business Established (mm/dd/yyyy)

9. Date of the Entrepreneur's **Initial** Investment (mm/dd/yyyy)

10. Amount of the Entrepreneur's **Initial** Investment

Subsequent Investment in the NCE

Provide the following information about how much you have invested in the NCE since your **initial** investment.

11.a. Date of Subsequent Investment (mm/dd/yyyy)

11.b. Amount of Subsequent Investment

11.c. Type of Subsequent Investment (for example, cash, equipment, inventory, other tangible property, cash equivalents, or qualifying indebtedness as described in 8 CFR 204.6(e))

NOTE: If multiple investments have been made since the entrepreneur's **initial** investment in the commercial enterprise, use the space provided in **Part 12. Additional Information** to list the dates, amounts, and type of investments.

12. Amount of Capital Investment Sustained in the NCE.

13. Changes in Assets of the NCE. Has the commercial enterprise sold any assets, including but not limited to investment securities and real property, and distributed the proceeds of the

		<p>sale to any of its equity holders or had any other capital distributions or withdrawals since the date of your initial investment? Yes/No</p> <p>If you answered “Yes” to Item Number 13., use the space provided in Part 12. Additional Information to provide an explanation.</p> <p>14. Provide the total amount of capital invested by EB-5 investors into the NCE.</p> <p>15. Provide the number of EB-5 investors associated with the NCE.</p> <p>16. Has the NCE filed for bankruptcy, ceased business operations, materially changed the nature of the business, or made any changes in its organization or ownership since the date of your initial investment, or have any criminal or civil proceedings been filed against the NCE or any of its owners, officers, directors, general partners, managers or other persons with a similar interest or in a similar position of authority for the NCE involving fraud or other unlawful activity? Yes/No</p> <p>If you answered “Yes” to Item Number 16., use the space provided in Part 12. Additional Information to provide an explanation.</p>
<p>Page 5, Part 7. Information About the New Commercial Enterprise (NCE)</p>	<p>[page 5]</p> <p>Part 7. Information About the New Commercial Enterprise (NCE)</p> <p><i>Type of Enterprise</i></p> <p>1. <input type="checkbox"/> NCE formed after November 29, 1990.</p> <p>2. <input type="checkbox"/> NCE resulting from the purchase of a business, formed on or before November 29, 1990, that has been restructured or reorganized.</p> <p>3. <input type="checkbox"/> NCE resulting from a capital investment in, and substantial expansion of, a business formed on or before November 29, 1990.</p> <p><i>Additional Information About the NCE</i></p> <p>4. Name of the NCE</p> <p>Physical Address</p> <p>5.a. Street Number and Name 5.b. Apt. Ste. Flr. 5.c. City or Town 5.d. State 5.e. ZIP Code</p> <p>6. Telephone Number</p>	

