

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

		F	or USC	IS Use	Only	
Preference Category:			Receip	ot		Action Block
Country Chargeable:						
Priority Date:						
Date Form I-693 Received:						
□ Applicant						
	To be c	ompleted by an	attorney	or accred	ited represe	ntative (if any).
Select this box if Form G-28 is attached.	Volag Nu	Attorney State Bar Number (if applicable)			ar Number	Attorney or Accredited Representative USCIS Online Account Number (if any)
NOTE TO ALL APPLICA Instructions, U.S. Citizenshi Part 1. Information A	ANTS: If y	you do not comp nigration Service	s (USCIS)	may deny	plication or fa	ne
for lawful permanent re	esidence))		3.b.	•	e
Your Current Legal National nickname)	ame (do .	not provide a		3.c.	Middle Nan	ne
1.a. Family Name (Last Name)				4.a.	Family Nan (Last Name	
1.b. Given Name (First Name)				4.b.	Given Name (First Name	
1.c. Middle Name				4.c.	Middle Nan	ne
Other Names You Havapplicable)	e Used S	Since Birth (if	?	Oth	er Informa	ation About You
NOTE: Provide all other nayour family name at birth, or aliases, and assumed names complete this section, use the Additional Information.	ther legal r . If you ne	names, nickname ed extra space to	es,	5.	NOTE: In include any connection	addition to providing your actual date of birth, other dates of birth you have used in with any legal names or non-legal names in covided in Part 14. Additional Information .
2.a. Family Name (Last Name)				6.	Sex	Male Female
2.b. Given Name (First Name)				7.	City or Tow	n of Birth
2 c Middle Name						

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Recent Immigration History Part 1. Information About You (Person applying for 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 Passport Number Used at Last Arrival 9. Country of Citizenship or Nationality 16. Travel Document Number Used at Last Arrival Alien Registration Number (A-Number) (if any) 10. 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 Country that Issued this Passport or Travel Document 18. in Part 14. Additional Information. 11. USCIS Online Account Number (if any) 19. Nonimmigrant Visa Number from this Passport (if any) U.S. Social Security Number (if any) 12. Place of Last Arrival into the United States 20.a. City or Town U.S. Mailing Address **20.b.** State **13.a.** In Care Of Name (if any) 21. Date of Last Arrival (mm/dd/yyyy) **13.b.** Street Number When I last arrived in the United States, I: and Name Was inspected at a port of entry and admitted as (for **13.c.** Apt. Ste. Flr. example, exchange visitor; visitor, waived through; temporary worker; student): 13.d. City or Town **13.f.** ZIP Code **13.e.** State 22.b. Was inspected at a port of entry and paroled as (for (USPS ZIP Code Lookup) example, humanitarian parole, Cuban parole): Alternate and/or Safe Mailing Address If you are applying based on the Violence Against Women Act **22.c.** Came into the United States without admission or (VAWA) or as a special immigrant juvenile, human trafficking parole. victim (T nonimmigrant), or victim of a qualifying crime (U nonimmigrant) and you do not want USCIS to send notices **22.d.** Other: about this application to your home, you may provide an alternative and/or safe mailing address. If you were issued a Form I-94 Arrival-Departure Record Number: **14.a.** In Care Of Name (if any) 23.a. Form I-94 Arrival-Departure Record Number **14.b.** Street Number and Name 23.b. Expiration Date of Authorized Stay Shown on Form I-94 **14.c.** Apt. Ste. Flr. (mm/dd/yyyy) 23.c. Status on Form I-94 (for example, class of admission, or 14.d. City or Town paroled, if paroled) 14.f. ZIP Code **14.e.** State

