



# Declaration of Financial Support

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
**Form I-134**  
OMB No. 1615-0014  
Expires 12/31/2027

## What Is the Purpose of Form I-134?

Some immigration benefits that involve a temporary stay in the United States require U.S. Citizenship and Immigration Services (USCIS) to determine whether the applicant or beneficiary of the request has sufficient financial resources or financial support to pay for expenses during the temporary stay. The individual who signs and files Form I-134 must establish that he or she has both sufficient financial resources and access to those funds to support the beneficiary listed on Form I-134 for the duration of the beneficiary's temporary stay in the United States. Beneficiaries are not obligated to repay, reimburse, or otherwise compensate their supporter in exchange for filing Form I-134 on their behalf or for providing financial support while they are in the United States.

## Who Must File Form I-134?

Certain individuals applying for parole based on urgent humanitarian reasons or significant public benefit filed on Form I-131, Application for Travel Documents, Parole Documents, and Arrival/Departure Records, must file this form with Form I-131. Form I-134 is filed either by the applicant for parole on his or her own behalf, or by another individual on the parole applicant's behalf.

**NOTE:** Whether or not the beneficiary of this Form I-134 will have sufficient means of support while in the United States is an important factor in determining whether to exercise discretion to authorize parole. We require evidence that the beneficiary of this Form I-134 has financial support for the duration of his or her temporary stay in the United States. Lack of evidence of financial support while in the United States is a strong negative factor that may lead to a denial of parole.

## Who May File Form I-134?

You may file this form on behalf of yourself or on behalf of a B, F, or M nonimmigrant requesting extension of stay or change of status.

Form I-134 may also be requested by Department of State in certain instances.

**Do not use Form I-134 if the beneficiary you are agreeing to financially support must have Form I-864, Affidavit of Support Under Section 213A of the INA, filed on his or her behalf instead.**

## Submission of Declaration

If you are agreeing to financially support more than one beneficiary, you must file a separate Form I-134 for each beneficiary. You, as the individual agreeing to financially support the beneficiary, must sign your full name on the form.

## General Instructions

We provide free forms through the USCIS website. To view, print, or complete our forms, you should use the latest version of Adobe Reader, which you can download for free at <http://get.adobe.com/reader/>. If you do not have internet access, you may call the USCIS Contact Center and ask that we mail a form to you.

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**Signature.** You (or your signing authority) must properly complete your declaration. USCIS will not accept a stamped or typewritten name in place of any signature on this declaration. If you are under 14 years of age, your parent or legal guardian may sign the declaration on your behalf. A legal guardian may also sign for a mentally incompetent person. If your declaration is not signed, or if the signature is not valid, we will reject your declaration. See 8 CFR 103.2(a)(7)(ii)(A). If USCIS accepts a request for adjudication and determines that it has a deficient signature, USCIS will deny the request.

**Validity of Signatures.** USCIS will consider a photocopied, faxed, or scanned copy of an original handwritten signature as valid for filing purposes. The photocopy, fax, or scan must be of the original document containing the handwritten ink signature.

**Filing Fee.** See Form G-1055, available at <https://www.uscis.gov/forms>, for specific information about the fees applicable to this form.

**Evidence.** When you file your declaration, you must file all evidence and supporting documents listed in the **Supporting Evidence (for beneficiary and person providing support to beneficiary)** and/or **Specific Instructions** sections of these Instructions.

**Biometric Services Appointment.** USCIS may require you to appear for an interview or provide biometrics (fingerprints, photograph, and/or signature) at any time to verify your identity, obtain additional information, and conduct background and security checks, including a check of criminal history records maintained by the Federal Bureau of Investigation (FBI), before making a decision on your application or petition. If we determine that a biometric services appointment is necessary, we will send you an appointment notice with the date, time, and location of your appointment. If you are currently overseas, your notice will instruct you to contact a U.S. Embassy, U.S. Consulate, or USCIS office outside the United States to schedule an appointment.

