

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 USC	CIS Use (Only			
Preference Category:	Recei	ipt		Action Block	k	
Country Chargeable:	I JK					
Priority Date:						
Date Form I-693 Received:						
Applicant Interview Interviewed Waived Date of Initial Interview: Lawful Permanent Resident as of:	Section of Law					
To be c	ompleted by an attorney	or accredi	ted represen	tative (if any).		
Select this box if Form G-28 is attached. Volag Nu (if any)	mber Attorne (if appl	ey State Ba	r Number	Attorney or Accredited I USCIS Online Account N		
► START HERE - Type or print i	n black ink.		A-Nu	ımber ▶ 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 Yo	ou (Person applying	3.a.	Family Name (Last Name)			
for lawful permanent residence)		3.b.	Given Name			
Your Current Legal Name (do nickname)	not provide a	3.c.	(First Name) Middle Nam			
1.a. Family Name		4.a.	Family Nam			
(Last Name) 1.b. Given Name] 4.b.	(Last Name) Given Name			
(First Name)]	(First Name)			
1.c. Middle Name		4.c.	Middle Nam	e		
Other Names You Have Used Sapplicable)	Since Birth (if	Othe	er Informa	tion About You		
**	1 ' 1 '	5.	Date of Birth	n (mm/dd/yyyy)		
NOTE: Provide all other names you be your family name at birth, other legal realiases, and assumed names. If you ne complete this section, use the space productional Information.	names, nicknames, and extra space to		include any o	addition to providing your a other dates of birth you have with any legal names or non ovided in Part 14. Addition	ve used in n-legal names in	
2.a. Family Name (Last Name)		6.	Sex	Male Female		
2.b. Given Name (First Name)		7.	City or Town	n of Birth		
2.c. Middle Name						

A-Number ►	A-					

Par	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):
	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	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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			A-Number ► A-
Par	et 1. Information About You (Person applying	1.d.	Asylee or Refugee
	lawful permanent residence) (continued)		Asylum status (INA section 208), Form I-589 or Form I-730
24.	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
Provi any)	ide your name exactly as it appears on your Form I-94 (if		Human trafficking victim (T Nonimmigrant), Form I-914 or derivative family member, Form I-914A
	. Family Name (Last Name)		Crime victim (U Nonimmigrant), Form I-918, derivative family member, Form I-918A, or qualifying family member, Form I-929
	(First Name)	1.f.	Special Programs Based on Certain Public Laws
25.c.	Middle Name	111.	The Cuban Adjustment Act
Par	et 2. Application Type or Filing Category		☐ The Cuban Adjustment Act for battered spouses and children
	TE: Attach a copy of the Form I-797 receipt or approval se 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
	itional Instructions for more information, including any itional Instructions that relate to the immigrant category		Lautenberg Parolees
	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 child of a fiancé(e) of a U.S. citizen, Form I-129F		Continuous residence in the United States since before January 1, 1972 ("Registry")
	(K-1/K-2 Nonimmigrant)		Individual born in the United States under diplomatic
	☐ Widow or widower of a U.S. citizen, Form I-360		Status Other eligibility
	☐ VAWA self-petitioner, Form I-360		Other engionity
1.b.	Employment-based	2.	Are you applying for adjustment based on the
	Alien worker, Form I-140	2.	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,

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Certain international broadcaster, Form I-360

Form I-360

Certain G-4 international organization or family

member or NATO-6 employee or family member,

Adjustment of Status Under Section 245(i) (Supplement

A). For detailed filing instructions, read the Form I-485 Instructions (including any **Additional Instructions** that

