TABLE OF CHANGES – FORM
Form I-485, Application to Register Permanent Residence or Adjust Status
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10/29/2026

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Current Page Number and Section	Current Text	Proposed Text
For USCIS Use Only	**[Page 1]** **Preference Category:** **Country Chargeable:** **…**	 **Preference Category:** **Country Chargeable:** …
Page 1-4, **Part 1. Information About You** (Person applying for lawful permanent residence)	**[Page 1]** **Part 1. Information About You** (Person applying for lawful permanent residence) **…** **7.** Place of Birth City or Town of Birth Country of Birth **8.** Country of Citizenship or Nationality **[new]** **9.** USCIS Online Account Number (if any) If one has been assigned, you can find it on a notice that USCIS may have sent to you. **[new]**	 **Part 1. Information About You** (Person applying for lawful permanent residence) **…** **7.** Place of Birth City/Town/Village of Birth State or Province of Birth Country of Birth **8.a.** Country/Countries of Citizenship or Nationality **8.b.** All Prior Countries of Citizenship or Nationality (if applicable) **9.** USCIS Online Account Number (if any) If one has been assigned, you can find it on a notice that USCIS may have sent to you. **10.** Telephone Number(s) Used in the Past Five (5) Years (include country code) [Table, 5 entries]

		Telephone Numbers (include country code) **Mobile or Landline** **Personal or Business** **Date Use Started** (mm/dd/yyyy) **Date Use Ended** (mm/dd/yyyy) **11.** Email Address(es) Used in the Past Ten (10) Years [Table, 5 entries] **Email Address(es)** **Personal or Business** **Date Use Started** (mm/dd/yyyy) **Date Use Ended** (mm/dd/yyyy) **12.** Point of Contact Current Legal Name (**Do not** provide a nickname) Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) **13.** Point of Contact Telephone Number **14.** Point of Contact Email Address
	10. Recent Immigration History If you last entered the United States using a passport or travel document, provide the following information. Passport or Travel Document Number Used at Last Arrival **[moved down]** **[new]** Expiration Date of this Passport or Travel Document (mm/dd/yyyy) Country that Issued this Passport or Travel Document Nonimmigrant Visa Number Used During Most Recent Arrival (if any) Date Nonimmigrant Visa Was Issued (mm/dd/yyyy)	Recent Immigration History If you last entered the United States using a passport, travel document, or national identification (ID), provide the following information. **15.a.** Passport/Travel Document/National ID Number Used at Last Arrival **15.b.** Country that Issued this Passport/Travel Document/National ID **15.c.** Issue Date of this Passport/Travel Document/National ID (mm/dd/yyyy) **15.d.** Expiration Date of this Passport/Travel Document/National ID (mm/dd/yyyy) **[moved up]** **15.e.** Nonimmigrant Visa Number Used During Most Recent Arrival (if any) **15.f.** Date Nonimmigrant Visa Was Issued (mm/dd/yyyy) **15.g.** Place and Date of Last Arrival into the United States

