

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 02/28/2026

	For USCIS Use Only					
Preference Category:	Re	eceipt		Action Block		
Country Chargeable:						
Priority Date:						
Date Form I-693 Received:						
Applicant Interview Interviewed Waived Date of Initial Interview: Lawful Permanent Resident as of:	☐ INA 209(a) ☐ IN☐ INA 209(b) ☐ So	n of Law A 249 c. 13, Act of 9/11/57 aban Adjustment Act her				
3	To be completed by an attorn	ey or accredited 1	epresent	tative (if any).		
	_	rney State Bar Nu oplicable)		Attorney or Accredited Representative USCIS Online Account Number (if any)		
NOTE TO ALL APPLICANT Instructions, U.S. Citizenship at Part 1. Information About 1985 April 1985 A	TIS) may deny your 3.a. Fam	ion or fai applicati				
for lawful permanent resid	` == -	3.b. Give	t Name) en Name			
Your Current Legal Nam nickname)	e (do not provide a	(First	st Name) dle Name	e		
1.a. Family Name		4.a. Fam				
(Last Name) 1.b. Given Name (First Name)		4.b. Give	en Name st Name)			
1.c. Middle Name		4.c. Mid	dle Name	2		
Other Names You Have U	Used Since Birth (if	Other In	nformat	tion About You		
NOTE: Provide all other name your family name at birth, other aliases, and assumed names. If complete this section, use the sp. Additional Information.	NO' inclucon	FE: In action where	(mm/dd/yyyy) ddition to providing your actual date of birth, other dates of birth you have used in rith any legal names or non-legal names in vided in Part 14. Additional Information.			
2.a. Family Name (Last Name)		6. Sex		Male Female		
2.b. Given Name (First Name)		7. City	or Town	of Birth		
2.c. Middle Name						

	et 1. Information About You (Person applying	Soc	cial Security Card
for 8.	Country of Birth	14.	Has the Social Security Administration (SSA) ever officially issued a Social Security card to you? Yes No
9.	Country of Citizenship or Nationality		If you answered "Yes," provide the information requested in Item Number 15.
10.	Alien Registration Number (A-Number) (if any) A- NOTE: If you have EVER used other A-Numbers, include the additional A-Numbers in the space provided in Part 14. Additional Information.	15. 16.	Provide your U.S. Social Security Number (SSN). Do you want the SSA to issue you a Social Security card? (You must also answer "Yes" to Item Number 17. Consent for Disclosure, to receive a card).
11.	USCIS Online Account Number (if any) ▶	17.	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.
U.S	. Mailing Address		Yes No
12.a.	In Care Of Name (if any)	Red	cent Immigration History
12.b.	Street Number and Name		ride the information for Item Numbers 18 24. if you last red the United States using a passport or travel document.
12.c.	Apt. Ste. Flr.	18.	Passport Number Used at Last Arrival
12.d.	. City or Town	10	Toront De comment North and Lond at Lond Association
12.e.	State 12.f. ZIP Code	19.	Travel Document Number Used at Last Arrival
Alte	ernate and/or Safe Mailing Address	20.	Expiration Date of this Passport or Travel Document (mm/dd/yyyy)
(VA) victin nonin abou	u are applying based on the Violence Against Women Act WA) or as a special immigrant juvenile, human trafficking m (T nonimmigrant), or victim of a qualifying crime (U mmigrant) and you do not want USCIS to send notices t this application to your home, you may provide an native and/or safe mailing address.	21. 22.	Country that Issued this Passport or Travel Document Nonimmigrant Visa Number from this Passport (if any)
13.a.	In Care Of Name (if any)	Plac	e of Last Arrival into the United States
		23.a	. City or Town
13.b.	Street Number and Name		
13.c.	Apt. Ste. Flr.	23.b	. State
13.d.	. City or Town	24.	Date of Last Arrival (mm/dd/yyyy)
13.e.	State 13.f. ZIP Code		

A-Number ►	A -				

Part 1. Information About You (Person applying for lawful permanent residence) (continued)