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	t 1. Information About You (Person applying lawful permanent residence) (continued) What is your current immigration status (if it has changed	1.d.	Asylee or Refugee Asylum status (INA section 208), Form I-589 or Form I-730
	since your arrival)?	1.e.	Refugee status (INA section 207), Form I-590 or Form I-730 Human Trafficking Victim or Crime Victim
Provi any)	ide your name exactly as it appears on your Form I-94 (if	1.0.	Human trafficking victim (T Nonimmigrant), Form I-914 or derivative family member, Form I-914A
	Family Name (Last Name) Given Name (First Name)		Crime victim (U Nonimmigrant), Form I-918, derivative family member, Form I-918A, or qualifying family member, Form I-929
25.0	Middle Name	1.f.	Special Programs Based on Certain Public Laws
25.C.	Wilddie Name		☐ The Cuban Adjustment Act
Par	t 2. Application Type or Filing Category		☐ The Cuban Adjustment Act for battered spouses and children
	E: Attach a copy of the Form I-797 receipt or approval e for the underlying petition or application, as appropriate.		Dependent status under the Haitian Refugee Immigrant Fairness Act
status follo	applying to register lawful permanent residence or adjust s to that of a lawful permanent resident based on the wing 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
you s	select.):		Diplomats or high ranking officials unable to return home (Section 13 of the Act of September 11, 1957)
1.a.	Family-based		☐ Indochinese Parole Adjustment Act of 2000
	Immediate relative of a U.S. citizen, Form I-130	1.g.	
	Other relative of a U.S. citizen or relative of a lawful permanent resident under the family-based preference	8-	☐ Diversity Visa program
	categories, Form I-130 Person admitted to the United States as a fiancé(e) or		Continuous residence in the United States since before January 1, 1972 ("Registry")
	child of a fiancé(e) of a U.S. citizen, Form I-129F (K-1/K-2 Nonimmigrant)		☐ Individual born in the United States under diplomatic status
	☐ Widow or widower of a U.S. citizen, Form I-360		Other eligibility
	☐ VAWA self-petitioner, Form I-360		
1.b.	Employment-based	2.	Are you applying for adjustment based on the
	Alien worker, Form I-140		Immigration and Nationality Act (INA) section 245(i)?
	Alien entrepreneur, Form I-526		Yes No
1.c.	Special Immigrant		NOTE: If you answered "Yes" to Item Number 2., you
	Religious worker, Form I-360		must have selected a family-based, employment-based, special immigrant, or Diversity Visa immigrant category

must have selected a family-based, employment-based, special immigrant, or Diversity Visa immigrant category listed above in **Item Numbers 1.a. - 1.g.** as the basis for your application for adjustment of status. Fill out the rest of this application **and** Supplement A to Form I-485, 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.

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Special immigrant juvenile, Form I-360

Form I-360

Certain Afghan or Iraqi national, Form I-360

Certain international broadcaster, Form I-360

Certain G-4 international organization or family

member or NATO-6 employee or family member,

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3.	Decision (for example, approved, refused, denied, withdrawn)
4.	Date of Decision (mm/dd/yyyy)
Add	ress History
durin States space	de physical addresses for everywhere you have lived g the last five years, whether inside or outside the United s. Provide your current address first. If you need extra to complete this section, use the space provided in 14. Additional Information.
Physi	cal Address 1 (current address)
5.a.	Street Number and Name
5.b.	Apt. Ste. Flr.
5.c.	City or Town
5.d.	State 5.e. ZIP Code
5.f.	Province
5.g.	Postal Code
5.h.	Country
Dates	s of Residence
6.a.	From (mm/dd/yyyy)
6.b.	To (mm/dd/yyyy)
Physi	cal Address 2
7.a.	Street Number and Name
7.b.	☐ Apt. ☐ Ste. ☐ Flr. ☐
7.c.	City or Town
7.d.	State 7.e. ZIP Code
7.f.	Province
7.g.	Postal Code

Part 2. Application Type or Filing Category (continued)

Information About Your Immigrant Category

If you are the **principal applicant**, provide the following information.

Receipt Number of Underlying Petition (if any)

3.

9.