	Place and Date of Last Arrival into the United States City or Town State Date of Last Arrival (mm/dd/yyyy) **11.** When I last arrived in the United States: [ ] I was inspected at a Port of Entry and admitted as (for example, exchange visitor, visitor, temporary worker, student): [Fillable field] [ ] I was inspected at a Port of Entry and paroled as (for example, humanitarian parole, Cuban parole): [Fillable field] [ ] I came into the United States without admission or parole. [ ] Other: [Fillable field] **[Page 3]** **12.** If you were issued a Form I-94 Arrival/Departure Record, provide the information from your most recent Form I-94 below: Family Name (Last Name) Given Name (First Name) [delete] Form I-94 Arrival/Departure Record Number Expiration Date of Authorized Stay Shown on Form I-94 (mm/dd/yyyy) or Type or Print "D/S" for Duration of Status Immigration Status on Form I-94 (for example, class of admission, or paroled, if paroled) **13.** Was your last arrival the first time you were physically present in the United States? Yes No	City or Town State Date of Last Arrival (mm/dd/yyyy) **16.** When I last arrived in the United States: [ ] I was inspected at a Port of Entry and admitted as (for example, exchange visitor, visitor, temporary worker, student): [Fillable field] [ ] I was inspected at a Port of Entry and paroled as (for example, humanitarian parole, Cuban parole): [Fillable field] [ ] I came into the United States without admission or parole. [ ] Other: [Fillable field] **17.** If you were issued a Form I-94 Arrival/Departure Record, provide the information from your most recent Form I-94 below: Family Name (Last Name) Given Name (First Name) [delete] Form I-94 Arrival/Departure Record Number Expiration Date of Authorized Stay Shown on Form I-94 (mm/dd/yyyy) or Type or Print "D/S" for Duration of Status Immigration Status on Form I-94 (for example, class of admission, or paroled, if paroled) **18.** Was your last arrival the first time you were physically present in the United States? Yes No **19.** What is your current immigration status (if it has changed since your last arrival)?

	14. What is your current immigration status (if it has changed since your last arrival)? **15.** Expiration Date of Current Immigration Status (mm/dd/yyyy) or Type or Print "D/S" for Duration of Status **16.** Have you ever been issued an "alien crewman" visa? Yes No **17.** Did you last arrive in the United States to join a vessel as a seaman or crewman, or while serving in any capacity aboard a vessel or aircraft? Yes No **[new]**	**20.** Expiration Date of Current Immigration Status or Type or Print "D/S" for Duration of Status (mm/dd/yyyy) **21.** Have you ever been issued an "alien crewman" visa? Yes No **22.** Did you last arrive in the United States to join a vessel as a seaman or crewman, or while serving in any capacity aboard a vessel or aircraft? Yes No Current Passport, Travel Document, or National ID (if any) and Last Passport, Travel Document, or National ID (if any) Information Provide information as follows regarding each of your two most recently issued passports, travel documents, and/or National ID cards. **23.a.** Current Passport Country of Issuance Issue Date (mm/dd/yyyy) Expiration Date (mm/dd/yyyy) **23.b.** Current Travel Document Country of Issuance Issue Date (mm/dd/yyyy) Expiration Date (mm/dd/yyyy) **23.c.** Current National ID Country of Issuance Issue Date (mm/dd/yyyy) Expiration Date (mm/dd/yyyy) **23.d.** Last Passport Country of Issuance Issue Date (mm/dd/yyyy) Expiration Date (mm/dd/yyyy) **23.e.** Last Travel Document Country of Issuance Issue Date (mm/dd/yyyy) Expiration Date (mm/dd/yyyy) **23.f.** Last National ID Country of Issuance Issue Date (mm/dd/yyyy) Expiration Date (mm/dd/yyyy)

	18. Addresses **Current U.S. Physical Address** **…** **19.** Social Security Card **…** **Consent for Disclosure:** I authorize disclosure of information from this application to the SSA as required for the purpose of assigning me an SSN and issuing me a Social Security Card. Yes No **[new]**	**24.** Addresses **Current U.S. Physical Address** **…** **25.** Social Security Card **…** **Consent for Disclosure:** I authorize disclosure of information from this application to the SSA as required for the purpose of assigning me an SSN and issuing me a Social Security Card. Yes No **26.a.** Have you had or used a social media account in the past five (5) years? Yes, I have had or used a social media account in the past five (5) years. No, I have not had or used a social media account in the past five (5) years. **26.b.** If you answered "Yes," provide the total number of social media accounts: [fillable field] **26.c.** Enter information associated with your online social media presence over the past five (5) years, if any. If you have had or used an account with a social media provider or platform that is listed in the Instructions, enter that information in the following table. If you need extra space to complete this section, use the space provided in **Part 14. Additional Information**. [Table, 7 entries] **Provider/Platform Listed in Instructions** [dropdown: Discord, Douyin, Facebook, GroupMe, IMO, Instagram, Jodel, Kuaishou, LinkedIn, MySpace, Pinterest, QQ, Qzone, Reddit, Skype, Snapchat, Telegram, Threads, TikTok, Tumblr, Twitch, VK, Weibo, Weixin/WeChat, WhatsApp, X (Formerly Twitter), YouTube] **Identifier/Username/Handle/Alias** **Personal/Business/Organization**

