

Application to Register Permanent Residence or Adjust Status

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-485 OMB No. 1615-0023 Expires 07/31/2021

	For USCIS Use Only							
Preference Category:	Rece	ipt		Action Block				
Country Chargeable:	IJK							
Priority Date:								
Date Form I-693 Received:	-							
Applicant Interview Interviewed Waived Date of Initial Interview: Lawful Permanent Resident as of:		249 13, Act of 9/11 an Adjustment A		R				
To be c	completed by an attorne	y or accredi	ted represer	ntative (if any).				
Select this box if Form G-28 is attached. Volag Nu (if any)		ney State Ba licable)	r Number	Attorney or Accredited Representative USCIS Online Account Number (if any)				
NOTE TO ALL APPLICANTS: If	► START HERE - Type or print in black ink. A-Number ► A- NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, U.S. Citizenship and Immigration Services (USCIS) may deny your application.							
Part 1. Information About Your Current Legal Name (do nickname))	3.b.	Family Nam (Last Name) Given Name (First Name) Middle Nam					
1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name			Family Nam (Last Name) Given Name (First Name) Middle Nam					
Other Names You Have Used S	Since Birth (if			ation About You				
applicable) NOTE: Provide all other names you be your family name at birth, other legal aliases, and assumed names. If you ne complete this section, use the space practional Information.	names, nicknames, eed extra space to	5.	NOTE: In a include any connection v	h (mm/dd/yyyy) addition to providing your actual date of birth, other dates of birth you have used in with any legal names or non-legal names in ovided in Part 14. Additional Information.				
2.a. Family Name (Last Name)		6.	Sex	Male Female				
2.b. Given Name (First Name)		7.	City or Tow	n of Birth				
2.c. Middle Name								

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	t 1. Information About You (Person applying	Recent Immigration History					
	lawful permanent residence) (continued)	Provide the information for Item Numbers 15 19. if you last entered the United States using a passport or travel document.					
8.	Country of Birth	15. Passport Number Used at Last Arrival					
9.	Country of Citizenship or Nationality	16. Travel Document Number Used at Last Arrival					
10.	Alien Registration Number (A-Number) (if any) ▶ A-	17. Expiration Date of this Passport or Travel Document (mm/dd/yyyy)					
	NOTE: If you have EVER used other A-Numbers, include the additional A-Numbers in the space provided in Part 14. Additional Information .	18. Country that Issued this Passport or Travel Document					
11.	USCIS Online Account Number (if any)	19. Nonimmigrant Visa Number from this Passport (if any)					
12.	U.S. Social Security Number (if any)	Place of Last Arrival into the United States 20.a. City or Town					
U.S	. Mailing Address						
13.a.	In Care Of Name (if any)	20.b. State					
13.c.	Street Number and Name Apt. Ste. Flr. City or Town	 21. Date of Last Arrival (mm/dd/yyyy) When I last arrived in the United States, I: 22.a. Was inspected at a port of entry and admitted as (for example, exchange visitor; visitor, waived through; temporary worker; student): 					
13.e.	State 13.f. ZIP Code (USPS ZIP Code Lookup) ernate and/or Safe Mailing Address	22.b. Was inspected at a port of entry and paroled as (for example, humanitarian parole, Cuban parole):					
If you (VAV victin nonin abou	u are applying based on the Violence Against Women Act WA) or as a special immigrant juvenile, human trafficking m (T nonimmigrant), or victim of a qualifying crime (U mmigrant) and you do not want USCIS to send notices t this application to your home, you may provide an native and/or safe mailing address.	22.c. Came into the United States without admission or parole. 22.d. Other:					
	In Care Of Name (if any)	If you were issued a Form I-94 Arrival-Departure Record Number: 23.a. Form I-94 Arrival-Departure Record Number					
14.b. 14.c.	Street Number and Name Apt. Ste. Flr.	23.b. Expiration Date of Authorized Stay Shown on Form I-94 (mm/dd/yyyy)					
14.d.	. City or Town	23.c. Status on Form I-94 (for example, class of admission, or paroled, if paroled)					
14.e.	State 14.f. ZIP Code						