4.	Priority Date from Underlying Petition (if any)
	(mm/dd/yyyy)
child	are a derivative applicant (the spouse or unmarried under 21 years of age of a principal applicant), provide the ving information for the principal applicant .
Princ	pal Applicant's Name
5.a.	Family Name (Last Name)
5.b.	Given Name (First Name)
5.c.	Middle Name
6.	Principal Applicant's A-Number (if any)
	► A-
7.	Principal Applicant's Date of Birth
	(mm/dd/yyyy)
8.	Receipt Number of Principal's Underlying Petition (if any)

Part 3. Additional Information About You

(if any) (mm/dd/yyyy)

Have you ever applied for an immigrant visa to obtain permanent resident status at a U.S. Embassy or U.S. Consulate abroad?
Yes No

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**.

Priority Date of Principal Applicant's Underlying Petition

Location of U.S. Embassy or U.S. Consulate

2.a.	City	
2.b.	Count	try

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7.h. Country

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.c. City or Town	13. Your Occupation
9.d. State 9.e. ZIP Code	Dates of Employment
9.f. Province	14.a. From (mm/dd/yyyy)
9.g. Postal Code	14.b. To (mm/dd/yyyy)
9.h. Country	Employer 2
	15. Name of Employer or Company
Dates of Residence	13. Traine of Employer of Company
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.
Provide your employment history for the last five years,	16.c. City or Town
whether inside or outside the United States. Provide the most recent employment first. If you need extra space to complete	16.d. State 16.e. ZIP Code
this section, use the space provided in Part 14. Additional Information .	16.f. Province
Employer 1 (current or most recent)	
11. Name of Employer or Company	16.g. Postal Code
	16.h. Country
	17. Your Occupation
	Determinant of Francisco
	Dates of Employment
	18.a. From (mm/dd/yyyy)
	18.b. To (mm/dd/yyyy)

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	t 3. Addition	al Information About You	3.	Date of Birth (mm/dd/yyyy) Sex
Provi	ide your most rec	ent employment outside of the United	5.	City or Town of Birth
State	s (if not already l	isted above).	3.	City of Town of Birth
19.	Name of Employ	yer or Company	6.	Country of Birth
			υ.	Country of Birtin
Addr	ess of Employer	or Company	7.	Current City or Town of Residence (if living)
20.a.	Street Number and Name		7.	Current City of Town of Residence (If fiving)
20.b.	Apt. S	Ste. Flr.	8.	Current Country of Residence (if living)
20.c.	City or Town			
		20. ZID C. 1	T C	
20.d.	State	20.e. ZIP Code		ormation About Your Parent 2
20.f.	Province			nt 2's Legal Name
20.g.	Postal Code		9.a.	Family Name (Last Name)
	Country		9.b.	·
			9.c.	Middle Name
21.	Your Occupation	n		nt 2's Name at Birth (if different than above)
				Family Name
Dates	s of Employment		10.4.	(Last Name)
22.a.	From (mm/dd/y	vvv)	10.b.	Given Name (First Name)
			10.c.	Middle Name
22.b.	To (mm/dd/yyyy	y)		
ъ	. 4 T C	• • • • • • • • • • • • • • • • • • • •	11.	Date of Birth (mm/dd/yyyy)
Par	t 4. Informat	tion About Your Parents	12.	Sex Male Female
Info	ormation Abou	ut Your Parent 1	13.	City or Town of Birth
Parer	nt 1's Legal Name	÷		
1.a.	Family Name (Last Name)		14.	Country of Birth
1.b.	Given Name (First Name)		15.	Current City or Town of Residence (if living)
1.c.	Middle Name			
Parei	∟ nt 1's Name at Bir	rth (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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		Triumot / Tr
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	7.D. State of Flovince
	Legally Separated	
2.	If you are married, is your spouse a current member of the U.S. armed forces or U.S. Coast Guard?	9.c. Country
	N/A Yes No	10. Is your current spouse applying with you?
3.	How many times have you been married (including annulled marriages and marriages to the same person)?	Yes No
	amunica marriages and marriages to the same person).	Information About Prior Marriages (if any)
•	ormation About Your Current Marriage luding 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
•	u are currently married, provide the following information tyour current spouse.	marriage, use the space provided in Part 14. Additional Information to provide the information below.
Curre	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 (Last Name)
4.b.	Given Name (First Name)	11.b. Given Name (First Name)
4.c.	Middle Name	11.c. Middle Name
5.	A-Number (if any) ► A-	12. Prior Spouse's Date of Birth (mm/dd/yyyy)
6.	Current Spouse's Date of Birth (mm/dd/yyyy)	13. Date of Marriage to Prior Spouse (mm/dd/yyyy)
7.	Date of Marriage to Current Spouse (mm/dd/yyyy)	Place of Marriage to Prior Spouse
Curr	ent Spouse's Place of Birth	14.a. City or Town
	City or Town	
o.a.	City of Town	14.b. State or Province
8.b.	State or Province	
J.D.		14.c. Country
8.c.	Country	15. Date Marriage with Prior Spouse Legally Ended