At your biometrics appointment, you must sign an oath reaffirming that:

1. You provided or authorized all information in the declaration;
2. You reviewed and understood all of the information contained in, and filed with, your declaration; and
3. All of this information was complete, true, and correct at the time of filing.

If you do not attend your biometric services appointment, we may deny the beneficiary's immigration benefit request.

**Copies.** You should file legible photocopies of requested documents unless the Instructions specifically instruct you to file an original document. USCIS may request an original document at any time during our process. If we request an original document from you, we will return it to you after USCIS determines it no longer needs the original.

**NOTE:** If you file original documents when they are not required or requested, **USCIS may destroy them after we receive them.**

**Translations.** If you submit a document with information in a foreign language, you must also submit a full English translation. The translator must sign a certification that the English language translation is complete and accurate, and that he or she is competent to translate from the foreign language into English. The certification must also include the translator's signature, printed name, the signature date, and the translator's contact information.

**USCIS Contact Center.** For additional information on the form and Instructions about where to file, change of address, and other questions, visit the USCIS Contact Center at [www.uscis.gov/contactcenter](http://www.uscis.gov/contactcenter) or call at **800-375-5283** (TTY **800-767-1833**). The USCIS Contact Center provides information in English and Spanish.

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## How To Complete Form I-134

1. Type or print legibly in black ink.
2. If you need extra space to complete any item within this declaration, use the space provided in **Part 8. Additional Information** or attach a separate sheet of paper. Type or print your name and Alien Registration Number (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.
3. Answer all questions fully and accurately. If a question does not apply to you (for example, if you have never been married and the question asks, “Provide the name of your current spouse”), type or print “N/A” unless otherwise directed. If your answer to a question which requires a numeric response is zero or none (for example, “How many children do you have” or “How many times have you departed the United States”), type or print “None” unless otherwise directed.
4. **USCIS Online Account Number.** You will only have a USCIS Online Account Number (OAN) if you previously filed a form that has a receipt number that begins with IOE. If you filed the form online, you can find your OAN in your account profile. If you mailed us the form, you can find your OAN at the top of the Account Access Notice we sent you. If you do not have a receipt number that begins with IOE, you do not have an OAN. The OAN is not the same as an A-Number.
5. **Part 4. Statement, Contact Information, Certification, and Signature of the Beneficiary (if filing Form I-134 on his or her own behalf).** You must sign and date your declaration in **Part 4.** if you are filing Form I-134 on your own behalf; and if applicable, provide your daytime telephone number, mobile telephone number, and email address. The signature of a parent or legal guardian, if applicable, is acceptable. A stamped or typewritten name in place of a signature is not acceptable.
6. **Part 5. Statement, Contact Information, Certification, and Signature of the Individual Agreeing to Financially Support the Beneficiary.** You must sign and date your declaration in **Part 5.** if you are filing Form I-134 on behalf of someone else (a beneficiary); and if applicable, provide your daytime telephone number, mobile telephone number, and email address. The signature of a parent or legal guardian, if applicable, is acceptable. A stamped or typewritten name in place of a signature is not acceptable.
7. **Part 6. Interpreter’s Contact Information, Certification, and Signature.** If you used anyone as an interpreter to read the Instructions and questions on this declaration to you in a language in which you are fluent, the interpreter must fill out this section and sign and date the declaration.
8. **Part 7. Contact Information, Certification, and Signature of the Person Preparing this Declaration, if Other Than the Individual Agreeing to Financially Support the Beneficiary.** The person who completed your declaration, if other than the individual agreeing to financially support the beneficiary, must sign this section. If the same individual acted as your interpreter and your preparer, then that person should complete both **Part 6.** and **Part 7.** A stamped or typewritten name in place of a signature is not acceptable.