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Part 1. Information About You (Person applying for lawful permanent residence) (continued)	1.d. Asylee or Refugee Asylum status (INA section 208), Form I-589 or Form I-730
What is your current immigration status (if it has changed since your arrival)?	Refugee status (INA section 207), Form I-590 or Form I-730
	1.e. Human Trafficking Victim or Crime Victim
Provide your name exactly as it appears on your Form I-94 (if any)	Human trafficking victim (T Nonimmigrant), Form I-914 or derivative family member, Form I-914A
25.a. Family Name (Last Name) 25.b. Given Name (First Name)	Crime victim (U Nonimmigrant), Form I-918, derivative family member, Form I-918A, or qualifying family member, Form I-929
25.c. Middle Name	1.f. Special Programs Based on Certain Public Laws
25.c. Wilddie Name	The Cuban Adjustment Act
Part 2. Application Type or Filing Category	The Cuban Adjustment Act for battered spouses and children
NOTE: Attach a copy of the Form I-797 receipt or approval notice for the underlying petition or application, as appropriate.	Dependent status under the Haitian Refugee Immigrant Fairness Act
I am applying to register lawful permanent residence or adjust status to that of a lawful permanent resident based on the following immigrant category (select only one box). (See the	Dependent status under the Haitian Refugee Immigrant Fairness Act for battered spouses and children
Form I-485 Instructions for more information, including any Additional Instructions that relate to the immigrant category	Lautenberg Parolees
you select.):	Diplomats or high ranking officials unable to return
1.a. Family-based	home (Section 13 of the Act of September 11, 1957)
Immediate relative of a U.S. citizen, Form I-130	Indochinese Parole Adjustment Act of 2000
Other relative of a U.S. citizen or relative of a lawful	1.g. Additional Options
permanent resident under the family-based preference categories, Form I-130	Diversity Visa program
Person admitted to the United States as a fiancé(e) or	Continuous residence in the United States since before January 1, 1972 ("Registry")
child of a fiancé(e) of a U.S. citizen, Form I-129F (K-1/K-2 Nonimmigrant)	Individual born in the United States under diplomatic status
Widow or widower of a U.S. citizen, Form I-360	Other eligibility
☐ VAWA self-petitioner, Form I-360	Collect engionity
1.b. Employment-based	2. Are you applying for adjustment based on the
Alien worker, Form I-140	Immigration and Nationality Act (INA) section 245(i)?
Alien entrepreneur, Form I-526	Yes No
1.c. Special Immigrant	NOTE: If you answered "Yes" to Item Number 2., you
Religious worker, Form I-360	must have selected a family-based, employment-based, special immigrant, or Diversity Visa immigrant category
Special immigrant juvenile, Form I-360	listed above in Item Numbers 1.a 1.g. as the basis for
Certain Afghan or Iraqi national, Form I-360	your application for adjustment of status. Fill out the rest of this application and Supplement A to Form I-485,
Certain international broadcaster, Form I-360	Adjustment of Status Under Section 245(i) (Supplement

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Certain G-4 international organization or family

Form I-360

member or NATO-6 employee or family member,

Instructions (including any Additional Instructions that

Numbers 1.a. - 1.g.) and Supplement A Instructions.

relate to the immigrant category that you selected in **Item**

Part 2. Application Type or Filing Category (continued)			Decision (for example, approved, refused, denied, withdrawn)
If you	prmation About Your Immigrant Category a are the principal applicant, provide the following	4.	Date of Decision (mm/dd/yyyy)
	mation.	Add	ress History
 4. 	Receipt Number of Underlying Petition (if any) Priority Date from Underlying Petition (if any)	durin States	de physical addresses for everywhere you have lived g the last five years, whether inside or outside the United s. Provide your current address first. If you need extra
	(mm/dd/yyyy)		to complete this section, use the space provided in 14. Additional Information.
	are a derivative applicant (the spouse or unmarried	Physi	cal Address 1 (current address)
	under 21 years of age of a principal applicant), provide the wing information for the principal applicant .	5.a.	Street Number and Name
Princ	ipal Applicant's Name	5.b.	Apt. Ste. Flr.
	Family Name (Last Name)	5.c.	City or Town
5.b.	Given Name (First Name)	5.d.	State State ZIP Code
5.c.	Middle Name	5.f.	Province
6.	Principal Applicant's A-Number (if any) • A-	5.g.	Postal Code
7.	Principal Applicant's Date of Birth	5.h.	Country
	(mm/dd/yyyy)	Dates	s of Residence
8.	Receipt Number of Principal's Underlying Petition (if any) •		From (mm/dd/yyyy)
9.	Priority Date of Principal Applicant's Underlying Petition	6.b.	To (mm/dd/yyyy)
	(if any) (mm/dd/yyyy)		
		•	ical Address 2
	t 3. Additional Information About You	7.a.	Street Number and Name
1.	Have you ever applied for an immigrant visa to obtain permanent resident status at a U.S. Embassy or U.S. Consulate abroad?	7.b.	Apt. Ste. Flr.
	Consulate abroad? Yes No	7.c.	City or Town
	If you answered "Yes" to Item Number 1. , complete Item Numbers 2.a 4. below. If you need extra space to	7.d.	State 7.e. ZIP Code
	complete this section, use the space provided in Part 14. Additional Information .		Province
Locat	tion of U.S. Embassy or U.S. Consulate	7.g.	Postal Code
2.a.	City	7.h.	Country
2.b.	Country		