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(mm/dd/yyyy)

			A-Number > A-
Part 5. Information (continued)	nation About Your Marital History	Chile Curr	d 2 ent Legal Name
Place Where Marr	iage with Prior Spouse Legally Ended	7.a.	Family Name (Last Name)
16.a. City or Town	n	7.b.	Given Name
		7.c.	(First Name) Middle Name
16.b. State or Prov	vince	7.c. 8.	A-Number (if any)
		0.	► A-
16.c. Country		0	
		9.	Date of Birth (mm/dd/yyyy)
Dart 6 Inform	nation About Your Children	10.	Country of Birth
	total number of ALL living children dult sons and daughters) that you have.	11.	Is this child applying with you? Yes No
	e term "children" includes all biological or	Chile	13
	ted children, as well as current stepchildren, whether born in the United States or other	Curr	ent Legal Name
countries, m	arried or unmarried, living with you or	12.a.	Family Name (Last Name)
	nd includes any missing children and those outside of marriage.	12.b	. Given Name
•			(First Name)
	ring information for each of your children. han three children, use the space provided in	12.c.	Middle Name
Part 14. Addition		13.	A-Number (if any)
Child 1			► A-
Current Legal Nan	ne	14.	Date of Birth (mm/dd/yyyy)
2.a. Family Nam (Last Name)		15.	Country of Birth
2.b. Given Name			
(First Name)		16.	Is this child applying with you?
2.c. Middle Nam			
3. A-Number (Par	t 7. Biographic Information
	► A-	1.	Ethnicity (Select only one box)
4. Date of Birth	h (mm/dd/yyyy)		Hispanic or Latino
5. Country of E	Birth		Not Hispanic or Latino
		2.	Race (Select all applicable boxes)
6. Is this child	applying with you? Yes No		White
			Asian
			Black or African American
			American Indian or Alaska Native Native Hawaiian or Other Pacific Islander

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					-	
Par	t 7. Biographic l	Informatio	n (continued)	Date	s of Membership or Dates of Involven	nent
3.	Height	Feet	Inches	5.a.	From (mm/dd/yyyy)	
1.	Weight		Pounds	5.b.	To (mm/dd/yyyy)	
5.	Eye Color (Select or	nly one box)		Orga	nization 2	
	Black	Blue	Brown	6.	Name of Organization	
	Gray	Green	Hazel			
	Maroon	Pink	Unknown/Other	7.a.	City or Town	
5.	Hair Color (Select o	only one box)				
	Bald (No hair)	Black	Blond	7.b.	State or Province	
	Brown	Gray	Red			
	Sandy	White	Unknown/Other	7.c.	Country	
Par	t 8. General Elig	gibility and	Inadmissibility	8.	Nature of Group	
Gro	ounds					
l .	•		of, involved in, or in	Date	s of Membership or Dates of Involven	nent
			nization, association, ety, or similar group in	9.a.	From (mm/dd/yyyy)	
	the United States or	in any other l				
	including any milita	ry service?	Yes No	9.b.	To (mm/dd/yyyy)	
	u answered "Yes" to l			Orga	nization 3	
	bers 2 13.b. below ection, use the space	•	extra space to complete	10.	Name of Organization	
nfoi	mation . If you answ	vered "No," b	ut are unsure of your			
	er, provide an explan e space provided in P a		vents and circumstances ional Information.	11.a.	City or Town	
	nization 1					
). 2.	Name of Organization	on		11.b	State or Province	
		-				
3.a.	City or Town			11.c.	Country	
3.b.	State or Province			12.	Nature of Group	
3.c.	Country			Date	s of Membership or Dates of Involven	nent
				13.a.	From (mm/dd/yyyy)	
I.	Nature of Group			13.b.	To (mm/dd/yyyy)	
	1					

