

TABLE OF CHANGES – INSTRUCTIONS
Form I-129, Petition for a Nonimmigrant Worker
OMB Number: 1615-0111
09/28/2018

Reason for Revision: Minor revisions in support of Public Charge Rulemaking.

Legend for Proposed Text:

- Black font = Current text
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Page 4, General Filing Instructions	<p>[Page 4]</p> <p>How to Fill Out Form I-129</p> <ol style="list-style-type: none"> 1. Type or print legibly in black ink. 2. Complete the basic form and any relating supplements. 3. If you need extra space to complete any item, go to Part 9., Additional Information About Your Petition for Nonimmigrant Worker, indicate the Page Number, Part Number, and Item Number to which your answer refers, and date and sign each sheet. <p>[Page 5]</p> <p>...</p> <p>F. Change status to a nonimmigrant classification that is based on a Free Trade Agreement. Check this box if the beneficiary is currently in the United States in a different nonimmigrant classification and is applying to change to a nonimmigrant classification based on a Free Trade Agreement (H-1B1 Chile/Singapore or TN classification).</p>	<p>[Page 4]</p> <p>How to Fill Out Form I-129</p> <ol style="list-style-type: none"> 1. Type or print legibly in black ink. 2. Complete the basic form and any relating supplements. 3. If you need extra space to complete any item, go to Part 10., Additional Information About Your Petition for Nonimmigrant Worker, indicate the Page Number, Part Number, and Item Number to which your answer refers, and date and sign each sheet. <p>[Page 5]</p> <p>[No Change]</p> <p>F. Change status to a nonimmigrant classification that is based on a Free Trade Agreement. Check this box if the beneficiary is currently in the United States in a different nonimmigrant classification and is applying to change to a nonimmigrant classification based on a Free Trade Agreement (H-1B1 Chile/Singapore or TN classification).</p> <p>Part 6. Information About The Proposed Employee's Public Benefits</p> <p>Item Number 1. Public Benefits. Please provide the information requested about the beneficiary's (the alien's) receipt of public benefits unless the nonimmigrant classification is exempt from the public charge inadmissibility under INA 212(a) (4).</p> <p>In the table provided, please provide all requested information about each public benefit regardless of whether the amount of the duration would be excluded as described below, as USCIS will calculate the amount to be considered in the public charge inadmissibility determination. If you require additional space, please use the</p>

		<p>space provided in Part 10, Additional Information.</p> <p>In the table, indicate whether or not you have ever applied for or received any of the following monetizable (cash) public benefits:</p> <ol style="list-style-type: none"> 1. Any Federal, State, local, or tribal cash assistance for income maintenance including: <ol style="list-style-type: none"> A. Supplemental Security Income (SSI) B. Temporary Assistance for Needy Families (TANF) C. Federal, State or local cash benefit programs for income maintenance (often called “General Assistance” in the State context, but which may exist under other names) 2. The following monetizable (non-cash) benefits: <ol style="list-style-type: none"> A. Supplemental Nutrition Assistance Program (SNAP, or formerly called “Food Stamps”) B. Section 8 Housing Assistance under the Housing Choice Voucher Program C. Section 8 Project-Based Rental Assistance (including Moderate Rehabilitation) 3. Any of the following non-monetizable (non-cash) public benefits: <ol style="list-style-type: none"> A. Medicaid B. Any benefit for institutionalization for long-term care at government expense, for example, Intermediate Care Facilities for People with Intellectual disability (ICF/ID), Nursing Facility (NF), Preadmission Screening & Resident Review (PASRR), Inpatient Psychiatric Services for Individuals Under Age 21, and Services for individuals age 65 or older in an institution for mental diseases C. Premium and Cost Sharing Subsidies for Medicare Part D D. Public Housing <p>Amount and Duration of Benefit</p> <p>As part of the determination regarding eligibility for extension of stay or change of status, USCIS will consider the above listed</p>
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	<p>public benefits as follows:</p> <p>1. Monetizable (cash or non-cash) benefits: USCIS will consider the benefits when the total receipt of all benefits cumulatively exceeds 15 percent of the Federal Poverty Guidelines (FPG) for a household of one within any period of 12 consecutive months (since you obtained the nonimmigrant status that you seek to extend or from which you seek to change), based on the per-month average FPG for the months during which the benefits are received. Note only the amount received by or attributable to the alien will be considered (for example, if the TANF is for a household of 4, only 25 percent of the total TANF benefit will be considered).</p> <p>2. Non-monetizable benefits (non-cash): USCIS will generally consider the benefits when the benefit (or benefits) is received for longer than 12 months within an aggregate of 36 months since you obtained the nonimmigrant status that you seek to extend or from which you seek to change (such that, for instance, receipt of 2 non-monetizable benefits in one month counts as two months). Note only the amount received by or attributable to the alien will be considered (for example, if the SNAP or housing benefit is for a household of 4, only 25 percent of the total SNAP or housing benefit will be considered).</p> <p>3. Combined Monetizable and Non-monetizable Public Benefits. USCIS will generally consider the receipt of a combination of monetizable benefits, described above, where the cumulative value of such benefits is equal to or less than 15 percent of the FPG for a household size of one within any period of 12 consecutive months since you obtained the nonimmigrant status that you seek to extend or from which you seek to change based on the per-month average FPG for the months during which the benefits are</p>
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received, together with one or more non-monetizable benefits described above of this section if such non-monetizable benefits are received for more than 9 months in the aggregate within a 36 month period since you obtained the nonimmigrant status that you seek to extend or from which you seek to change (such that, for instance, receipt of two non-monetizable benefits in one month counts as two months).