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Part 3. Additional Information About You	Address of Employer or Company
(continued)	12.a. Street Number and Name
Dates of Residence	12.b.
8.a. From (mm/dd/yyyy)	12.c. City or Town
8.b. To (mm/dd/yyyy)	12.d. State 12.e. ZIP Code
Provide your most recent address outside the United States where you lived for more than one year (if not already listed above).	12.f. Province
9.a. Street Number	12.g. Postal Code
and Name	12.h. Country
9.b. Apt. Ste. Flr.	12 V 0 i
9.c. City or Town	13. Your Occupation
9.d. State 9.e. ZIP Code	Dates of Employment
9.f. Province	14.a. From (mm/dd/yyyy)
9.g. Postal Code	14.b. To (mm/dd/yyyy)
9.h. Country	Employer 2
	15. Name of Employer or Company
Dates of Residence	
10.a. From (mm/dd/yyyy)	Address of Employer or Company
10.b. To (mm/dd/yyyy)	16.a. Street Number and Name
Employment History	16.b. Apt. Ste. Flr.
Provide your employment history for the last five years, whether inside or outside the United States. Provide the most	16.c. City or Town
recent employment first. If you need extra space to complete this section, use the space provided in Part 14. Additional	16.d. State 16.e. ZIP Code
Information.	16.f. Province
Employer 1 (current or most recent)	16.g. Postal Code
11. Name of Employer or Company	16.h. Country
	17. Your Occupation
	Dates of Employment
	18.a. From (mm/dd/yyyy)
	18.b. To (mm/dd/yyyy)

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	t 3. Additional Information About You ntinued)	3. 4.	Date of Birth (mm/dd/yyyy) Sex
Prov	ide your most recent employment outside of the United		
	s (if not already listed above).	_5.	City or Town of Birth
19.	Name of Employer or Company	6.	Country of Birth
		0.	Country of Birth
	ess of Employer or Company	7.	Current City or Town of Residence (if living)
20.a.	Street Number and Name		current only of Town of Residence (in 114mg)
20.b.	Apt. Ste. Flr.	8.	Current Country of Residence (if living)
20.c.	City or Town		
20.d.	State 20.e. ZIP Code	Info	ormation About Your Parent 2
20.f.	Province	Parer	nt 2's Legal Name
20 ~	Pactal Code	9.a.	Family Name (Last Name)
	Postal Code	9.b.	Given Name
20.h.	Country		(First Name)
21.	Your Occupation	9.c.	Middle Name
21.	Tour occupation		nt 2's Name at Birth (if different than above)
Date	s of Employment	10.a.	Family Name (Last Name)
	From (mm/dd/yyyy)	10.b.	Given Name (First Name)
		10 c	Middle Name
22.b.	To (mm/dd/yyyy)		
Ъ		11.	Date of Birth (mm/dd/yyyy)
Par	t 4. Information About Your Parents	12.	Sex Male Female
Info	ormation About Your Parent 1	13.	City or Town of Birth
Parei	nt 1's Legal Name		
1.a.	Family Name (Last Name)	14.	Country of Birth
1.b.	Given Name (First Name)	15.	Current City or Town of Residence (if living)
1.c.	Middle Name		
Parei	nt 1's Name at Birth (if different than above)	16.	Current Country of Residence (if living)
2.a.	Family Name (Last Name)		
2.b.	Given Name (First Name)		
2.c.	Middle Name		

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Part 5. Information About Your Marital Histor	ry Place of Marriage to Current Spouse
1. What is your current marital status?	9.a. City or Town
Single, Never Married Married Divorced	
☐ Widowed ☐ Marriage Annulled	9.b. State or Province
Legally Separated	
2. If you are married, is your spouse a current member of U.S. armed forces or U.S. Coast Guard?	the 9.c. Country
N/A Yes	No 10. Is your current spouse applying with you?
3. How many times have you been married (including annulled marriages and marriages to the same person)?	☐ Yes ☐ No
	Information About Prior Marriages (if any)
Information About Your Current Marriage (including if you are legally separated) If you are currently married, provide the following information	If you have been married before, whether in the United States or in any other country, provide the following information about your prior spouse. If you have had more than one previous marriage, use the space provided in Part 14. Additional Information to provide the information below.
about your current spouse.	
Current Spouse's Legal Name	Prior Spouse's Legal Name (provide family name before marriage)
4.a. Family Name (Last Name)	11.a. Family Name
4.b. Given Name (First Name)	(Last Name) 11.b. Given Name (First Name)
4.c. Middle Name	11.c. Middle Name
5. A-Number (if any)	12. Prior Spouse's Date of Birth (mm/dd/yyyy)
► A-	
6. Current Spouse's Date of Birth (mm/dd/yyyy)	13. Date of Marriage to Prior Spouse (mm/dd/yyyy)
7. Date of Marriage to Current Spouse (mm/dd/yyyy)	Place of Marriage to Prior Spouse
Current Spouse's Place of Birth	14.a. City or Town
8.a. City or Town	
S.a. City of Town	14.b. State or Province
State or Province	14.c. Country
8.c. Country	
	15. Date Marriage with Prior Spouse Legally Ended (mm/dd/yyyy)