		[Page 7] If you have had or used an account with a social media provider or platform that is **not** listed in the Instructions, enter that information in the following table. If you need extra space to complete this section, use the space provided in **Part 14. Additional Information**. [Table, 3 entries] **Provider/Platform Not Listed in Instructions** **Identifier/Username/Handle/Alias** **Personal/Business/Organization**
Page 5-7, **Part 2. Application Type or Filing Category**	**[Page 5]** **Part 2. Application Type or Filing Category** **…**	**Part 2. Application Type or Filing Category** **…**
Page 8, **Part 3. Request for Exemption for Intending Immigrant's Affidavit of Support Under Section 213A of the INA**	**[Page 8]** **Part 3. Request for Exemption for Intending Immigrant's Affidavit of Support Under Section 213A of the INA** **…**	**Part 3. Request for Exemption for Intending Immigrant's Affidavit of Support Under Section 213A of the INA** **…**
Page 8-9, **Part 4. Additional Information About You**	**[Page 8]** **Part 4. Additional Information About You** **…** **Employment and Educational History** **7.** Provide **ALL** of your employment and educational history for the last 5 years as indicated in the Instructions. Provide your current employment or school attended first. Include periods of self-employment, unemployment, or retirement. For each period of unemployment or retirement, list source of financial support. If you have additional employment or educational history, use the space provided in **Part 14. Additional Information**. **[new]**	**Part 4. Additional Information About You** **…** **Employment and Educational History** Provide **ALL** of your employment and educational history for the past five (5) years as indicated in the Instructions. Provide your current employment or school attended first. Include periods of self-employment, unemployment, or retirement. For each period of unemployment or retirement, list source of financial support. If you have additional employment or educational history, use the space provided in **Part 14. Additional Information**. **7.** School Information **School 1**

		Name City or Town ZIP Code/Postal Code Country School Dates From (mm/dd/yyyy): School Dates To (mm/dd/yyyy): **School 2** Name City or Town ZIP Code/Postal Code Country School Dates From (mm/dd/yyyy): School Dates To (mm/dd/yyyy): **School 3** Name City or Town ZIP Code/Postal Code Country School Dates From (mm/dd/yyyy) School Dates To (mm/dd/yyyy): **8.** Employer/Business Information From the Past Five (5) Years (if any)
	Employer or School (current or most recent) Name of Employer, Company, or School Your Occupation (if unemployed or retired, so state) **[Page 9]** Address of Employer, Company, or School Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country Dates of Employment, Unemployment, Retirement, or School Attendance From (mm/dd/yyyy) To (mm/dd/yyyy)	**[delete]**

	[new]	**Employer/Business 1** Employer/Business Name(s) Employer/Business Mailing Address (if any) Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country Employer/Business Physical Address (if different from Mailing Address) (if any) Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country U.S. Business Federal Employer Identification Number (FEIN) (or other country equivalent) (if any) Occupation
	If unemployed or retired, source of financial support:	If unemployed or retired, source of financial support: Date From (mm/dd/yyyy) Date To (mm/dd/yyyy)
	[new]	**Employer/Business 2** Employer/Business Name(s) Employer/Business Mailing Address (if any) Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country Employer/Business Physical Address (if different from Mailing Address) (if any) Street Number and Name Apt./Ste./Flr. Number City or Town

		State ZIP Code Province Postal Code Country U.S. Business FEIN (or other country equivalent) (if any) Occupation If unemployed or retired, source of financial support: Date From (mm/dd/yyyy) Date To (mm/dd/yyyy) **Employer/Business 3** Employer/Business Name(s) Employer/Business Mailing Address (if any) Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country Employer/Business Physical Address (if different from Mailing Address) (if any) Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country U.S. Business FEIN (or other country equivalent) (if any) Occupation If unemployed or retired, source of financial support: Date From (mm/dd/yyyy) Date To (mm/dd/yyyy)
	8. Provide your most recent employer or school outside of the United States (if not already listed above).	**9.** Provide your most recent employer or school outside of the United States (if not already listed above).