When	When I last arrived in the United States, I:												
25.a.		Was inspected at a port of entry and admitted as (for example, exchange visitor; visitor, waived through; temporary worker; student):											
25.b.		Was inspe										(fo	r
25.c.		Came into parole.	the	United	l Sta	ites	wit	hou	t ad	mis	sior	or	
25.d.		Other:											
If you	wer	e issued a F	orm	ı I-94 <i>A</i>	rriv	al-I)epa	artu	re R	eco	rd N	Jum	ber:
26.a.	Fori	n I-94 Arri	val-	Depart	ure	Rec	ord	Nu	mb	er			
			•										
26.b.	Exp	iration Dat	e of	Autho	rize	d St	ay S	Sho	wn	on I	orr	n I-	94
	(mn	n/dd/yyyy)											
26.c.		us on Form oled, if parc			exan	nple	e, cl	ass	of a	ıdm	issio	on, o	or
27.		at is your c e your arriv			igra	tion	sta	itus	(if	it ha	ıs cl	nanş	ged
Provide your name exactly as it appears on your Form I-94 (if any)													
28.a.		nily Name st Name)											
28.b.		en Name st Name)											
28.c.	`	dle Name											

Part 2. Application Type or Filing Category

NOTE: Attach a copy of the Form I-797 receipt or approval notice for the underlying petition or application, as appropriate.

I am applying to register lawful permanent residence or adjust status to that of a lawful permanent resident based on the following immigrant category (select **only one** box). (See the Form I-485 Instructions for more information, including any **Additional Instructions** that relate to the immigrant category you select.):

1.a.	Fam	ilv_l	าลจ	ed
1 .a.	ram	11 Y - K	Jas	ιu

		Immediate relative of a U.S. citizen, Form I-130
		Other relative of a U.S. citizen or relative of a lawful permanent resident under the family-based preference categories, Form I-130
		Person admitted to the United States as a fiancé(e) or child of a fiancé(e) of a U.S. citizen, Form I-129F (K-1/K-2 Nonimmigrant)
		Widow or widower of a U.S. citizen, Form I-360
		VAWA self-petitioner, Form I-360
1.b.	Em	ployment-based
		Alien worker, Form I-140
		Alien entrepreneur, Form I-526
1.c.	Spe	cial Immigrant
		Religious worker, Form I-360
		Special immigrant juvenile, Form I-360
		Certain Afghan or Iraqi National, Form I-360 or

1.d. Asylee or Refugee

Form DS-157

Form I-360

Asylum status (INA section 208), Form I-589 or Form I-730
Refugee status (INA section 207), Form I-590 o Form I-730

Certain international broadcaster, Form I-360
 Certain G-4 international organization or family member or NATO-6 employee or family member,

1.e. Human Trafficking Victim or Crime Victim

Human trafficking victim (T Nonimmigrant), Form
I-914 or derivative family member, Form I-914A
Crime victim (U Nonimmigrant), Form I-918.

Crime victim (U Nonimmigrant), Form I-918,
derivative family member, Form I-918A, or
qualifying family member, Form I-929

			A-Number ► A-
	rt 2. Application Type or Filing Category ntinued)		Cormation About Your Immigrant Category ou are the principal applicant, provide the following
1.f.	Special Programs Based on Certain Public Laws The Cuban Adjustment Act The Cuban Adjustment Act for battered spouses and children Dependent status under the Haitian Refugee Immigrant Fairness Act Dependent status under the Haitian Refugee Immigrant Fairness Act for battered spouses and children Lautenberg Parolees Diplomats or high ranking officials unable to return home (Section 13 of the Act of September 11, 1957) Indochinese Parole Adjustment Act of 2000 Additional Options Diversity Visa program Continuous residence in the United States since before January 1, 1972 ("Registry") Individual born in the United States under diplomatic status Other eligibility	If yo child follo Prince 5.a.	reaction applicant, provide the following fraction. Receipt Number of Underlying Petition (if any) Priority Date from Underlying Petition (if any) (mm/dd/yyyy) For are a derivative applicant (the spouse or unmarried at under 21 years of age of a principal applicant), provide the twing information for the principal applicant. Experimental Applicant's Name Family Name (Last Name) Given Name (First Name) Middle Name Principal Applicant's A-Number (if any) A- Principal Applicant's Date of Birth (mm/dd/yyyy) Receipt Number of Principal's Underlying Petition (if any)
2.	Are you applying for adjustment based on the Immigration and Nationality Act (INA) section 245(i)? Yes No NOTE: If you answered "Yes" to Item Number 2., you 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.	1.	Priority Date of Principal Applicant's Underlying Petition (if any) (mm/dd/yyyy) Tt 3. Additional Information About You Have you ever applied for an immigrant visa to obtain permanent resident status at a U.S. Embassy or U.S. Consulate abroad? 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. Additional Information. City Country Decision (for example, approved, refused, denied, withdrawn)