**We recommend that you print or save a copy of your completed declaration for your records.**

### Specific Instructions

**Part 1. Basis for Filing.** Select the appropriate box for **Item Number 1.**

Select the first box if you are filing Form I-134 on your own behalf and intend to financially support yourself.

Select the second box if you are not filing Form I-134 on your own behalf, and instead, you are the individual agreeing to financially support the beneficiary applying for an immigration benefit.

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## Part 2. Information About the Individual Agreeing to Financially Support the Beneficiary

**Part 2.** is to be completed by all individuals filing a Form I-134.

**Item Number 1. Current Legal Name.** Provide the full name of the individual who is agreeing to financially support themselves or the beneficiary named in **Part 3**. Provide your legal name, as shown on your birth certificate or legal name change document. If you have two last names, include both and use a hyphen (-) between the names, if appropriate. Type or print your last, first, and middle names in each appropriate field.

**Item Number 6. Date of Birth.** Enter your date of birth in mm/dd/yyyy format in the space provided. For example, type or print October 5, 1967 as 10/05/1967.

**Item Number 7. Place of Birth.** Enter the name of the city or town, state or province, and country where you were born. Type or print the name of the country as it was named when you were born, even if the country's name has changed or the country no longer exists.

**Item Number 8. Alien Registration Number (A-Number).** Provide your A-Number. We use your A-Number to identify your immigration records. It begins with an "A" and can be found on correspondence you have received from the Department of Homeland Security (DHS) or USCIS. If you do not have an A-Number, type or print "N/A."

**Item Number 11. Immigration Status.** Select the appropriate box for your current immigration status. Provide evidence of your status. A U.S. citizen or U.S. national may file a copy of a birth certificate, certificate of naturalization, certificate of citizenship, consular report of birth abroad to U.S. parents, or a copy of the biographic data page on your U.S. passport. Proof of lawful permanent resident status includes a photocopy of both sides of the Permanent Resident Card or Alien Registration Receipt Card (Form I-551), or a photocopy of an unexpired temporary Form I-551 stamp in either a foreign passport or DHS Form I-94 Arrival Departure Record. Proof of lawful nonimmigrant status may include a copy of an unexpired visa in a foreign passport.

### *Financial Information*

#### **Item Numbers 14., 15., and 16. Financial Responsibility for Other Individuals.**

Provide information about other individuals who are dependent on your income. This includes:

- Family members;
- Beneficiaries named on any Form I-134 or Form I-134A you have previously filed, and who you are still supporting;
- Beneficiaries named on any Form I-864 and Form I-864EZ you executed, where you are listed as the sponsor and your support obligation has not ended; and,
- Beneficiaries for whom you have signed and submitted a Form I-864A agreeing to make your income and/or assets available to the sponsor to help support the intending immigrant and your support obligation has not ended.

Do not include the beneficiary named in **Part 3**.

**Item Number 17. Income.** Provide information on your annual income. If you filed a Federal tax return, enter the amount from the line listing your adjusted gross income on Internal Revenue Service (IRS) Form 1040, U.S. Individual Income Tax Return. If you have not filed a Federal tax return, take your total household income from all lawful sources for the previous 12-month period and enter that amount as your household's annual income. If you have not filed a Federal income tax return but you have an IRS Form W-2, Wage and Tax Statement, that covers the previous 12-month period, take your total income, deduct Federal, state, and local income taxes withheld, and enter that amount as your household's annual income.

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You may not rely on income from illegal acts, such as proceeds from illegal gambling or drug sales, even if you paid taxes on that income, to establish that you have both sufficient financial resources and access to those funds to support the beneficiary. Do not include any income that comes from an illegal activity or source in **Item Number 16**.

**Item Number 18. Assets.** Provide information about any assets you will use to support the beneficiary for the anticipated period of his or her stay. List only assets that can be converted into cash within 12 months and that will be used to support the beneficiary while the beneficiary is in the United States. Provide the value of all assets listed in U.S. dollars, regardless of whether they are held in the United States or outside of the United States. Do not include assets from any individuals named in **Part 3**.