The following table provides a summary of how USCIS will consider monetizable and non-monetizable public benefits:

Table[2 columns, 5 rows]

Summary of Consideration Monetizable and Non-monetizable Public Benefits

Monetizable Benefit(s):

Cumulative value of benefits for a household of one within any period of 12 consecutive months, based on the per-month average FPG for the months during which the benefits are received

More than 15% of the FPG

Equal to or less than 15% of the FPG

Any benefits in any percentage of the FPG

Non-monetizable Benefit(s):

Number of Benefits and Duration (Months) within a 36-month period (such that, for instance, receipt of two non-monetizable benefits in one month counts as two months)

Any benefits for any time period

1 or more benefits for longer than 9 aggregate months

1 or more benefit for longer than 12 aggregate months

Public Benefits Received by U.S. Armed Forces Servicemembers

When considering receipt of public benefits in the public charge determination, USCIS will not consider any public benefits if the beneficiary was or is, either at the time of receipt of the benefit(s), the time of filing the immigration benefits application, or the time of USCIS' adjudication of the benefit application:

1. An alien serving in active duty or in the Ready Reserve component of the U.S.

		<p>Armed Forces, or</p> <p>2. The spouse or child of the service member (listed in 1, above).</p> <p>You must provide the following documentation:</p> <p>1. Service Members: A. Certified proof, issued by the authorizing official of the executive department in which the servicemember is serving.</p> <p>2. Spouses and Children of Service Members: A. Provide copies of marriage certificate for spouse and birth certificates for children; and B. DD-1173, United States Uniformed Services Identification and Privilege Card (Dependent).</p> <p><i>Medicaid Services Not Considered</i></p> <p>In addition, in the public charge inadmissibility determination, USCIS will not consider any of the Medicaid benefits received by:</p> <p>1. Children of U.S. citizens whose lawful admission for permanent residence and subsequent residence in the legal and physical custody of their U.S. citizen parent will result automatically in the child's acquisition of citizenship or whose lawful admission for permanent residence will result automatically in the child's acquisition of citizenship upon finalization of adoption in the United States by the U.S. citizen parent(s), or once meeting other eligibility criteria as required under INA 320.</p> <p>For information on eligibility for citizenship under INA 320 and the evidentiary requirements to meet the qualifications to demonstrate citizenship, please see Form N-600, Application for Certificate of Citizenship. If the beneficiary has not previously submitted</p>
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		<p>any required evidence to comply with filing requirements of other benefit requests (such as the I-130 Petition for Alien Relative, I-600 Petition to Classify Orphan as an Immediate Relative, or I-800 Petition to Classify Convention Adoptee as an Immediate Relative), please submit them at this time with this form.</p> <p>If the beneficiary is currently residing abroad and entered the United States with a nonimmigrant visas in order to attend an interview in regard of an N-600K, Application for Citizenship and Issuance of Certificate Under INA Section 322, please provide a copy of the interview notice.</p> <p>Further, USCIS will not consider Medicaid provided payment for "emergency medical condition," for services provided under the Individuals with Disabilities Education Act (IDEA), or for school-based non-emergency benefits provided to children who are at or below the oldest age of children eligible for secondary education as determined under State law. Please provide documentation of such payments under those conditions, and, if applicable, provide a statement and information regarding the "emergency medical condition" determination. USCIS will not consider these specific Medicaid provisions in the public charge determination. If the beneficiary applied for or received Medicaid under these conditions, please indicate and explain so in Part 10. Additional Information.</p> <p>Documentation of Public Benefit Receipt:</p> <p>If the beneficiary applied for, is currently receiving, or previously received, any of the public benefits listed above, provide evidence in the form of a letter, notice, certification or other agency documents that contain the following:</p> <ol style="list-style-type: none"> 1. Your Name; 2. Name and contact information for the public benefit granting agency; 3. Type of Benefit; 4. Amount of benefit(s) received (check boxes for weekly, monthly, annually, other explain);
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	<p>Certification Pertaining to the Release of Controlled Technology or Technical Data to Foreign Persons in the United States</p> <p>...</p>	<p>5. Date Benefit Was Granted; 6. Date the Benefit Ended or Expires (mm/dd/yyyy)(if applicable); and 7. Number of Household Members Receiving the Benefit (if applicable).</p> <p>If the beneficiary has terminated the receipt of benefits, provide the documentation that indicates the beneficiary will no longer receive the benefits with the applicable termination date.</p> <p>Item Numbers 2. and 2a. Future Applications for or Receipt of Public Benefits. Indicate whether or not you anticipate applying for or receiving public benefits at any time in the future, including whether you have been certified or approved to receive future benefits or have been determined to be eligible for future benefits. If you anticipate requesting or receiving such benefits, please explain what public benefit(s) you expect to apply for or receive, for how long you expect to receive the benefit(s), the anticipated amount(s) of the public benefits you expect to receive, and why you would receive the benefit(s) in the space provided. If you need extra space to complete this section, use the space provided in Part 10. Additional Information.</p> <p>[no change]</p>
<p>Page 6, Requirement to Certify Compliance with U.S. Export Control Regulations.</p>	<p>[Page 6]</p> <p>Requirement to Certify Compliance with U.S. Export Control Regulations. The U.S. Government requires each company or other entity that files a Form I-129 to certify that to the best of its knowledge at the time of filing it has reviewed the Export Administration Regulations (EAR) and the International Traffic in Arms Regulations (ITAR) and determined whether it will require a U.S. Government export license to release controlled technology or technical data to the beneficiary.</p>	<p>[Page 6]</p> <p>[no change]</p>