	<p>7. Internet Web site Address (if established)</p> <p>8. Type of Business Organization (for example, corporation, limited liability company, partnership)</p> <p>9. Nature of Business (for example, furniture manufacturer)</p> <p>10. Included Industries (select North American Industry Classification System (NAICS) code or codes)</p> <p>11. IRS Tax Identification Number</p> <p>12. Date Business Established (mm/dd/yyyy)</p> <p>13. Amount of the Entrepreneur's Initial Investment in the NCE \$</p> <p>14. Date of the Entrepreneur's Initial Investment (mm/dd/yyyy)</p> <p>15. What percentage of the NCE does the entrepreneur own?</p> <p>16. Is this petition based on investment in a troubled business? Yes/No</p> <p>Subsequent Investments in the NCE</p> <p>Provide the following information about how much the entrepreneur has invested in the NCE since the entrepreneur's initial investment.</p> <p>17.a. Date of Subsequent Investment (mm/dd/yyyy)</p> <p>17.b. Amount of Subsequent Investment \$</p> <p>17.c. Type of Subsequent Investment (for example, cash, equipment, inventory, other tangible property, cash equivalents, or qualifying indebtedness as described in 8 CFR 204.6(e))</p> <p>NOTE: If multiple investments have been made since the entrepreneur's initial investment in the commercial enterprise, use Part 11. Additional Information to list the dates, amounts, and type of investments.</p> <p>Full-time Positions and Qualifying Employees</p> <p>Provide the number of full-time positions for direct and qualifying employees in the NCE in the United States (excluding you, your spouse, and your children):</p> <p>18.a. At the time of the Entrepreneur's Initial</p>	
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	<p>Investment</p> <p>18.b. Currently Employed in the NCE</p> <p>Job Creation</p> <p>19.a. How many new direct jobs did the entrepreneur's investment create?</p> <p>19.b. How many new direct jobs will the entrepreneur's investment create within a reasonable amount of time after filing this petition?</p> <p>20.a. If the NCE is associated with an approved regional center, how many indirect jobs were created?</p> <p>20.b. If the NCE is associated with an approved regional center, how many indirect jobs will the NCE create within a reasonable amount of time after filing this petition?</p> <p>21. If the investment was made into a troubled business, how many jobs were maintained as a result of the investment?</p> <p>Gross and Net Incomes</p> <p>Provide the gross and net incomes generated annually by the commercial enterprise since the entrepreneur's initial investment. Include all income generated in the present year to date.</p> <p>22.a. Year (yyyy) 22.b. Gross Income \$ 22.c. Net Income \$</p> <p>23.a. Year (yyyy) 23.b. Gross Income \$ 23.c. Net Income \$</p> <p>24.a. Year (yyyy) 24.b. Gross Income \$ 24.c. Net Income \$</p> <p>25. Has the commercial enterprise filed for bankruptcy, ceased business operations, materially changed the nature of the business, or made any changes in its organization or ownership since the date of the entrepreneur's initial investment? Yes/No</p> <p>26. Has the commercial enterprise sold any corporate assets, shares, or property, or had any capital withdrawn since the date of the entrepreneur's initial investment? Yes/No</p> <p>NOTE: If you answered "Yes" to Item Number 25. or 26., provide an explanation in Part 11. Additional Information.</p>	
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27. Provide the total number of EB-5 investors associated with the NCE.

28. Provide the total amount of EB-5 capital invested into the NCE.

If you need extra space to provide additional information for any item in **Part 7.**, use the space provided in **Part 11. Additional Information** 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.

[new]

[page 7]

Part 7. Information About the Job Creating Entity (JCE)

JCE 1

1. Name of the JCE

Physical Address

2.a. Street Number and Name

2.b. Apt. Ste. Flr.

2.c. City or Town

2.d. State

2.e. ZIP Code

JCE 2

3. Name of the JCE

Physical Address

4.a. Street Number and Name

4.b. Apt. Ste. Flr.

4.c. City or Town

4.d. State

4.e. ZIP Code

JCE 3

5. Name of the JCE

Physical Address

6.a. Street Number and Name

6.b. Apt. Ste. Flr.

6.c. City or Town

6.d. State

6.e. ZIP Code

If there are additional **JCEs**, use **Part 12. Additional Information** to provide the names and physical addresses of the additional **JCEs**.

		<p>7. Has any of the JCEs filed for bankruptcy, ceased business operations, materially changed the nature of the business, or made any changes in its organization or ownership since the date of your initial investment, or have any criminal or civil proceedings been filed against any of the JCEs or any of their owners, officers, directors, general partners, managers or other persons with a similar interest or in a similar position of authority for any of the JCEs involving fraud or other unlawful activity? Yes/No</p> <p>If you answered “Yes” to Item Number 7., use the space provided in Part 12. Additional Information to provide an explanation.</p>
<p>Page 7, Part 8. Petitioner's Statement, Contact Information, Acknowledgement of Appointment at USCIS Application Support Center, Certification, and Signature</p>	<p>[page 7]</p> <p>Part 8. Petitioner's Statement, Contact Information, Acknowledgement of Appointment at USCIS Application Support Center, Certification, and Signature</p> <p>NOTE: Read the information on penalties in the Penalties section of the Form I-829 Instructions before completing this part.</p> <p><i>Petitioner's Statement</i></p> <p>NOTE: Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.</p> <p>1.a. <input type="checkbox"/> I can read and understand English, and have read and understand every question and instruction on this petition, as well as my answer to every question. I have read the Acknowledgement of Appointment at USCIS Application Support Center.</p> <p>1.b. <input type="checkbox"/> The interpreter named in Part 9. has read every question and instruction on this petition, as well as my answer to every question, in [fillable field], a language in which I am fluent. I understand every question and instruction on this petition as translated to me by my interpreter, and have provided complete, true, and correct responses in the language indicated above. The interpreter named in Part 9. has also read the Acknowledgement of Appointment at USCIS Application Support Center to me, in the language in which I am fluent, and I understand this Application Support Center (ASC) Acknowledgement as read to me by my interpreter.</p> <p>2. <input type="checkbox"/> I have requested the services of and consented to [fillable field], who <input type="checkbox"/> is <input type="checkbox"/> is not an attorney or accredited representative, in</p>	

preparing this petition for me. This person who assisted me in preparing my petition has reviewed the **Acknowledgement of Appointment at USCIS Application Support Center** with me, and I understand the ASC Acknowledgement.