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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 provided in Part 14. Additional Information.

provi	ded in Part 14. Additional Informati o	on.			
14.	Have you EVER been denied admissi States?		the U Yes	_	
15.	Have you EVER been denied a visa to		Unite Yes		
16.	Have you EVER worked in the United authorization?		tes wi Yes		
17.	Have you EVER violated the terms or nonimmigrant status?		dition Yes		
18.	Are you presently or have you EVER exclusion, rescission, or deportation processes the second of t	rocee		?	
19.	Have you EVER been issued a final o deportation, or removal?		of exc Yes		on, No
20.	Have you EVER had a prior final ordedeportation, or removal reinstated?		exclu Yes		No
21.	Have you EVER held lawful permane which was later rescinded?		sident Yes	stat	
22.	Have you EVER been granted volunta immigration officer or an immigration depart within the allotted time?	judg			
23.	Have you EVER applied for any kind protection from removal, exclusion, or	dep		on?	No
24.a.	Have you EVER been a J nonimmigra who was subject to the two-year foreig requirement?			_	sitor No
Num	n answered "Yes" to Item Number 24. bers 24.b 24.c. If you answered "No skip to Item Number 25.				
24.b.	Have you complied with the foreign requirement?	eside	nce Yes		No
24.c.	Have you been granted a waiver or has State issued a favorable waiver recommon for you?				

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 e	nforce	ement	offic	ial			
	(including but not limited to any U.S	. imm	igrati	on				
	official or any official of the U.S. arr	ned fo	orces o	or U.S	S.			
	Coast Guard)?		Yes		No			

26.	Have you EVER committed a crime of any kind (even if	
	you were not arrested, cited, charged with, or tried for tha	ιt
	crime)?	

27.	Have you EVER pled guilty to or l	been convicted of a			
	crime or offense (even if the violat	ion was subsequently			
	expunged or sealed by a court, or if you were granted a				
	pardon, amnesty, a rehabilitation de	ecree, or other act of			
	clemency)?	Yes No			

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.

28. 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	t or the accused in a
	criminal proceeding (including pre	e-trial diversion,
	deferred prosecution, deferred adju	idication, or any
	withheld adjudication)?	☐ Yes ☐ No

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?

No

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Part 8. General Eligibility and Inadmissibility Grounds (continued)

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

- 42. Have you **EVER** trafficked a person into 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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Part 8. General Eligibility and Inadmissibility Grounds (continued)