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	t 5. Information About Your Marital History	Curr	1 2 ent Legal Name
`	Where Marriage with Prior Spouse Legally Ended		Family Name (Last Name)
	City or Town	7.b.	`
16.b.	State or Province	7.c.	Middle Name
		8.	A-Number (if any)
16.c.	Country		► A-
		9.	Date of Birth (mm/dd/yyyy)
		10.	Country of Birth
Part	t 6. Information About Your Children		
1.	Indicate the total number of ALL living children (including adult sons and daughters) that you have.	11.	Is this child applying with you?
Provide from the Part of Child Curre 2.a. 2.b. 2.c.	Family Name (Last Name) Given Name (First Name) Middle Name	12.a. 12.b. 12.c. 13.	Ent Legal Name Family Name (Last Name) Given Name (First Name) Middle Name A-Number (if any) Date of Birth (mm/dd/yyyy) Country of Birth Is this child applying with you?
3.	A-Number (if any) ► A-		t 7. Biographic Information
4		1.	Ethnicity (Select only one box)
	Date of Birth (mm/dd/yyyy)		Hispanic or Latino
5.	Country of Birth	2	Not Hispanic or Latino
6.	Is this child applying with you? Yes No	2.	Race (Select all applicable boxes) White Asian Black or African American American Indian or Alaska Native

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Par	t 7. Biographic	c Informatio	n (continued)	Dates	of Membership or Dates of Involven	nent
3.	Height	Feet	Inches	5.a.	From (mm/dd/yyyy)	
4.	Weight		Pounds	5.b.	To (mm/dd/yyyy)	
5.	Eye Color (Select	only one box)		Organ	nization 2	
	Black	Blue	Brown	6.	Name of Organization	
	 ☐ Gray	Green	Hazel			
	Maroon	— ☐ Pink	Unknown/Other	7.a.	City or Town	
6.	Hair Color (Select	t only one box)	IOT			
	Bald (No hair)	Black	Blond	7.b.	State or Province	
	Brown	Gray	Red			
	Sandy	White	Unknown/Other	7.c.	Country	
		ligibility and	Inadmissibility	8.	Nature of Group	
Gro	unds					
1.	•		of, involved in, or in	Dates	of Membership or Dates of Involven	nent
	• •		nization, association, ety, or similar group in	9.a.	From (mm/dd/yyyy)	
	the United States	or in any other l	ocation in the world	0 h	To (mm/dd/yyyy)	
	including any mili	itary service?	Yes No	9.0.	To (IIIII/dd/yyyy)	
			r 1., complete Item extra space to complete	Orgai	nization 3	
			Part 14. Additional	10.	Name of Organization	
			ut are unsure of your vents and circumstances			
			ional Information.	11.a.	City or Town	
Orgai	nization 1					
	Name of Organiza	ation		11.b.	State or Province	
					_	
3.a.	City or Town			11.c.	Country	
					N. C.G.	
3.b.	State or Province			12.	Nature of Group	
				~		
3.c.	Country				of Membership or Dates of Involven	nent
				13.a.	From (mm/dd/yyyy)	
4.	Nature of Group			13.b.	To (mm/dd/yyyy)	

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Part 8. General Eligibility and Inadmissibility **Grounds** (continued)

Answer Item Numbers 14. - 80.b. Choose the answer that you think is correct. If you answer "Yes" to any questions (or if you answer "No," but are unsure of your answer), provide an explanation of the events and circumstances in the space

provi	ded in Part 14. Additional Informati	on.			
14.	Have you EVER been denied admiss States?	ion to	the U	_	i No
15.	Have you EVER been denied a visa t	o the	Unite Yes		tes? No
16.	Have you EVER worked in the Unite authorization?	d Sta	tes wi Yes		t No
17.	Have you EVER violated the terms of nonimmigrant status?	r con	dition Yes	_	our No
18.	Are you presently or have you EVER exclusion, rescission, or deportation p			?	ıl, No
19.	Have you EVER been issued a final of deportation, or removal?	order		clusio	
20.	Have you EVER had a prior final ord deportation, or removal reinstated?	ler of	exclu Yes		No
21.	Have you EVER held lawful permane which was later rescinded?	ent re	sident Yes	statı	is No
22.	Have you EVER been granted volunt immigration officer or an immigration depart within the allotted time?	-	-	•	
23.	Have you EVER applied for any kind protection from removal, exclusion, or			on?	No
24.a.	Have you EVER been a J nonimmigr who was subject to the two-year forei requirement?			e E	sitor No
Num	n answered "Yes" to Item Number 24 bers 24.b 24.c. If you answered "No skip to Item Number 25.				
24.b.	Have you complied with the foreign requirement?	eside	nce Yes		No
24.c.	Have you been granted a waiver or has State issued a favorable waiver recomfor you?	meno		lette	r

Criminal Acts and Violations

For **Item Numbers 25. - 45.**, you must answer "Yes" to any question that applies to you, even if your records were sealed or otherwise cleared, or even if anyone, including a judge, law enforcement officer, or attorney, told you that you no longer have a record. You must also answer "Yes" to the following questions whether the action or offense occurred here in the United States or anywhere else in the world. If you answer "Yes" to Item Numbers 25. - 45., use the space provided in Part 14. Additional Information to provide an explanation that includes why you were arrested, cited, detained, or charged; where you were arrested, cited, detained, or charged; when (date) the event occurred; and the outcome or disposition (for example, no charges filed, charges dismissed, jail, probation, community service).