Date of Decision (mm/dd/yyyy)

	A-Number A-
Part 3. Additional Information About You (continued)	Provide your most recent address outside the United States where you lived for more than one year (if not already listed above).
Address History	9.a. Street Number and Name
Provide physical addresses for everywhere you have lived during the last five years, whether inside or outside the United States. Provide your current address first. If you need extra space to complete this section, use the space provided in Part 14. Additional Information .	9.b. Apt. Ste. Flr. 9.c. City or Town 9.d. State 9.e. ZIP Code
Physical Address 1 (current address)	
5.a. Street Number and Name	9.f. Province
5.b.	9.g. Postal Code9.h. Country
5.c. City or Town	7.II. Country
5.d. State 5.e. ZIP Code	Dates of Residence
5.f. Province	10.a. From (mm/dd/yyyy)
5.g. Postal Code	10.b. To (mm/dd/yyyy)
5.h. Country	Employment History
Dates of Residence 6.a. From (mm/dd/yyyy) 6.b. To (mm/dd/yyyy) Present	Provide your employment history for the last five years, whether inside or outside the United States. Provide the most recent employment first. If you need extra space to complete this section, use the space provided in Part 14. Additional Information .
Physical Address 2	Employer 1 (current or most recent) 11. Name of Employer or Company
7.a. Street Number and Name	Name of Employer of Company
7.b. Apt. Ste. Flr.	Address of Employer or Company
7.c. City or Town	12.a. Street Number and Name
7.d. State 7.e. ZIP Code	12.b.
7.f. Province	12.c. City or Town
7.g. Postal Code	12.d. State 12.e. ZIP Code
7.h. Country	12.f. Province
	12.g. Postal Code
Dates of Residence	12.h. Country
8.a. From (mm/dd/yyyy)	13 Vous Occupation
8.b. To (mm/dd/yyyy)	13. Your Occupation

Part 3. Additional Information About You	Address of Employer or Company 20.a. Street Number
(continued)	and Name
Dates of Employment	20.b. Apt. Ste. Flr.
14.a. From (mm/dd/yyyy)	20.c. City or Town
14.b. To (mm/dd/yyyy)	20.d. State 20.e. ZIP Code
Employer 2	20.f. Province
15. Name of Employer or Company	20.g. Postal Code
Address of Employer or Company	20.h. Country
16.a. Street Number	
and Name	21. Your Occupation
16.b. Apt. Ste. Flr.	D. CF. 1
16.c. City or Town	Dates of Employment
16.d. State 16.e. ZIP Code	22.a. From (mm/dd/yyyy)
16.f. Province	22.b. To (mm/dd/yyyy)
16.g. Postal Code	Part 4. Information About Your Parents
16.h. Country	Information About Your Parent 1
17. Your Occupation	Parent 1's Legal Name 1.a. Family Name
	(Last Name)
Dates of Employment	1.b. Given Name (First Name)
18.a. From (mm/dd/yyyy)	1.c. Middle Name
18.b. To (mm/dd/yyyy)	Parent 1's Name at Birth (if different than above)
Provide your most recent employment outside of the United States (if not already listed above).	2.a. Family Name (Last Name)
19. Name of Employer or Company	2.b. Given Name (First Name)
	2.c. Middle Name
	3. Date of Birth (mm/dd/yyyy)
	4. Sex Male Female
	5. City or Town of Birth
	6. Country of Birth