Petitioner's Contact Information

3. Petitioner's Daytime Telephone Number

4. Petitioner's Mobile Phone Number (if any)

5. Petitioner's Email Address (if any)

Acknowledgement of Appointment at USCIS Application Support Center

I, [fillable field], understand that the purpose of a USCIS ASC appointment is for me to provide fingerprints, photograph, and/or signature and to re-affirm that all of the information in my petition is complete, true, and correct and was provided by me. I understand that I will sign my name to the following declaration which USCIS will display to me at the time I provide my fingerprints, photograph, and/or signature during my ASC appointment.

By signing here, I declare under penalty of perjury that I have reviewed and understand my application, petition, or request as identified by the receipt number displayed on the screen above, and all supporting documents, applications, petitions, or requests filed with my application, petition, or request that I (or my attorney or accredited representative) filed with USCIS, and that all of the information in these materials is complete, true, and correct.

I also understand that when I sign my name, provide my fingerprints, and am photographed at the USCIS ASC, I will be re-affirming that I willingly submit this petition; I have reviewed the contents of this petition; all of the information in my petition and all supporting documents submitted with my petition were provided by me and are complete, true, and correct; and if I was assisted in completing this petition, the person assisting me also reviewed this **Acknowledgement of Appointment at USCIS Application Support Center** with me.

Petitioner's 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

	<p>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.</p> <p>I furthermore authorize release of information contained in this petition, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration laws.</p> <p>I certify, under penalty of perjury, that the information in my petition and any document submitted with my petition were provided by me and are complete, true and correct.</p> <p>Petitioner's Signature</p> <p>6.a. Petitioner's Signature</p> <p>6.b. Date of Signature (mm/dd/yyyy)</p> <p>NOTE TO ALL PETITIONERS: If you do not completely fill out this petition or fail to submit required documents listed in the instructions, your petition may be denied.</p> <p>[new]</p>	<p>[page 7]</p> <p>Part 8. Information About Job Creation</p> <p>Information about direct job creation at the NCE:</p> <p>1.a. Number of Full-Time Direct and Qualifying Employees in the NCE at the Time of Your Initial Investment</p> <p>1.b. Number of Full-Time Direct and Qualifying Employees in the NCE at the Time of Filing This Petition</p> <p>1.c. Difference in Number of Full-Time Direct and Qualifying Employees</p> <p>1.d. Amount of Capital Invested in the NCE That Was Not Funded by EB-5 Investors</p> <p>Information about indirect job creation outside of the NCE (if applicable)</p> <p>2.a. Number of Full-Time Economically Direct, Indirect and Induced Jobs Created as a Result of EB-5 Investment</p> <p>2.b. Amount of Capital From EB-5 Investors That Was Transferred to the JCE</p> <p>2.c. Amount of Capital Invested in the JCE That Was Not Funded by Investors Who Received or</p>
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		<p>are Seeking Classification as Alien Entrepreneurs</p> <p>3. Are you investing in a troubled business? Yes/No</p> <p>If the investment was made into a troubled business:</p> <p>4.a. How many full-time, qualifying positions were maintained as a result of the investment?</p> <p>4.b. How many full-time, qualifying positions were created as a result of the investment?</p> <p>[page 8]</p> <p>5. If ten full-time jobs for qualifying employees have not yet been created, please indicate the number of jobs expected to be created within a reasonable time.</p> <p>6. Changes to Business Plan. Have you made an investment and created jobs in the United States according to the plan presented in the Form I-526? Yes/No</p> <p>If you answered “No” to Item Number 6., use the space provided in Part 12. Additional Information to provide an explanation of the changes made to the original business plan submitted with the approved Form I-526.</p>
<p>Page 8, Part 9. Interpreter's Certification, Contact Information, and Signature</p>	<p>[page 8]</p> <p>Part 9. Interpreter's Certification, Contact Information, and Signature</p> <p>Provide the following information about the interpreter.</p> <p><i>Interpreter's Full Name</i></p> <p>1.a. Interpreter's Family Name (Last Name) 1.b. Interpreter's Given Name (First Name)</p> <p>2. Interpreter's Business or Organization Name (if any)</p> <p><i>Interpreter's Mailing Address</i></p> <p>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</p>	