relate to the immigrant category that you selected in Item

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

	t 2. Application Type or Filing Category ntinued)	3. Decision (for example, approved, refused, denied, withdrawn)
•	ormation About Your Immigrant Category a are the principal applicant, provide the following	4. Date of Decision (mm/dd/yyyy)
	mation.	Address History
3.	Receipt Number of Underlying Petition (if any)	Provide physical addresses for everywhere you have lived during the last five years, whether inside or outside the United States. Provide your current address first. If you need extra
4.	Priority Date from Underlying Petition (if any) (mm/dd/yyyy)	space to complete this section, use the space provided in Part 14. Additional Information .
child	u are a derivative applicant (the spouse or unmarried under 21 years of age of a principal applicant), provide the wing information for the principal applicant .	Physical Address 1 (current address) 5.a. Street Number and Name
Princ	ipal Applicant's Name	5.b. Apt. Ste. Flr.
5.a.	Family Name (Last Name)	5.c. City or Town
5.b.	Given Name (First Name)	5.d. State 5.e. ZIP Code
5.c.	Middle Name	5.f. Province
6.7.	Principal Applicant's A-Number (if any) A- Principal Applicant's Date of Birth (mm/dd/yyyy)	5.g. Postal Code 5.h. Country
8.	Receipt Number of Principal's Underlying Petition (if any)	Dates of Residence 6.a. From (mm/dd/yyyy)
9.	Priority Date of Principal Applicant's Underlying Petition (if any) (mm/dd/yyyy)	6.b. To (mm/dd/yyyy) Physical Address 2
Par	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.
	If you answered "Yes" to Item Number 1., complete Item Numbers 2.a 4. below. If you need extra space to complete this section, use the space provided in Part 14. Additional Information.	7.d. State 7.e. ZIP Code 7.f. Province
Loca	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. Apt. Ste. Flr.
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.	
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
D. (D.)	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.	Date of Birth (mm/dd/yyyy) Sex
Prov	ide your most recent employment outside of the United	_5.	City or Town of Birth
State	s (if not already listed above).	3.	City of Town of Biltin
19.	Name of Employer or Company	6.	Country of Birth
		J .	Country of Birth
	ess of Employer or Company	7.	Current City or Town of Residence (if living)
20.a.	Street Number and Name		
20.b.	Apt. Ste. Flr.	8.	Current Country of Residence (if living)
20.c.	City or Town		
20.d.	State 20.e. ZIP Code	Infa	ormation About Your Parent 2
20.f.	Province	Parer	nt 2's Legal Name
20 σ	Postal Code	9.a.	Family Name (Last Name)
	Country	9.b.	Given Name (First Name)
		9.c.	Middle Name
21.	Your Occupation	Parer	nt 2's Name at Birth (if different than above)
	/10/11		Family Name
Date	s of Employment	10 k	(Last Name)
22.a.	From (mm/dd/yyyy)	10.0.	Given Name (First Name)
22.b.	To (mm/dd/yyyy)	10.c.	Middle Name
		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		
	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	101	The state of the s
	nt 1's Name at Birth (if different than above)	16.	Current Country of Residence (if living)
	Family Name (Last Name)		
2.b.	Given Name (First Name)		
2.c.	Middle Name		

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Par	t 5. Information About Your Marital History	Place of Marriage to Current Spouse
	· ·	9.a. City or Town
1.	What is your current marital status?	
	Single, Never Married Married Divorced	9.b. State or Province
	Widowed Marriage Annulled	
•	Legally Separated	9.c. Country
2.	If you are married, is your spouse a current member of the U.S. armed forces or U.S. Coast Guard?	
	☐ 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)
(inc	ormation About Your Current Marriage eluding if you are legally separated)	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
	u are currently married, provide the following information tyour current spouse.	Information to provide the information below.
Curr	ent 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
4.c.	Middle Name	(First Name) 11.c. Middle Name
5.	A-Number (if any)	
	► A-	12. Prior Spouse's Date of Birth (mm/dd/yyyy)
5.	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
		14.a. City or Town
Curr	ent Spouse's Place of Birth	
8.a.	City or Town	14.b. State or Province
8.b.	State or Province	14.c. Country
8.c.	Country	
<i>,</i>	Country	15. Date Marriage with Prior Spouse Legally Ended (mm/dd/yyyy)