	t 4. Information About Your Parents ntinued)	3.	How many times have you been married (including annulled marriages and marriages to the same person)?
7.	Current City or Town of Residence (if living)		
			ormation About Your Current Marriage
8.	Current Country of Residence (if living)	(inc	luding if you are legally separated)
		-	u are currently married, provide the following information t your current spouse.
Info	ormation About Your Parent 2	Curr	ent Spouse's Legal Name
Parer	nt 2's Legal Name	4.a.	Family Name (Last Name)
).a.	Family Name (Last Name)	4.b.	Given Name (First Name)
9.b.	Given Name (First Name)	4.c.	Middle Name
9.c.	Middle Name	5.	A-Number (if any)
	at 2's Name at Birth (if different than above)		► A-
	Family Name	6.	Current Spouse's Date of Birth (mm/dd/yyyy)
10.b.	(Last Name) Given Name	_	
	(First Name)	7.	Date of Marriage to Current Spouse (mm/dd/yyyy)
10.c.	Middle Name	~	L. CRIST
11.	Date of Birth (mm/dd/yyyy)		ent Spouse's Place of Birth
12.	Sex Male Female	о.а.	City or Town
13.	City or Town of Birth	8 h	State or Province
	City of Town of Birth	0.0.	State of Frontier
14.	Country of Birth	8.c.	Country
	Country of Birth	0.0.	Country
15.	Current City or Town of Residence (if living)	Place	e of Marriage to Current Spouse
		9.a.	City or Town
16.	Current Country of Residence (if living)		
		9.b.	State or Province
Par	t 5. Information About Your Marital History	9.c.	Country
1.	What is your current marital status?		
	☐ Single, Never Married ☐ Married ☐ Divorced	10.	Is your current spouse applying with you?
	☐ Widowed ☐ Marriage Annulled		Yes No
	Legally Separated		
2.	If you are married, is your spouse a current member of the U.S. armed forces or U.S. Coast Guard?		
	□ N/A □ Yes □ No		

Part 5. Information About Your Marital History (continued)

Information About Prior Marriages (if any)

If you have been married before, whether in the United States or in any other country, provide the following information about your prior spouse. If you have had more than one previous marriage, use the space provided in **Part 14. Additional Information** to provide the information below.

Prior Spouse's Legal Name (provide family name before marriage)

11.a.	Family Name (Last Name)		
11.b.	Given Name (First Name)		
11.c.	Middle Name		
12.	Prior Spouse's I	Date of Birth (mm/dd/	уууу)
13.	Date of Marriag	ge to Prior Spouse (mn	n/dd/yyyy)
Place	of Marriage to I	Prior Spouse	
14.a.	City or Town		
14.b.	State or Provinc	ce	
14.c.	Country		
15.	Date Marriage v	with Prior Spouse Leg	ally Ended
	(mm/dd/yyyy)		
Place	Where Marriage	e with Prior Spouse Le	egally Ended
16.a.	City or Town		
16.b.	State or Provinc	ce	
16	C		
16.c.	Country		

Part 6. Information About Your Children

1. Indicate the total number of ALL living children (including adult sons and daughters) that you have.

NOTE: The term "children" includes all biological or legally adopted children, as well as current stepchildren, of any age, whether born in the United States or other countries, married or unmarried, living with you or elsewhere and includes any missing children and those born to you outside of marriage.

Provide the following information for each of your children. If you have more than three children, use the space provided in **Part 14. Additional Information**.

Child 1

Current I	Legal	Name
-----------	-------	------

2.a.	Family Name (Last Name)				
2.b.	Given Name (First Name)				
2.c.	Middle Name				
3.	A-Number (if a	nny)			
		► A			

	, 11			
4.	Date of Birth (mm/dd/yyyy)			

5.	Country of Birth

6	Is this child applying with you?	□Ves	□No	

	$^{\circ}$	ы	Chil

Current Legal Name

7.a.	Family Name (Last Name)	
7.h.	Given Name	

- (First Name)
- 7.c. Middle Name8. A-Number (if any)
- ► A-
- 9. Date of Birth (mm/dd/yyyy)
- 10. Country of Birth
- 11. Is this child applying with you? Yes No