You may include the net value of a home as an asset. The net value of the home is the appraised value of the home, minus the sum of all loans secured by a mortgage, trust deed, or other lien on the home. If you include the net value of your home, then you must include documentation demonstrating that you own the home, a recent appraisal by a licensed appraiser, and evidence of the amount of all loans secured by a mortgage, trust deed, or other lien on the home.

You may not include the net value of an automobile unless you show that you have more than one automobile, and at least one automobile is not included as an asset.

You may not rely on assets from illegal acts, such as proceeds from illegal gambling or drug sales, even if you paid taxes on that asset, to establish that you have both sufficient financial resources and access to those funds to support the beneficiary. Do not include any assets that comes from an illegal activity or source in **Item Number 18**.

File evidence of the value of your or your household members' assets. Evidence must include the name of the asset holder, a description of the asset, proof of ownership, and the basis for the owner's claim of its net cash value.

### **Part 3. Information about the Beneficiary**

**Item Number 1. Beneficiary's Current Legal Name.** Provide the beneficiary's legal name, as shown on his or her birth certificate or legal name change document. If the beneficiary has two last names, include both and use a hyphen (-) between the names, if appropriate. Type or print the beneficiary's last, first, and middle names in each appropriate field.

**Item Number 3. Date of Birth.** Enter the beneficiary's date of birth in mm/dd/yyyy format in the space provided. For example, type or print October 5, 1967 as 10/05/1967.

**Item Number 4. Sex.** Indicate whether the beneficiary is male or female as provided on his or her birth certificate issued at the time of birth or issued closest to the time of birth or in secondary evidence provided to USCIS, if applicable.

**Item Number 5. Alien Registration Number (A-Number).** Provide the beneficiary's A-Number. USCIS uses the beneficiary's A-Number to identify the beneficiary's immigration records. It begins with an "A" and can be found on correspondence the beneficiary received from the Department of Homeland Security (DHS) or USCIS. If the beneficiary does not have an A-Number, type or print "N/A."

**Item Number 6. Place of Birth.** Enter the name of the city or town, state or province, and country where the beneficiary was born. Type or print the name of the country as it was named when the beneficiary was born, even if the country's name has changed or the country no longer exists.

**Item Number 7. Country of Citizenship or Nationality.** Provide the name of the country where the beneficiary is a citizen and/or national. This is not necessarily the country where the beneficiary was born. If the beneficiary does not have citizenship in any country, type or print "stateless" and provide an explanation in **Part 8. Additional Information**.

**Item Number 8. Marital Status.** Select the appropriate box.

**Item Number 12. Beneficiary's Anticipated Length of Stay.** Enter the anticipated start date of the beneficiary's stay in the United States in **Item Number 12**. Select the option that matches the anticipated end date of the beneficiary's stay. If the beneficiary's stay has an end date, you must enter the anticipated end date in mm/dd/yyyy format in the space provided for that option. If the beneficiary's anticipated stay does not have an end date, select the "No End Date" option.

## Supporting Evidence (for beneficiary and person providing support to beneficiary)

As the person who agrees to financially support the beneficiary (including yourself if you are filing Form I-134 on your own behalf), you must show you have sufficient income or financial resources to support the beneficiary.

Evidence should consist of copies of any of the documents listed below that apply.

Failure to provide evidence of sufficient income or financial resources may result in the denial of the beneficiary's immigration benefit request or their removal from the United States.

File evidence of income and resources, as appropriate:

1. Statement from an officer of the bank or other financial institutions with deposits, identifying the following details regarding the account:
  - A. Date account opened;
  - B. Total amount deposited for the past year; and
  - C. Present balance.
2. Statement(s) from your employer on business stationery showing:
  - A. Date and nature of employment;
  - B. Salary paid; and
  - C. Whether the position is temporary or permanent.
3. Copy of last U.S. federal income tax return filed (tax transcript). If you did not file a Federal tax return, or if your Federal tax return does not properly reflect your current income, submit copies of consecutive pay statements (stubs) for a minimum of the past month, recent Form W-2, or Form SSA-1099.
4. List containing serial numbers and denominations of bonds and name of record owner(s).