Have	you EVER :				
48.a.	Committed, threatened to commit, attaconspired to commit, incited, endorsed planned, or prepared any of the follow sabotage, kidnapping, political assassi weapon or explosive to harm another is substantial damage to property?	d, adving: nation	vocate hijac on, or	ed, king, use o or ca	f a
48.b.	Participated in, or been a member of, a organization that did any of the activit Item Number 48.a. ?	ies d			No
48.c.	Recruited members or asked for mone for a group or organization that did an described in Item Number 48.a. ?			tiviti	
48.d.	Provided money, a thing of value, servany other assistance or support for any described in Item Number 48.a. ?			ivitie	
48.e.	Provided money, a thing of value, servany other assistance or support for an or organization who did any of the act Item Number 48.a. ?	indiv	idual,	grou cribe	ıp,
49.	Have you EVER received any type of paramilitary, or weapons training?		tary, Yes		No
50.	Do you intend to engage in any of the a any part of Item Numbers 48.a 49. ?		ities li Yes		n No
46.a. locati	E: If you answered "Yes" to any part of 50., explain what you did, including to on of the circumstances, or what you in provided in Part 14. Additional Info	the d	ates a	nd	
Are y	ou the spouse or child of an individual	who	EVE	R:	
51.a.	Committed, threatened to commit, atte conspired to commit, incited, endorsed planned, or prepared any of the follow sabotage, kidnapping, political assassi weapon or explosive to harm another substantial damage to property?	d, adving:	vocate hijac on, or	ed, king, use o or ca	f a
51.b.	Participated in, or been a member or a group or organization that did any of t described in Item Number 51.a. ?			es	of a No
51.c.	Recruited members, or asked for mone for a group or organization that did an				

described in **Item Number 51.a.**?

51.d.	Provided money, a thing of value, ser any other assistance or support for an described in Item Number 51.a. ?				
51.e.	Provided money, a thing of value, ser any other assistance or support to an i organization who did any of the activitem Number 51.a.?	ndivi	idual,	grou bed i	p, or
51.f.	Received any type of military, paramitraining from a group or organization activities described in Item Number	that 51.a.	did ar		
51. , 6 dates	TE: If you answered "Yes" to any part explain the relationship and what occur and location of the circumstances, in tart 14. Additional Information.	red,	includ	ling t	he
52.	Have you EVER assisted or participal providing, or transporting weapons to to your knowledge, used them against	any	perso	n wh	
53.	Have you EVER worked, volunteered served in any prison, jail, prison camp labor camp, or any other situation that persons?	o, det	ention	ı faci	
54.	Have you EVER been a member of, a participated in any group, unit, or org kind in which you or other persons us weapon against any person or threater	aniza ed ar	ntion only	of any e of	, No
55.	Have you EVER served in, been a moor participated in any military unit, parapolice unit, self-defense unit, vigilant guerilla group, militia, insurgent organother armed group?	ırami e uni	litary t, rebe	unit, el gro	
56.	Have you EVER been a member of, of affiliated with, the Communist Party of totalitarian party (in the United States	or an	y othe	er	No
57.	During the period from March 23, 19 did you ever order, incite, assist, or of in the persecution of any person becan national origin, or political opinion, in either the Nazi government of German organization or government associate Nazi government of Germany?	therwuse on assonition or a	rise pa f race ociation	nticip , relig on wi with	oate gion, th the

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Yes No

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	t 8. General Eligibility and Inadmissibility bunds (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, helped 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?				
	Acts involving torture or genocide? Yes No Killing any person? Yes No	65.	Have you EVER lied about, concealed, or misrepresented any information on an application or petition to obtain a				
	Intentionally and severely injuring any person? Yes No		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				
59.	Have you EVER recruited, enlisted, conscripted, or used 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)?				
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.	Yes No 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 location of the circumstances, in the space provided in Part 14. Additional Information.			Removal, Unlawful Presence, or Illegal Reentry After Previous Immigration Violations				
	lic Assistance	70.	Have you EVER been excluded, deported, or removed from the United States or have you ever departed the				
61.	Have you received public assistance in the United States from any source, including the U.S. Government or any state, county, city, or municipality (other than emergency		United States on your own after having been ordered excluded, deported, or removed from the United States? Yes No				
	medical treatment)?	71.	Have you EVER entered the United States without being inspected and admitted or paroled? Yes No				
62.	Are you likely to receive public assistance in the future in the United States from any source, including the U.S. Government or any state, county, city, or municipality (other than emergency medical treatment)? Yes No		nce April 1, 1997, have you been unlawfully present in the nited States:				
			For more than 180 days but less than a year, and then departed the United States? Yes No				
Illeg	gal Entries and Other Immigration Violations	72.b	For one year or more and then departed the United States? Yes No				
	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	you o	TE: You were unlawfully present in the United States if entered the United States without being inspected and itted or inspected and paroled, or if you legally entered the				
63.b.	If your answer to Item Number 63.a. is "Yes," do you	Unit	ed States but you stayed longer than permitted.				