	A-Number ► A-
Part 6. Information About Your Children (continued)	Part 8. General Eligibility and Inadmissibility Grounds
Child 3	1. Have you EVER been a member of, involved in, or in
Current Legal Name	any way associated with any organization, association, fund, foundation, party, club, society, or similar group in
12.a. Family Name (Last Name) 12.b. Given Name	the United States or in any other location in the world including any military service? Yes No
(First Name)	If you answered "Yes" to Item Number 1., complete Item
12.c. Middle Name	Numbers 2 13.b. below. If you need extra space to complete this section, use the space provided in Part 14. Additional
13. A-Number (if any) A-	Information. If you answered "No," but are unsure of your answer, provide an explanation of the events and circumstances in the space provided in Part 14. Additional Information.
14. Date of Birth (mm/dd/yyyy)	Organization 1
15. Country of Birth	2. Name of Organization
16. Is this child applying with you?	No 3.a. City or Town
Part 7. Biographic Information	3.b. State or Province
1. Ethnicity (Select only one box)	
Hispanic or Latino	3.c. Country
☐ Not Hispanic or Latino	4 24 25
2. Race (Select all applicable boxes)	4. Nature of Group
White	
Asian	Dates of Membership or Dates of Involvement
Black or African American	5.a. From (mm/dd/yyyy)
American Indian or Alaska Native	5.b. To (mm/dd/yyyy)
Native Hawaiian or Other Pacific Islander	
3. Height Feet Inches	Organization 2
4. Weight Pounds	6. Name of Organization
5. Eye Color (Select only one box)	7.a. City or Town
☐ Black ☐ Blue ☐ Brown	
Gray Green Hazel	7.b. State or Province
☐ Maroon ☐ Pink ☐ Unknown/O	
6. Hair Color (Select only one box)	7.c. Country
Bald (No hair) Black Blond	
☐ Brown ☐ Gray ☐ Red	8 Nature of Group

Sandy

☐ White

Unknown/Other

				A-Number ► A-	
	t 8. General Eligibility and Incounds (continued)	admissibility	20.	Have you EVER had a prior final or deportation, or removal reinstated?	rder of exclusion, Yes No
Dates	ites of Membership or Dates of Involvement			Have you EVER held lawful permawhich was later rescinded?	nent resident status Yes No
	From (mm/dd/yyyy) To (mm/dd/yyyy)		22.	Have you EVER been granted volumer immigration officer or an immigration depart within the allotted time?	ntary departure by an
Orga 10.	Name of Organization		23.	Have you EVER applied for any kir protection from removal, exclusion,	nd of relief or
	City or Town		24.a.	. Have you EVER been a J nonimmig who was subject to the two-year for requirement?	
	State or Province Country		Nun	ou answered "Yes" to Item Number 2 nbers 24.b 24.c. If you answered "You skip to Item Number 25.	4.a., complete Item
12.	Nature of Group		24.b	 Have you complied with the foreign requirement? 	residence Yes No
Dates	s of Membership or Dates of Involvem	ent	24.c.	Have you been granted a waiver or he State issued a favorable waiver record for you?	
13.a.	From (mm/dd/yyyy)		-		
13.b.	To (mm/dd/yyyy)		Cri	minal Acts and Violations	
think you a an ex	yer Item Numbers 14 86.b. Choose is correct. If you answer "Yes" to any naswer "No," but are unsure of your planation of the events and circumstarded in Part 14. Additional Information Have you EVER been denied admiss States?	questions (or if ranswer), provide aces in the space on.	ques other enfor have ques Unit "Yes Part	Item Numbers 25 45., you must and tion that applies to you, even if your rewise cleared, or even if anyone, included a record. You must also answer "Yestions whether the action or offense occed States or anywhere else in the world "to Item Numbers 25 45., use the 14. Additional Information to prove	ecords were sealed or ding a judge, law that you no longer s" to the following curred here in the d. If you answer space provided in ide an explanation
15.	Have you EVER been denied a visa t	Yes No	where (date	includes why you were arrested, cited re you were arrested, cited, detained, or e) the event occurred; and the outcome aple, no charges filed, charges dismiss	or charged; when e or disposition (for
16.	Have you EVER worked in the Unite authorization?	d States without Yes No		munity service). Have you EVER been arrested, cited	
17.	Have you EVER violated the terms of nonimmigrant status?	Yes No	23.	detained for any reason by any law e (including but not limited to any U.S official or any official of the U.S. ar	enforcement official S. immigration
18.	Are you presently or have you EVER exclusion, rescission, or deportation p		26.	Coast Guard)? Have you EVER committed a crime	Yes No
19.	Have you EVER been issued a final deportation, or removal?			you were not arrested, cited, charged crime)?	