25.	Have you EVER been arrested, cited, charged, or					
	detained for any reason by any law enforcement official					
	cluding but not limited to any U.S. immigration					
	official or any official of the U.S. armed forces or U.S.					
	Coast Guard)?					

26. Have you EVER co	mmitted a crime	of any kind	(even if
you were not arreste	ed, cited, charged	with, or trie	ed for that
crime)?		Yes	□ No

27.	Have you EVER pled guilty to or be	een convicted of a
	crime or offense (even if the violation	on was subsequently
	expunged or sealed by a court, or if	you were granted a
	pardon, amnesty, a rehabilitation dec	cree, or other act of
	clemency)?	

NOTE: If you were the beneficiary of a pardon, amnesty, a rehabilitation decree, or other act of clemency, provide documentation of that post-conviction action.

Have you **EVER** been ordered punished by a judge or had conditions imposed on you that restrained your liberty (such as a prison sentence, suspended sentence, house arrest, parole, alternative sentencing, drug or alcohol treatment, rehabilitative programs or classes, probation, or community service)? Yes No

29.	Have you EVER been a defendant or the accused in a
	criminal proceeding (including pre-trial diversion,
	deferred prosecution, deferred adjudication, or any
	withheld adjudication)?

30.	Have you EVER violated (or attempted or conspired to
	violate) any controlled substance law or regulation of a
	state the United States or a foreign country?

Yes [No
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| | Yes | | No

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Part 8. General Eligibility and Inadmissibility Grounds (continued)

	· /
31.	Have you EVER been convicted of two or more offenses (other than purely political offenses) for which the combined sentences to confinement were five years or more? Yes No
32.	Have you EVER illicitly (illegally) trafficked or benefited from the trafficking of any controlled substances, such as chemicals, illegal drugs, or narcotics? Yes No
33.	Have you EVER knowingly aided, abetted, assisted, conspired, or colluded in the illicit trafficking of any illegal narcotic or other controlled substances?
34.	Are you the spouse, son, or daughter of a foreign national who illicitly trafficked or aided (or otherwise abetted, assisted, conspired, or colluded) in the illicit trafficking of a controlled substance, such as chemicals, illegal drugs, or narcotics and you obtained, within the last five years, any financial or other benefit from the illegal activity of your spouse or parent, although you knew or reasonably should have known that the financial or other benefit resulted from the illicit activity of your spouse or parent?
	Yes No
35.	Have you EVER engaged in prostitution or are you coming to the United States to engage in prostitution? Yes No
36.	Have you EVER directly or indirectly procured (or attempted to procure) or imported prostitutes or persons for the purpose of prostitution? Yes No
37.	Have you EVER received any proceeds or money from prostitution?
38.	Do you intend to engage in illegal gambling or any other form of commercialized vice, such as prostitution, bootlegging, or the sale of child pornography, while in the United States? Yes No
39.	Have you EVER exercised immunity (diplomatic or otherwise) to avoid being prosecuted for a criminal offense in the United States? Yes No
40.	Have you EVER , while serving as a foreign government official, been responsible for or directly carried out violations of religious freedoms? Yes No
41.	Have you EVER induced by force, fraud, or coercion (or otherwise been involved in) the trafficking of persons for commercial sex acts? Yes No

42.	Have you EVER trafficked a person into invol	untary
	servitude, peonage, debt bondage, or slavery?	Trafficking
	includes recruiting, harboring, transporting, pro	oviding, or
	obtaining a person for labor or services through	the use of
	force, fraud, or coercion.	. □ No

- 43. Have you **EVER** knowingly aided, abetted, assisted, conspired, or colluded with others in trafficking persons for commercial sex acts or involuntary servitude, peonage, debt bondage, or slavery? Yes No
- 44. Are you the spouse, son or daughter of a foreign national who engaged in the trafficking of persons and have received or obtained, within the last five years, any financial or other benefits from the illicit activity of your spouse or your parent, although you knew or reasonably should have known that this benefit resulted from the illicit activity of your spouse or parent?

 Yes No
- 45. Have you **EVER** engaged in money laundering or have you **EVER** knowingly aided, assisted, conspired, or colluded with others in money laundering or do you seek to enter the United States to engage in such activity?

Yes	No

Security and Related

Do you intend to:

- **46.a.** Engage in any activity that violates or evades any law relating to espionage (including spying) or sabotage in the United States?