	Name of Employer, Company, or School Your Occupation (if unemployed or retired, so state) Address of Employer, Company, or School Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country Dates of Employment, Unemployment, Retirement, or School Attendance From (mm/dd/yyyy) To (mm/dd/yyyy) If unemployed or retired, source of financial support:	Name of Employer, Company, or School Your Occupation (if unemployed or retired, so state) Address of Employer, Company, or School Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country Dates of Employment, Unemployment, Retirement, or School Attendance From (mm/dd/yyyy) To (mm/dd/yyyy) **[delete]**
Page 9-10, **Part 5. Information About Your Parents**	**[Page 9]** **Part 5. Information About Your Parents** ***Information About Your Parent 1*** **1.** Parent 1's Legal Name Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) **2.** Parent 1's Name at Birth (if different than above) Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) **3.** Date of Birth (mm/dd/yyyy) **[new]**	**Part 5. Information About Your Parents and Siblings** ***Information About Your Parent 1*** **1.** Parent 1's Legal Name Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) **2.** Parent 1's Name at Birth (if different than above) Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) **3.** Date of Birth (mm/dd/yyyy) **4.** U.S. Social Security Number (if any) **5.** Place of Birth City/Town/Village of Birth State or Province of Birth Country of Birth

		6. Parent 1's Telephone Number(s) Used in the Past Five (5) Years (include country code) [Table, 5 entries] **Telephone Numbers** (include country code) **Mobile or Landline** **Date Use Started** (mm/dd/yyyy) **Date Use Ended** (mm/dd/yyyy) **7.** Current Address List your Parent 1's current physical address. If Parent 1 is deceased or if current whereabouts are unknown, select the relevant box below and skip to **Information About Your Parent 2**. [] Parent 1 is deceased. [] Parent 1 current whereabouts are unknown. Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country
	[Page 10] **4.** Country of Birth ***Information About Your Parent 2*** **5.** Parent 2's Legal Name Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) **6.** Parent 2's Name at Birth (if different than above) Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) **7.** Date of Birth (mm/dd/yyyy)	**[delete]** ***Information About Your Parent 2*** **8.** Parent 2's Legal Name Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) **9.** Parent 2's Name at Birth (if different than above) Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) **10.** Date of Birth (mm/dd/yyyy) **11.** U.S. Social Security Number (if any) **12.** Place of Birth City/Town/Village of Birth

	8. Country of Birth **[new]**	State or Province of Birth Country of Birth **13.** Parent 2's Telephone Number(s) Used in the Past Five (5) Years (include country code) [Table, 5 entries] **Telephone Numbers** (include country code) **Mobile or Landline** **Date Use Started** (mm/dd/yyyy) **Date Use Ended** (mm/dd/yyyy) **14.** Current Address List your Parent 2's current physical address. If Parent 2 is deceased or if current whereabouts are unknown, select the relevant box below and skip to **Information About Your Sibling 1**. [] Parent 2 is deceased. [] Parent 2 current whereabouts are unknown. Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country ***Information About Your Sibling 1*** Provide information about all of your siblings (including half-siblings and step-siblings), even if deceased. If you do not have any siblings, please skip to **Part 6.** **15.** Sibling 1's Legal Name Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) **16.** Date of Birth (mm/dd/yyyy) **17.** U.S. Social Security Number **18.** Place of Birth City/Town/Village of Birth State or Province of Birth Country of Birth