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	et 5. Information About Your Marital History	Chile Curr	1 2 ent Legal Name
	e Where Marriage with Prior Spouse Legally Ended		Family Name
	City or Town	7.b.	(Last Name) Given Name
			(First Name)
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
Par	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?
	NOTE: The term "children" includes all biological or	Chile	13
legally adopted children, as well as current stepchildren, of any age, whether born in the United States or other			ent Legal Name
	countries, married or unmarried, living with you or elsewhere and includes any missing children and those	12.a.	Family Name (Last Name)
	born to you outside of marriage.	12.b	. Given Name
ъ		12 0	(First Name) Middle Name
	ide the following information for each of your children. u have more than three children, use the space provided in		
Part	14. Additional Information.	13.	A-Number (if any) A-
Chile	11		
Curr	ent Legal Name	14.	Date of Birth (mm/dd/yyyy)
2.a.	Family Name (Last Name)	15.	Country of Birth
2.b.	Given Name (First Name)		
2.c.	Middle Name	16.	Is this child applying with you? Yes No
3.	A-Number (if any)	Dox	t 7. Biographic Information
	► A-		5 k
4.	Date of Birth (mm/dd/yyyy)	1.	Ethnicity (Select only one box)
5.	Country of Birth		Hispanic or Latino Not Hispanic or Latino
٥.	Country of Brui	2.	Race (Select all applicable boxes)
		2.	White
6.	Is this child applying with you? Yes No		Asian
			Black or African American
			American Indian or Alaska Native
			Native Hawaiian or Other Pacific Islander

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Par	t 7. Biographic Information (continued)	Dates of Membership or Dates of Involvement
3.	Height Feet Inches	5.a. From (mm/dd/yyyy)
4.	Weight Pounds Pounds	5.b. To (mm/dd/yyyy)
5.	Eye Color (Select only one box)	Organization 2
	☐ Black ☐ Blue ☐ Brown	6. Name of Organization
	Gray Green Hazel	
	☐ Maroon ☐ Pink ☐ Unknown/Other	7.a. City or Town
6.	Hair Color (Select only one box)	
	Bald (No hair) Black Blond	7.b. State or Province
	☐ Brown ☐ Gray ☐ Red	
	Sandy White Unknown/Other	7.c. Country
	t 8. General Eligibility and Inadmissibility	8. Nature of Group
Gro	unds	
1.	Have you EVER been a member of, involved in, or in	Dates of Membership or Dates of Involvement
	any way associated with any organization, association, fund, foundation, party, club, society, or similar group in	9.a. From (mm/dd/yyyy)
	the United States or in any other location in the world including any military service? Yes No	9.b. To (mm/dd/yyyy)
If you	answered "Yes" to Item Number 1., complete Item	Organization 3
Num	bers 2 13.b. below. If you need extra space to complete ection, use the space provided in Part 14. Additional	
	mation. If you answered "No," but are unsure of your	
	er, provide an explanation of the events and circumstances space provided in Part 14. Additional Information .	11.a. City or Town
2.	nization 1 Name of Organization	11.b. State or Province
4.	Traine of Organization	
3.a.	City or Town	11.c. Country
J.a.	City of Town	
3.b.	State or Province	12. Nature of Group
J.D.	State of Frontier	
3.c.	Country	Dates of Membership or Dates of Involvement
		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 Informat i	ion.			
14.	Have you EVER been denied admiss States?	ion to	the U Yes		l No
15.	Have you EVER been denied a visa to	to the	United Yes		tes? No
16.	Have you EVER worked in the Unite authorization?	ed Sta	tes wi		No
17.	Have you EVER violated the terms of nonimmigrant status?	or con	ditions Yes		our No
18.	Are you presently or have you EVER exclusion, rescission, or deportation p			?	l, No
19.	Have you EVER been issued a final deportation, or removal?	order		lusio	
20.	Have you EVER had a prior final ord deportation, or removal reinstated?	der of	exclus Yes		No
21.	Have you EVER held lawful perman which was later rescinded?	ent re	sident Yes		is No
22.	Have you EVER been granted voluminmigration officer or an immigration depart within the allotted time?	-	-	faile	
23.	Have you EVER applied for any kind protection from removal, exclusion, or	or dep		n?	No
24.a.	Have you EVER been a J nonimmign who was subject to the two-year foreir requirement?	ign re	-	e	sitor No
Num	a 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?	_	nce Yes		No
24.c.	Have you been granted a waiver or has State issued a favorable waiver reconfor you?	nmend		lette	ſ