 Yes No
- **46.b.** Engage in any activity in the United States that violates or evades any law prohibiting the export from the United States of goods, technology, or sensitive information?

Yes No

- **46.c.** Engage in any activity whose purpose includes opposing, controlling, or overthrowing the U.S. Government by force, violence, or other unlawful means while in the United States?

 Yes No
- **46.d.** Engage in any activity that could endanger the welfare, safety, or security of the United States?

safety, or security of the United States?

Yes No

46.e. Engage in any other unlawful activity? Yes No

47. Are you engaged in or, upon your entry into the United States, do you intend to engage in any activity that could have potentially serious adverse foreign policy consequences for the United States? Yes No

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organization or government associated or allied with the

Yes

No

Nazi government of Germany?

51.d. Provided money, a thing of value, services or labor, or Part 8. General Eligibility and Inadmissibility any other assistance or support for any of the activities **Grounds** (continued) described in Item Number 51.a.? Yes No Have you EVER: **51.e.** Provided money, a thing of value, services or labor, or **48.a.** Committed, threatened to commit, attempted to commit, any other assistance or support to an individual, group, or conspired to commit, incited, endorsed, advocated, organization who did any of the activities described in planned, or prepared any of the following: hijacking, Item Number 51.a.? Yes No sabotage, kidnapping, political assassination, or use of a weapon or explosive to harm another individual or cause **51.f.** Received any type of military, paramilitary, or weapons substantial damage to property? training from a group or organization that did any of the ☐ Yes ☐ No activities described in Item Number 51.a.? **48.b.** Participated in, or been a member of, a group or Yes No organization that did any of the activities described in Item Number 48.a.? NOTE: If you answered "Yes" to any part of Item Number Yes No 51., explain the relationship and what occurred, including the **48.c.** Recruited members or asked for money or things of value dates and location of the circumstances, in the space provided in Part 14. Additional Information. for a group or organization that did any of the activities described in Item Number 48.a.? Yes No Have you **EVER** assisted or participated in selling, providing, or transporting weapons to any person who, **48.d.** Provided money, a thing of value, services or labor, or to your knowledge, used them against another person? any other assistance or support for any of the activities Yes described in Item Number 48.a.? Yes No 53. Have you EVER worked, volunteered, or otherwise **48.e.** Provided money, a thing of value, services or labor, or served in any prison, jail, prison camp, detention facility, any other assistance or support for an individual, group, labor camp, or any other situation that involved detaining or organization who did any of the activities described in persons? ☐ Yes ☐ No Item Number 48.a.? ☐ Yes ☐ No 54. Have you **EVER** been a member of, assisted, or Have you **EVER** received any type of military, participated in any group, unit, or organization of any paramilitary, or weapons training? kind in which you or other persons used any type of weapon against any person or threatened to do so? Do you intend to engage in any of the activities listed in Yes No any part of Item Numbers 48.a. - 49.? Yes No 55. Have you **EVER** served in, been a member of, assisted, NOTE: If you answered "Yes" to any part of Item Numbers or participated in any military unit, paramilitary unit, **46.a.** - **50.**, explain what you did, including the dates and police unit, self-defense unit, vigilante unit, rebel group, location of the circumstances, or what you intend to do in the guerilla group, militia, insurgent organization, or any space provided in Part 14. Additional Information. other armed group? Yes No Are you the spouse or child of an individual who **EVER**: Have you **EVER** been a member of, or in any way **51.a.** Committed, threatened to commit, attempted to commit, affiliated with, the Communist Party or any other conspired to commit, incited, endorsed, advocated, totalitarian party (in the United States or abroad)? planned, or prepared any of the following: hijacking, Yes No sabotage, kidnapping, political assassination, or use of a weapon or explosive to harm another individual or cause 57. During the period from March 23, 1933 to May 8, 1945, substantial damage to property? Yes No did you ever order, incite, assist, or otherwise participate in the persecution of any person because of race, religion, **51.b.** Participated in, or been a member or a representative of a national origin, or political opinion, in association with group or organization that did any of the activities either the Nazi government of Germany or any

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Yes No

☐ Yes ☐ No

described in Item Number 51.a.?

described in Item Number 51.a.?

51.c. Recruited members, or asked for money or things of value, for a group or organization that did any of the activities