	[new]	**19.** Sibling 1's Telephone Number(s) Used in the Past Five (5) Years (include country code) [Table, 5 entries] **Telephone Numbers** (include country code) **Mobile or Landline** **Date Use Started** (mm/dd/yyyy) **Date Use Ended** (mm/dd/yyyy) **20.** Current Address List your Sibling 1's current physical address. If Sibling 1 is deceased or if current whereabouts are unknown, select the relevant box below and skip to **Information About Your Sibling 2.** [] Sibling 1 is deceased. [] Sibling 1 current whereabouts are unknown. Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country ***Information About Your Sibling 2*** **21.** Sibling 2's Legal Name Family Name (Last Name) Given Name (First Name) Middle Name (if applicable) **22.** Date of Birth (mm/dd/yyyy) **23.** U.S. Social Security Number **24.** Place of Birth City/Town/Village of Birth State or Province of Birth Country of Birth **25.** Sibling 2's Telephone Number(s) Used in the Past Five (5) Years (include country code) [Table, 5 entries] **Telephone Numbers** (include country code) **Mobile or Landline**

	[new]	**Date Use Started** (mm/dd/yyyy) **Date Use Ended** (mm/dd/yyyy) **26.** Current Address List your Sibling 2's current physical address. If Sibling 2 is deceased or if current whereabouts are unknown, select the relevant box below and skip to **Part 6. Information About Your Marital History**. [] Sibling 2 is deceased. [] Sibling 2 current whereabouts are unknown. Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country If you have more than two siblings, use the space provided in **Part 14. Additional Information**.
Page 10-11, **Part 6. Information About Your Marital History**	**[Page 10]** **Part 6. Information About Your Marital History** **…** **5.** Current Spouse's A-Number (if any) **6.** Current Spouse's Date of Birth (mm/dd/yyyy) **[new]** **7.** Current Spouse's Country of Birth **8.** Current Spouse's Current Physical Address **[new]**	**Part 6. Information About Your Marital History** **…** **5.** Current Spouse's A-Number (if any) **6.** Current Spouse's Date of Birth (mm/dd/yyyy) **7.** Current Spouse's U.S. Social Security Number (if any) **8.** Current Spouse's Place of Birth City/Town/Village of Birth State or Province of Birth Country of Birth **9.** Current Spouse's Current Physical Address List your Current Spouse's current physical address. If your Current Spouse's current whereabouts are unknown, select the box below and skip to **Item Number 10.**

		[] Current Spouse current whereabouts are unknown.
	Street Address City or Town State or Province **[new]** Country	Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country
	[Page 11]	
	9. Place of Marriage to Current Spouse City or Town State or Province Country Date of Marriage to Current Spouse (mm/dd/yyyy) **10.** Is your current spouse applying with you? Yes No	**10.** Place of Marriage to Current Spouse City or Town State or Province Country **11.** Date of Marriage to Current Spouse (mm/dd/yyyy) **12.** Is your current spouse applying with you? Yes No
	[new]	**13.** Current Spouse's Telephone Number(s) Used in the Past Five (5) Years (include country code) [Table, 5 entries] **Telephone Numbers** (include country code) **Mobile or Landline** **Date Use of Number Started** (mm/dd/yyyy) **Date Use of Number Ended** (mm/dd/yyyy)
	Information About Prior Marriages *(if any)* **[new]**	***Information About Prior Marriages*** *(if any)* If you have more than one prior marriage, use the space provided in **Part 14. Additional Information**.
	11. Prior Spouse's Legal Name (provide family name before marriage) Family Name (Last Name) Given Name (First Name)	**14.** Prior Spouse's Legal Name (provide family name before marriage) Family Name (Last Name) Given Name (First Name)