Interpreter's Contact Information

4. Interpreter's Daytime Telephone Number

5. Interpreter's Email Address (if any)

Interpreter's Certification

I certify that:

I am fluent in English and [fillable field], which is the same language provided in **Part 8., Item Number 1.b.**;

I have read to this petitioner every question and instruction on this petition, as well as the answer to every question, in the language provided in **Part 8., Item Number 1.b.**; and

I have read the **Acknowledgement of Appointment at USCIS Application Support Center** to the petitioner in the same language provided in **Part 8., Item Number 1.b.**

The petitioner has informed me that he or she understands every instruction and question on the petition, as well as the answer to every question, and the petitioner verified the accuracy of every answer; and

The petitioner has also informed me that he or she understands the ASC Acknowledgement and that by appearing for a USCIS ASC biometric services appointment and providing his or her fingerprints, photograph, and/or signature, he or she is re-affirming that the contents of this petition and all supporting documentation are complete, true, and correct.

Interpreter's Signature

6.a. Interpreter's Signature

6.b. Date of Signature (mm/dd/yyyy)

[moved down from **Part 8.**]

[page 8]

Part 9. Petitioner's Statement, Contact Information, Declaration, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-829 Instructions before completing this part.

Petitioner'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 **petition** and my answer to

		<p>every question.</p> <p>1.b. <input type="checkbox"/> The interpreter named in Part 10. read to me every question and instruction on this petition and my answer to every question in [Fillable Field], a language in which I am fluent, and I understood everything.</p> <p>2. <input type="checkbox"/> At my request, the preparer named in Part 11., [Fillable Filed], prepared this petition for me based only upon information I provided or authorized.</p> <p><i>Petitioner's Contact Information</i></p> <p>3. Petitioner's Daytime Telephone Number</p> <p>4. Petitioner's Mobile Telephone Number (if any)</p> <p>5. Petitioner's Email Address (if any)</p> <p><i>Petitioner's Declaration and Certification</i></p> <p>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 I seek.</p> <p>I further authorize release of information contained in this petition, 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.</p> <p>I understand that USCIS will require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, I will be required to sign an oath reaffirming that:</p> <p style="padding-left: 40px;"> 1) I reviewed and understood all of the information in, and submitted with, my petition; and 2) All of this information was complete, true, and correct at the time of filing. </p> <p>I certify, under penalty of perjury, that all of the information in my petition 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 petition and that all of this information is complete, true, and correct.</p>
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		<p>Petitioner's Signature</p> <p>6.a. Petitioner's Signature 6.b. Date of Signature (mm/dd/yyyy)</p> <p>NOTE TO ALL PETITIONERS: If you do not completely fill out this petition or fail to submit required documents listed in the Instructions, USCIS may deny your petition.</p>
<p>Page 9, Part 10. Contact Information, Statement, Certification, and Signature of the Person Preparing this Petition, If Other Than the Petitioner</p>	<p>[page 9]</p> <p>Part 10. Contact Information, Statement, Certification, and Signature of the Person Preparing this Petition, If Other Than the Petitioner</p> <p>Provide the following information about the preparer.</p> <p>Preparer's Full Name</p> <p>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)</p> <p>Preparer's Mailing Address</p> <p>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</p> <p>Preparer's Contact Information</p> <p>4. Preparer's Daytime Telephone Number 5. Preparer's Fax Number (if any) 6. Preparer's Email Address (if any)</p> <p>Preparer's Statement</p> <p>7.a. <input type="checkbox"/> I am not an attorney or accredited representative but have prepared this petition on behalf of the petitioner and with the petitioner's consent.</p> <p>7.b. <input type="checkbox"/> I am an attorney or accredited representative and my representation of the petitioner in this case <input type="checkbox"/> extends <input type="checkbox"/> does not extend beyond the preparation of this petition.</p> <p>NOTE: If you are an attorney or accredited representative whose representation extends beyond preparation of this petition, you must</p>	

submit a completed Form G-28, Notice of Attorney or Accredited Representative, with this petition.