Part 8. General Eligibility and Inadmissibility Grounds (continued)	63.c. If your answer to Item Number 63.b. is "Yes," attach a written statement explaining why you had reasonable cause.
Have you EVER ordered, incited, called for, committed, assisted, nelped with, or otherwise participated in any of the following:	64. Have you EVER submitted fraudulent or counterfeit documentation to any U.S. Government official to obtain or attempt to obtain any immigration benefit, including a visa or entry into the United States? Yes No
58.a. Acts involving torture or genocide? Yes No 58.b. Killing any person? Yes No 58.c. Intentionally and severely injuring any person? Yes No 58.d. Engaging in any kind of sexual contact or relations with	65. Have you EVER lied about, concealed, or misrepresented any information on an application or petition to obtain a visa, other documentation required for entry into the United States, admission to the United States, or any other kind of immigration benefit? Yes No No No Have you EVER falsely claimed to be a U.S. citizen (in
any person who did not consent or was unable to consent, or was being forced or threatened? Yes No	writing or any other way)? Yes No No West No
58.e. Limiting or denying any person's ability to exercise religious beliefs? Yes No	arriving in the United States? Yes No 68. Have you EVER knowingly encouraged, induced, assisted,
any person under 15 years of age to serve in or help an armed force or group? Yes No	abetted, or aided any foreign national to enter or to try to enter the United States illegally (alien smuggling)? Yes No
60. Have you EVER used any person under 15 years of age to take part in hostilities, or to help or provide services to people in combat? Yes No	69. Are you under a final order of civil penalty for violating INA section 274C for use of fraudulent documents?
NOTE: If you answered "Yes" to any part of Item Numbers 52 60., explain what occurred, including the dates and ocation of the circumstances, in the space provided in Part 14 . Additional Information.	Removal, Unlawful Presence, or Illegal Reentry After Previous Immigration Violations
Public Assistance	70. Have you EVER been excluded, deported, or removed from the United States or have you ever departed the United States on your own after having been ordered
Have you received public assistance in the United States from any source, including the U.S. Government or any state, county, city, or municipality (other than emergency	excluded, deported, or removed from the United States? Yes No
medical treatment)? Yes No	71. Have you EVER entered the United States without being inspected and admitted or paroled? Yes No
Are you likely to receive public assistance in the future in the United States from any source, including the U.S. Government or any state, county, city, or municipality	Since April 1, 1997, have you been unlawfully present in the United States:
(other than emergency medical treatment)? Yes No	72.a. For more than 180 days but less than a year, and then departed the United States? Yes No
Illegal Entries and Other Immigration Violations	72.b. For one year or more and then departed the United States?
63.a. Have you EVER failed or refused to attend or to remain in attendance at any removal proceeding filed against you on or after April 1, 1997? Yes No	NOTE: You were unlawfully present in the United States if you entered the United States without being inspected and admitted or inspected and paroled, or if you legally entered the United States but you stayed longer than permitted.

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Yes No

believe you had reasonable cause?

			71 Trainion P 11
Gro Since reente or par 73.a.	t 8. General Eligibility and Inadmissibility bunds (continued) April 1, 1997, have you EVER reentered or attempted to er the United States without being inspected and admitted roled after: Having been unlawfully present in the United States for more than one year in the aggregate? Yes No Having been deported, excluded, or removed from the United States?	80.b.	Have you EVER left or remained outside the United States to avoid or evade training or service in the U.S. armed forces in time of war or a period declared by the President to be a national emergency? Yes No If your answer to Item Number 80.a . is "Yes," what was your nationality or immigration status immediately before you left (for example, U.S. citizen or national, lawful permanent resident, nonimmigrant, parolee, present without admission or parole, or any other status)?
Mis	acillan cous Conduct	D 4	
Mis 74.	Do you plan to practice polygamy in the United States?		9. Accommodations for Individuals With bilities and/or Impairments
75.	Yes No Are you accompanying another foreign national who requires your protection or guardianship but who is inadmissible after being certified by a medical officer as being helpless from sickness, physical or mental disability, or infancy, as described in INA section 232(c)? Yes No	before 1.	C: Read the information in the Form I-485 Instructions completing this part. Are you requesting an accommodation because of your disabilities and/or impairments? Yes No If you answered "Yes" to Item Number 1., select any applicable box in Item Numbers 2.a 2.c. and provide an answer.
76.	Have you EVER assisted in detaining, retaining, or withholding custody of a U.S. citizen child outside the United States from a U.S. citizen who has been granted custody of the child? Yes No	2.a. [I am deaf or hard of hearing and request the following accommodation. (If you are requesting a sign-language interpreter, indicate for which language (for example, American Sign Language).):
77.	Have you EVER voted in violation of any Federal, state,	/ 4	_020
78.	or local constitutional provision, statute, ordinance, or regulation in the United States? Yes No Have you EVER renounced U.S. citizenship to avoid being taxed by the United States? Yes No	2.b. [I am blind or have low vision and request the following accommodation:
Have	you EVER:		
79.a.	Applied for exemption or discharge from training or service in the U.S. armed forces or in the U.S. National Security Training Corps on the ground that you are a foreign national? Yes No	2.c. [I have another type of disability and/or impairment. (Describe the nature of your disability and/or impairment and the accommodation you are requesting.)
79.b.	Been relieved or discharged from such training or service on the ground that you are a foreign national? Yes No		

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Yes No

79.c. Been convicted of desertion from the U.S. armed forces?

A-Number ► A-					
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Part 10. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

NOTE: Read the **Penalties** section of the Form I-485 Instructions before completing this part. You must file Form I-485 while in the United States.