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
	(including 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 committed a crime	of any kind (even if
	you were not arrested, cited, charged	with, or tried for that
	crime)?	□ Ves □ No

27.	Have you EVER pled guilty to or	been convicted of a
	crime or offense (even if the violat	ion was subsequently
	expunged or sealed by a court, or is	f you were granted a
	pardon, amnesty, a rehabilitation d	ecree, 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)

	ounds (continued)				
31.	Have you EVER been convicted of to (other than purely political offenses) to combined sentences to confinement with more?	for w	hich t	he ears o	
32.	Have you EVER illicitly (illegally) tr				
	from the trafficking of any controlled	subs	tances	, suc	h as
	chemicals, illegal drugs, or narcotics?		Yes		No
33.	Have you EVER knowingly aided, all conspired, or colluded in the illicit traillegal narcotic or other controlled sub-	ffick	ing of		N
		Ш	res	Ш	No
34.	Are you the spouse, son, or daughter who illicitly trafficked or aided (or of assisted, conspired, or colluded) in the a controlled substance, such as cheminarcotics and you obtained, within the financial or other benefit from the illespouse or parent, although you knew have known that the financial or other from the illicit activity of your spouse.	herwe illicals, e last e gal a or rear ten	ise ab cit traf illega five y activity asonal efit re	etted ficki l dru years, y of y oly sl sulte	, ng of gs, or any our nould
		П	Yes		No
35.	Have you EVER engaged in prostitut coming to the United States to engage				
			Yes		No
36.	Have you EVER directly or indirectly attempted to procure) or imported profor the purpose of prostitution?				ons No
25		_		_	
37.	Have you EVER received any proceed	ds o	mone	ey fro	om
	prostitution?		Yes		No
38.	Do you intend to engage in illegal gar form of commercialized vice, such as bootlegging, or the sale of child porne United States?	pros	titutio	n,	
39.	Have you EVER exercised immunity otherwise) to avoid being prosecuted	_			
	offense in the United States?		Yes		No
40.	Have you EVER , while serving as a fofficial, been responsible for or direct violations of religious freedoms?				nent No
41.	Have you EVER induced by force, fr	aud,	or coe	ercio	ı (or
	otherwise been involved in) the traffic				
	commercial sex acts?		Yes		No

- 42. Have you **EVER** trafficked a person into involuntary servitude, peonage, debt bondage, or slavery? Trafficking includes recruiting, harboring, transporting, providing, or obtaining a person for labor or services through the use of force, fraud, or coercion.

 Yes 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?

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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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? ☐ Yes 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

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57.

Yes No

Yes No

☐ Yes ☐ No

substantial damage to property?

described in Item Number 51.a.?

described in Item Number 51.a.?

51.b. Participated in, or been a member or a representative of a

group or organization that did any of the activities

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

During the period from March 23, 1933 to May 8, 1945,

did you ever order, incite, assist, or otherwise participate in the persecution of any person because of race, religion,

national origin, or political opinion, in association with

organization or government associated or allied with the

Yes

☐ No

either the Nazi government of Germany or any

Nazi government of Germany?

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	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
58.d. Engaging in any kind of sexual contact or relations with any person who did not consent or was unable to consent, or was being forced or threatened? Yes No	66. Have you EVER falsely claimed to be a U.S. citizen (in writing or any other way)? Yes No
58.e. Limiting or denying any person's ability to exercise religious beliefs? Yes No	67. Have you EVER been a stowaway on a vessel or aircraft arriving in the United States? Yes No
Any person under 15 years of age to serve in or help an armed force or group? Yes No	68. Have you EVER knowingly encouraged, induced, assisted, 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? Yes No
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
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 No Are you likely to receive public assistance in the future in	71. Have you EVER entered the United States without being inspected and admitted or paroled? Yes No
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?