Preparer's Certification

By my signature, I certify, swear, or affirm, under penalty of perjury, that I prepared this petition on behalf of, at the request of, and with the express consent of the petitioner. I completed this petition based only on responses the petitioner provided to me. After completing the petition, I reviewed it and all of the petitioner's responses with the petitioner, who agreed with every answer on the petition. If the petitioner supplied additional information concerning a question on the petition, I recorded it on the petition. I have also read the **Acknowledgement of Appointment at USCIS Application Support Center** to the petitioner and the petitioner has informed me that he or she understands the ASC Acknowledgement.

Preparer's Signature

8.a. Preparer's Signature

8.b. Date of Signature (mm/dd/yyyy)

[moved down from **Part 9.**]

[page 8]

Part 10. 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)

[page 9]

Interpreter's Mailing Address

3.a. Street Number and Name

3.b. Apt. Ste. Flr. [fillable field]

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

		<p>any) 6. Interpreter’s Email Address (if any)</p> <p>Interpreter’s Certification</p> <p>I certify, under penalty of perjury, that:</p> <p>I am fluent in English and [Fillable Field], which is the same language specified in Part 9., Item Number 1.b., and I have read to this petitioner in the identified language every question and instruction on this petition and his or her answer to every question. The petitioner informed me that he or she understands every instruction, question, and answer on the petition, including the Petitioner’s Declaration and Certification, and has verified the accuracy of every answer.</p> <p>Interpreter’s Signature</p> <p>7.a. Interpreter’s Signature 7.b. Date of Signature (mm/dd/yyyy)</p>
<p>Page 11, Part 11. Additional Information</p>	<p>[page 11]</p> <p>Part 11. Additional Information</p> <p>If you need extra space to provide any additional information within this petition, 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 petition or attach a separate sheet of paper. Include 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.</p> <p>1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name</p> <p>2. A-Number (if any)</p> <p>3.a. Page Number 3.b. Part Number 3.c. Item Number 3.d. [fillable lines]</p> <p>4.a. Page Number 4.b. Part Number 4.c. Item Number 4.d. [fillable lines]</p> <p>5.a. Page Number 5.b. Part Number 5.c. Item Number 5.d. [fillable lines]</p> <p>6.a. Page Number</p>	

6.b. Part Number
6.c. Item Number
6.d. [fillable lines]

[moved down from **Part 10.**]

[page 9]

Part 11. Contact Information, Declaration, and Signature of the Person Preparing this Petition, if Other Than the Petitioner

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. [fillable field]
- 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. Preparer's Daytime Telephone Number
- 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 **form** on behalf of the **authorized individual** and with the **authorized individual's** consent.

7.b. I am an attorney or accredited representative and have prepared this **form** on behalf of the **authorized individual** and with the **authorized individual's** consent.

[page 10]

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, or Form G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States,

		<p>with this petition.</p> <p>Preparer's Certification</p> <p>By my signature, I certify, under penalty of perjury, that I prepared this petition at the request of the petitioner. The petitioner then reviewed this completed petition and informed me that he or she understands all of the information contained in, and submitted with, his or her petition, including the Petitioner's Declaration and Certification, and that all of this information is complete, true, and correct. I completed this petition based only on information that the petitioner provided to me or authorized me to obtain or use.</p> <p>Preparer's Signature</p> <p>8.a. Preparer's Signature 8.b. Date of Signature (mm/dd/yyyy)</p>
	<p>[moved down from Part 11.]</p>	<p>[page 11]</p> <p>Part 12. Additional Information</p> <p>If you need extra space to provide any additional information within this petition, 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 petition 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.</p> <p>1.a. Family Name (Last Name) [Auto-populated field] 1.b. Given Name (First Name) [Auto-populated field] 1.c. Middle Name [Auto-populated field]</p> <p>2. A-Number (if any) [Auto-populated field]</p> <p>3.a. Page Number 3.b. Part Number 3.c. Item Number 3.d. [Fillable field]</p> <p>4.a. Page Number 4.b. Part Number 4.c. Item Number 4.d. [Fillable field]</p> <p>5.a. Page Number 5.b. Part Number 5.c. Item Number 5.d. [Fillable field]</p>

		<p>6.a. Page Number 6.b. Part Number 6.c. Item Number 6.d. [Fillable field]</p> <p>7.a. Page Number 7.b. Part Number 7.c. Item Number 7.d. [Fillable field]</p>
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