Applicant's Statement

4.

5.

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 application and my answer to every question.				
1.b.		The interpreter named in Part 11. read to me every question and instruction on this application and my answer to every question in				
2.		a language in which I am fluent, and I understood everything. At my request, the preparer named in Part 12.,				
	7.	prepared this application for me based only upon information I provided or authorized.				
App	lica	nt's Contact Information				
3.	App	olicant's Daytime Telephone Number				

Applicant's Declaration and Certification

Applicant's Email Address (if any)

Applicant's Mobile Telephone Number (if any)

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 that I seek.

I understand that if I am a male who is 18 to 26 years of age, submitting this application will automatically register me with the Selective Service System as required by the Military Selective Service Act.

I furthermore authorize release of information contained in this application, 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.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- I reviewed and understood all of the information contained in, and submitted with, my application; and
- 2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application 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 application and that all of this information is complete, true, and correct.

Applicai	nt's	Sign	ature
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6.a.	Applicant's Signature (sign in ink)	M
\rightarrow		
6.b.	Date of Signature (mm/dd/yyyy)	

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 11. 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)

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Part 11. Interpreter's Contact Information, Certification, and Signature (continued)

	t 11. Interpreter's Contact Information, tification, and Signature (continued)	Part 12. Contact Information, Declaration, and Signature of the Person Preparing this						
Inte	erpreter's Mailing Address	Ap	plication, if Other Than the Applicant					
3.a.	Street Number and Name	Prov	ide the following information about the preparer.					
3.b.	Apt. Ste. Flr.	Pre	parer's Full Name					
3.c.	City or Town	1.a.	Preparer's Family Name (Last Name)					
3.d.	State 3.e. ZIP Code	1.b.	Preparer's Given Name (First Name)					
	Province Postal Code	2.	Preparer's Business or Organization Name (if any)					
3.h.	Country	Pre	parer's Mailing Address					
Inte	erpreter's Contact Information	3.a.	Street Number and Name					
4.	Interpreter's Daytime Telephone Number	3.b.	Apt. Ste. Flr.					
		3.c.	City or Town					
5.	Interpreter's Mobile Telephone Number (if any)	3.d.	State 3.e. ZIP Code					
6.	Interpreter's Email Address (if any)	3.f.	Province					
		3.g.	Postal Code					
Inte	erpreter's Certification	3.h.	Country					
I cert	tify, under penalty of perjury, that:							
	fluent in English and, h is the same language specified in Part 10., Item Number	Pre	parer's Contact Information					
1.b.,	and I have read to this applicant in the identified language	4.	Preparer's Daytime Telephone Number					
	question and instruction on this application and his or her er to every question. The applicant informed me that he or							
she u appli	inderstands every instruction, question, and answer on the cation, including the Applicant's Declaration and	5.	Preparer's Mobile Telephone Number (if any)					
Cert	ification, and has verified the accuracy of every answer.	6.	Preparer's Email Address (if any)					
Inte	erpreter's Signature							
7.a.	Interpreter's Signature (sign in ink)							
7.b.	Date of Signature (mm/dd/yyyy)							

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Part 12. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant (continued)

By my signature, I certify, under penalty of perjury, that I prepared this application at the request of the applicant. The applicant then reviewed this completed application and informed me that he or she understands all of the information contained in, and submitted with, his or her application, including the **Applicant's Declaration and Certification**, and that all of this information is complete, true, and correct. I completed this application based only on information that the applicant provided to me or authorized me to obtain or use.

Pre	Preparer's Signature							
8.a.	Preparer's Signature (sign in ink)							
8.b.	Date of Signature (mm/dd/yyyy)							

NOTE: Do not complete Part 13. until the USCIS Officer instructs you to do so at the interview.

Part 13. Signature at Interview

I swear (affirm) and certify under penalty of perjury under the laws of the United States of America that I know that the contents of this Form I-485, Application to Register Permanent Residence or Adjust Status, subscribed by me, including the							
corrections made to this application, numbered							
through , are complete, true, and correct. All							
additional pages submitted by me with this Form I-485, on							
numbered pages through are complete,							
true, and correct. All documents submitted at this interview were provided by me and are complete, true, and correct.							
Subscribed to and sworn to (affirmed) before me							
USCIS Officer's Printed Name or Stamp							
Date of Signature (mm/dd/yyyy)							
Applicant's Signature (sign in ink)							
USCIS Officer's Signature (sign in ink)							
2020							

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Part 14. Additional Information	5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
If you need extra space to provide any additional information within this application, 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 application 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.	5.d.	E				
1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name	6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
2. A-Number (if any) ► A- 3.a. Page Number 3.b. Part Number 3.c. Item Number 3.d.	6.d.					
08/07		20	2	20		
	7.a. 7.d.	Page Number	7.b.	Part Number	7.c.	Item Number
4.a. Page Number 4.b. Part Number 4.c. Item Number 4.d.						

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