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Yes No

believe you had reasonable cause?

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Part 8. General Eligibility and Inadmissibility Grounds (continued)	80.a. Have you EVER left or remained outside the United States to avoid or evade training or service in the U.S.
Since April 1, 1997, have you EVER reentered or attempted to reenter the United States without being inspected and admitted or paroled after:	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
 73.a. Having been unlawfully present in the United States for more than one year in the aggregate? Yes No 73.b. Having been deported, excluded, or removed from the United States? Yes No 	your nationality or immigration status immediately before you left (for example, U.S. citizen or national, lawful permanent resident, nonimmigrant, parolee, present without admission or parole, or any other status)?
Miscellaneous Conduct	Part 9. Accommodations for Individuals With
 74. Do you plan to practice polygamy in the United States? Yes No 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 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 	 NOTE: Read the information in the Form I-485 Instructions before completing this part. 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. 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
custody of the child? Yes No 77. Have you EVER voted in violation of any Federal, state, or local constitutional provision, statute, ordinance, or regulation in the United States? Yes No 78. 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.

Ap	plic	ant	's i	Stat	eme	ent

	select the box for either Item Number 1.a. or 1.b. If se, select the box for Item Number 2.
1.a.	I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question.
1.b.	The interpreter named in Part 11. read to me every question and instruction on this application and my answer to every question in
2.	a language in which I am fluent, and I understood everything. At my request, the preparer named in Part 12., prepared this application for me based only upon information I provided or authorized.

Applicant's Contact Information

Ap_I	pucant's Contact Information
3.	Applicant's Daytime Telephone Number
4.	Applicant's Mobile Telephone Number (if any)
5.	Applicant's Email Address (if any)

Applicant's Declaration and Certification

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.

· PP	ipplicant s signature							
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.

Applicant's Signature

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)
۷٠	merpreter's Business or Organization (if any)

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

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

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

(continued)									
Preparer's Statement									
7.a.	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.								
Pre	parer's Certification								
prepa appli infor conta inclu that a comp	by signature, I certify, under penalty of perjury, that I ared this application at the request of the applicant. The cant then reviewed this completed application and med me that he or she understands all of the information ained in, and submitted with, his or her application, ding the Applicant's Declaration and Certification , and all of this information is complete, true, and correct. I bleted this application based only on information that the cant provided to me or authorized me to obtain or use.								
Pre	parer's Signature								
8.a.	Preparer's Signature (sign in ink)								
8.b.	Date of Signature (mm/dd/yyyy)								

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

Part 13. Signature at Interview

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

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								A-Num	ber 🕨	· A-		
Pai	rt 14. Additi	ional Inf	formation	1			5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
withing spaces to constant sheet at the Number 1	u need extra spa in this application than what is promplete and file to f paper. Type to top of each she aber, and Item Itand date each she	on, use the covided, you with this are or print yeet; indicar	space below ou may make application of your name are te the Page	w. If yo te copies or attach nd A-Nu Numbe	u need mon s of this page a separate umber (if a r, Part	re ge ny)	5.d.					
	Family Name (Last Name) Given Name											
1.c.	(First Name) Middle Name						6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
2.	A-Number (if						6.d.					
3.a. 3.d.	Page Number	3.b. Pa	art Number	3.c.	Item Num	lber						
						— — —	7.a.	Page Number	7.b.	Part Number	7.c.	Item Number
							7.d.					
4.a. 4.d.	Page Number	4.b. Pa	art Number	4.c.	Item Num	aber						

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