**TABLE OF CHANGES – FORM**

**Form I-140, Immigrant Petition for Alien Workers**

**OMB Number: 1615-0015**

**06/23/2020**

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| **Reason for Revision: Fee Rule**  **Project Phase: Post G-1056**   * Please note – all instances of “if any” and “if applicable” have been removed from Form I-140.   Legend for Proposed Text:   * Black font = Current text * Red font = Changes   Expires 06/30/2022  Edition Date 06/09/2020 |

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| **Current Page Number and Section** | **Current Text** | **Proposed Text** |
| **Page 1,**  **To be completed by an Attorney or Accredited Representative** (if any)**.** | **[Page 1]**  **To be completed by an Attorney or Accredited Representative** (if any)**.**  **Select this box if Form G-28 or Form G-28I is attached.**  **Attorney State Bar Number** (if applicable)  **Attorney or Accredited Representative USCIS Online Account Number** (if any)  **START HERE – Type or print in black ink.** | **[Page 1]**  **To be completed by an Attorney or Accredited Representative.**  **Select this box if Form G-28 or Form G-28I is attached.**  **Attorney State Bar Number**  **Attorney or Accredited Representative USCIS Online Account Number**  **START HERE – Type or print in black ink.** |
| **Page 1,**  **Part 1. Information About the Person or Organization Filing This Petition** | **[Page 1]**  **…**  **5.** U.S. Social Security Number (SSN) (if any)  **6.** USCIS Online Account Number (if any) | **[Page 1]**  **…**  **5.** U.S. Social Security Number (SSN)  **6.** USCIS Online Account Number |
| **Page 2,**  **Part 3. Information About the Person for Whom You Are Filing** | **[Page 2]**  **…**  **8.** Alien Registration Number (A-Number) (if any)  **9.** U.S. SSN (if any)  **…** | **[Page 2]**  **…**  **8.** Alien Registration Number (A-Number)  **9.** U.S. SSN  **…** |
| **Page 9,**  **Part 11. Additional Information** | **[Page 9]**  **…**  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.  **…** | **[Page 9]**  **…**  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 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.  **…** |