## Where To File?

Please see our website at [www.uscis.gov/I-134](http://www.uscis.gov/I-134) for the most current information about where to file this declaration.

## Address Change

If you are not a U.S. citizen, you must notify USCIS of your new address within 10 days of moving from your previous residence. For information on changing your address, go to our website at [www.uscis.gov/addresschange](http://www.uscis.gov/addresschange) or call the USCIS Contact Center.

**NOTE:** Do not file a change of address request to the USCIS Lockbox.

## Processing Information

**Initial Processing.** Once USCIS accepts your declaration, we will check it for completeness. If you do not properly complete this declaration, you will not establish a basis for your eligibility and we may reject or deny your declaration.

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**Requests for More Information.** USCIS or Department of State may request that you provide more information or evidence to support your declaration. We may also request that you provide the originals of any copies you file. If we request an original document from you, we will return it to you after USCIS determines it is no longer needed.

**Requests for Interview.** We may request that you appear at a USCIS office for an interview based on your declaration. During your interview, USCIS may require you to provide your biometrics to verify your identity and/or update background and security checks.

**Decision.** The decision on Form I-134 involves a determination of whether you have established that the beneficiary has sufficient financial support for the duration of their temporary stay in the United States.

### USCIS Forms and Information

To ensure you are using the latest version of this declaration, visit [www.uscis.gov](http://www.uscis.gov).

### Penalties

If you knowingly and willfully falsify or conceal a material fact or file a false document with your Form I-134, we will determine that you failed to demonstrate that you have sufficient resources to support the beneficiary and may deny the beneficiary's application for an immigration benefit. In addition, you will face severe penalties provided by law and may be subject to criminal prosecution.

### DHS Privacy Notice

**AUTHORITIES:** The information requested on this declaration, and the associated evidence, is collected under the Immigration and Nationality Act (INA), sections 1101, 1182(a)(4), 1183, 1184(a), and 1258.

**PURPOSE:** The primary purpose for providing the requested information on this declaration is to show that the applying immigrant has enough financial support to live without concern of becoming reliant on U.S. Government welfare.

**DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, including your Social Security number (if applicable), and any requested evidence, may delay a final decision or result in denial of your immigration benefit.

**ROUTINE USES:** DHS may share the information you provide on this declaration and any additional requested evidence with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS/USCIS-001 - Alien File, Index, and National File Tracking System and DHS/USCIS-007 - Benefits Information System, and DHS/USCIS-018 Immigration Biometric and Background Check.] and the published privacy impact assessments [DHS/USCIS/PIA-016a Computer Linked Application Information Management System and Associated Systems, DHS/USCIS/PIA-051 Case and Activity Management for International Operations (CAMINO), and DHS/USCIS/PIA-003 Integrated Digitization Document Management Program (IDDMP).] which you can find at [www.dhs.gov/privacy](http://www.dhs.gov/privacy). DHS may also share this information, as appropriate, for law enforcement purposes or in the interest of national security.

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**Paperwork Reduction Act**

USCIS may not conduct or sponsor an information collection, and you are not required to respond to a collection of information, unless it displays a currently valid Office of Management and Budget (OMB) control number. The public reporting burden for this collection of information is estimated at 1.65 hours per response, including the time for reviewing instructions, gathering the required documentation and information, completing the declaration, preparing statements, attaching necessary documentation, and filing the declaration. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 5900 Capital Gateway Drive, Mail Stop #2140, Camp Springs, MD 20588-0009; OMB No. 1615-0014. **Do not mail your completed Form I-134 to this address.**

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