	<p>If an export license is required, the company or other entity must further certify that it will not release or otherwise provide access to controlled technology or technical data to the beneficiary until it has received the required authorization from the U.S. Government.</p> <p>The petitioner must indicate whether or not a license is required in Part 6., Certification Regarding the Release of Controlled Technology or Technical Data to Foreign Persons in the United States, of Form I-129.</p> <p>...</p> <p>Classification - Initial Evidence</p> <p>For all classifications, if a beneficiary is seeking a change of status or extension of stay, evidence of maintenance of status must be included with the new petition. If the beneficiary is employed in the United States, the petitioner may submit copies of the beneficiary’s last 2 pay stubs, Form W-2, and other relevant evidence, as well as a copy of the beneficiary’s Form I-94, passport, travel document, or I-797.</p> <p>...</p>	<p>The petitioner must indicate whether or not a license is required in Part 7., Certification Regarding the Release of Controlled Technology or Technical Data to Foreign Persons in the United States, of Form I-129.</p> <p>[no change]</p> <p>Classification - Initial Evidence</p> <p>For all classifications, if a beneficiary is seeking a change of status or extension of stay, evidence of maintenance of status must be included with the new petition. If the beneficiary is employed in the United States, the petitioner may submit copies of the beneficiary’s last 2 pay stubs, Form W-2, Internal Revenue Service (IRS) transcripts of the beneficiary’s federal individual income tax return for the three most recent tax years, and other relevant evidence. You must also include a copy of the beneficiary’s Form I-94, passport, travel document, or I-797.</p> <p>[no change]</p>
<p>Page 29, Paperwork Reduction Act</p>	<p>[Page 29]</p> <p>Paperwork Reduction Act</p> <p>An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at Form I-129 at 2.26 hours; E-1/E-2 Classification at .67 hours; Trade Agreement Supplement at .67 hours; H Classification Supplement at 2 hours; H-1B and H-1B1 Data Collection and Filing Fee Exemption Supplement at 1 hour; L Classification Supplement to Form</p>	<p>[Page 29]</p> <p>Paperwork Reduction Act</p> <p>An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at Form I-129 at 2.84 hours; E-1/E-2 Classification at .67 hours; Trade Agreement Supplement at .67 hours; H Classification Supplement at 2 hours; H-1B and H-1B1 Data Collection and Filing Fee Exemption Supplement at 1 hour; L Classification Supplement to Form</p>

	<p>I-129 at 1.34 hours; P Classifications Supplement to Form I-129 at 1 hour; Q-1 Classification Supplement at .34 hours; R-1 Classification Supplement at 2.34 hours; and Form I-129 ATT at .33 hours, including the time for reviewing instructions, gathering the required documentation and completing and submitting the request. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140; OMB No 1615-0009. Do not mail your completed Form I-129 to this address.</p>	<p>I-129 at 1.34 hours; P Classifications Supplement to Form I-129 at 1 hour; Q-1 Classification Supplement at .34 hours; R-1 Classification Supplement at 2.34 hours; and Form I-129 ATT at .33 hours, including the time for reviewing instructions, gathering the required documentation and completing and submitting the request. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140; OMB No 1615-0009. Do not mail your completed Form I-129 to this address.</p>
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