		A-Number A-
Since reent or pa	et 8. General Eligibility and Inadmissibility bunds (continued) e April 1, 1997, have you EVER reentered or attempted to er the United States without being inspected and admitted roled after:	80.a. 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 80.b. If your answer to Item Number 80.a. is "Yes," what was your nationality or immigration status immediately before
	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? Yes No	you left (for example, U.S. citizen or national, lawful permanent resident, nonimmigrant, parolee, present without admission or parole, or any other status)?
Mis	cellaneous Conduct	Part 9. Accommodations for Individuals With
74.	Do you plan to practice polygamy in the United States? Yes No	Disabilities and/or Impairments NOTE: Read the information in the Form I-485 Instructions before completing this part.
75.	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	1. 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, or local constitutional provision, statute, ordinance, or	
78.	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?

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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

		Select the box for either Item Number 1.a. or 1.b. If e, select the box for Item Number 2.
аррп	Cable	e, 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
		a language in which I am fluent, and I understood everything.
2.		At my request, the preparer named in Part 12. ,
		,
		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
4.	App	olicant's Mobile Telephone Number (if any)

Applicant's Declaration and Certification

Applicant's Email Address (if any)

5.

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.

An	ml	lican	ıt's	Sig	natur	·e
4 - P	\boldsymbol{p} .	····		~~		•

6.a.	Applicant's Signature (sign in ink)	
\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)

Interpreter's Mailing Address	Ap	plication, if Othe
3.a. Street Number and Name	Prov	vide the following info
3.b.	Pre	eparer's Full Nam
3.c. City or Town	1.a.	Preparer's Family N
3.d. State 3.e. ZIP Code	1.b.	Preparer's Given Na
3.f. Province		+(-)+
3.g. Postal Code	2.	Preparer's Business
3.h. Country		
	Pre	eparer's Mailing A
Interpreter's Contact Information	3.a.	Street Number and Name
4. Interpreter's Daytime Telephone Number	3.b.	Apt. Ste.
	3.c.	City or Town
5. Interpreter's Mobile Telephone Number (if any)	3.d.	State 3.e.
6. Interpreter's Email Address (if any)	3.f.	Province
	3.g.	Postal Code
Interpreter's Certification	3.h.	Country
I certify, under penalty of perjury, that:		
I am fluent in English and , which is the same language specified in Part 10. , Item Number	Pre	eparer's Contact I
1.b. , and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or	4.	Preparer's Daytime
she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.	5.	Preparer's Mobile To
	6.	Preparer's Email Ad
Interpreter's Signature		
7.a. Interpreter's Signature (sign in ink)		
7.b. Date of Signature (mm/dd/yyyy)		
7.b. Date of Signature (mm/dd/yyyy)		

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

Provide the following information about the preparer.

Pre	parer'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)
_	(if unity)
Pre	parer's Mailing Address
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
Pre	parer's Contact Information
4.	Preparer's Daytime Telephone Number
5.	Preparer's Mobile Telephone Number (if any)
_ ,	1
6.	Preparer's Email Address (if any)

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

(continued) Preparer's Statement I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent. **7.b.** \[I am an attorney or accredited representative and my representation of the applicant in this case extends does not extend beyond the preparation of this application. 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, with this application. Preparer's Certification 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.

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 a	t Interview
1 41 1 101	Digitalate	C IIICCI VIC V

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 Inform	ation	5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
If you need extra space to provide a within this application, use the space space than what is provided, you may to complete and file with this applicationsheet of paper. Type or print your nat the top of each sheet; indicate the Number , and Item Number to whis sign and date each sheet.	e below. If you need more by make copies of this page ration or attach a separate name and A-Number (if any) Page Number, Part	5.d.		•			
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-		<i>(</i>					
3.a. Page Number 3.b. Part Nu	3.c. Item Number	6.d.	T				
3.d.						4	
	8/11		20		20		
		7.a.	Page Number	7.b.	Part Number	7.c.	Item Number
		7.d.					
4.a. Page Number 4.b. Part Nu	4.c. Item Number						

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