	Middle Name (if applicable) **12.** Prior Spouse's Date of Birth (mm/dd/yyyy) **13.** Prior Spouse's Country of Birth **14.** Prior Spouse's Country of Citizenship or Nationality **15.** Date of Marriage to Prior Spouse (mm/dd/yyyy) **16.** Place of Marriage to Prior Spouse City or Town State or Province Country **17.** Place Where Marriage with Prior Spouse Legally Ended City or Town State or Province Country Date Marriage with Prior Spouse Legally Ended (mm/dd/yyyy) **18.** How Marriage Ended with Prior Spouse (select one): [] Annulled [] Divorced [] Spouse Deceased [] Other (Explain):	Middle Name (if applicable) **15.** Prior Spouse's Date of Birth (mm/dd/yyyy) **16.** Prior Spouse's Country of Birth **17.** Prior Spouse's Country of Citizenship or Nationality **18.** Date of Marriage to Prior Spouse (mm/dd/yyyy) **19.** Place of Marriage to Prior Spouse City or Town State or Province Country **20.** Place Where Marriage with Prior Spouse Legally Ended City or Town State or Province Country **21.** Date Marriage with Prior Spouse Legally Ended (mm/dd/yyyy) **22.** How Marriage Ended with Prior Spouse (select one): [] Annulled [] Divorced [] Spouse Deceased [] Other (Explain):
Page 12, **Part 7. Information About Your Children**	**[Page 12]** **Part 7. Information About Your Children** **…** Date of Birth (mm/dd/yyyy) **[new]** Country of Birth What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)	**Part 7. Information About Your Children** **…** Date of Birth (mm/dd/yyyy) U.S. Social Security Number (if any) Place of Birth City/Town/Village of Birth State or Province of Birth Country of Birth What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)

	Is this child also applying now on a separate Form I-485? Yes No **[new]** <

	What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child) Is this child also applying now on a separate Form I-485? Yes No **[new]**	What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child) Is this child also applying now on a separate Form I-485? Yes No Child 2's Telephone Number(s) Used in the Past Five (5) Years (include country code) [Table, 5 entries] **Telephone Numbers** (include country code) **Mobile or Landline** **Date Use Started** (mm/dd/yyyy) **Date Use Ended** (mm/dd/yyyy) Current Address List your Child 2's current physical address. If your Child 2 is deceased or if current whereabouts are unknown, select the relevant box below and skip to **Part 8. Biographic Information.** [] Child 2 is deceased. [] Child 2 current whereabouts are unknown. Street Number and Name Apt./Ste./Flr. Number City or Town State ZIP Code Province Postal Code Country
Page 13, **Part 8. Biographic Information**	**[Page 13]** **Part 8. Biographic Information** **…**	**Part 8. Biographic Information** **…**
Page 13-21, **Part 9. General Eligibility and Inadmissibility Grounds**	**[Page 13]** **Part 9. General Eligibility and Inadmissibility Grounds** **…**	**Part 9. General Eligibility and Inadmissibility Grounds** **…**

Page 22, **Part 10. Applicant's Contact Information, Certification, and Signature**	**[Page 22]** **Part 10. Applicant's Contact Information, Certification, and Signature** **…**	**Part 10. Applicant's Contact Information, Certification, and Signature** **…**
Page 22, **Part 11. Interpreter's Contact Information, Certification, and Signature**	**[Page 22]** **Part 11. Interpreter's Contact Information, Certification, and Signature** **…**	**Part 11. Interpreter's Contact Information, Certification, and Signature** **…**
Page 23, **Part 12. Contact Information, Certification, and Signature of the Person Preparing this Application, if Other Than the Applicant**	**[Page 23]** **Part 12. Contact Information, Certification, and Signature of the Person Preparing this Application, if Other Than the Applicant** **…**	**Part 12. Contact Information, Certification, and Signature of the Person Preparing this Application, if Other Than the Applicant** **…**
Page 23, **Part 13. Signature at Interview**	**[Page 23]** **Part 13. Signature at Interview** **…**	**Part 13. Signature at Interview** **…**
Page 24, **Part 14. Additional Information**	**[Page 24]** **Part 14. Additional Information** **…**	**Part 14. Additional Information** **…**