	rt 8. General Eligibility and Inadmissibility ounds (continued)	35.	Have you EVER engaged in prostitution or are you coming to the United States to engage in prostitution? Yes No
27.	Have you EVER pled guilty to or been convicted of a crime or offense (even if the violation was subsequently expunged or sealed by a court, or if you were granted a pardon, amnesty, a rehabilitation decree, or other act of	36.	Have you EVER directly or indirectly procured (or attempted to procure) or imported prostitutes or persons for the purpose of prostitution? Yes No
	clemency)?	37.	Have you EVER received any proceeds or money from prostitution? Yes No
28.	documentation decree, or other act of clemency, provide documentation of that post-conviction action. Have you EVER been ordered punished by a judge or had conditions imposed on you that restrained your liberty (such as a prison sentence, suspended sentence, house	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
	arrest, parole, alternative sentencing, drug or alcohol treatment, rehabilitative programs or classes, probation, or community service)? 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
29.	Have you EVER been a defendant or the accused in a criminal proceeding (including pre-trial diversion, deferred prosecution, deferred adjudication, or any withheld adjudication)? 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
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?	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
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?	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
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	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
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	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
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	45.	should have known that this benefit resulted from the illicit activity of your spouse or parent? Yes No Have you EVER engaged in money laundering or have
	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?	70.	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
	Yes No		

	A-Number ► A-					
Part 8. General Eligibility and Inadmissibility Grounds (continued)	48.e. Provided money, a thing of value, services or labor, or any other assistance or support for an individual, group, or organization who did any of the activities described in Item Number 48.a. ? Yes No					
Security and Related	49. Have you EVER received any type of military,					
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	paramilitary, or weapons training? Yes No					
United States?	50. Do you intend to engage in any of the activities listed in any part of Item Numbers 48.a 49. ? 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 	NOTE: If you answered "Yes" to any part of Item Numbers 46.a. - 50. , explain what you did, including the dates and location of the circumstances, or what you intend to do in the space provided in Part 14. Additional Information .					
46.c. Engage in any activity whose purpose includes opposing,	Are you the spouse or child of an individual who EVER:					
controlling, or overthrowing the U.S. Government by force, violence, or other unlawful means while in the United States? Yes No	51.a. Committed, threatened to commit, attempted to commit, conspired to commit, incited, endorsed, advocated, planned, or prepared any of the following: hijacking, sabotage, kidnapping, political assassination, or use of a					
46.d. Engage in any activity that could endanger the welfare, safety, or security of the United States?	weapon or explosive to harm another individual or cause substantial damage to property? Yes No					
∐ Yes ∐ No	51.b. Participated in, or been a member or a representative of a					
46.e. Engage in any other unlawful activity? Yes No No 47. Are you engaged in or, upon your entry into the United	group or organization that did any of the activities described in Item Number 51.a. ? Yes No					
States, do you intend to engage in any activity that could have potentially serious adverse foreign policy consequences for the United States? Yes No	51.c. Recruited members, or asked for money or things of value, for a group or organization that did any of the activities described in Item Number 51.a. ? Yes No					
Have you EVER:	51.d. Provided money, a thing of value, services or labor, or					
48.a. Committed, threatened to commit, attempted to commit, conspired to commit, incited, endorsed, advocated,	any other assistance or support for any of the activities described in Item Number 51.a. ? Yes No					
planned, or prepared any of the following: hijacking, sabotage, kidnapping, political assassination, or use of a weapon or explosive to harm another individual or cause substantial damage to property? Yes No	51.e. Provided money, a thing of value, services or labor, or any other assistance or support to an individual, group, or organization who did any of the activities described in Item Number 51.a. ? Yes No					
48.b. Participated in, or been a member of, a group or organization that did any of the activities described in Item Number 48.a. ? Yes No	51.f. Received any type of military, paramilitary, or weapons training from a group or organization that did any of the activities described in Item Number 51.a. ?					
48.c. Recruited members or asked for money or things of value	Yes No					
for a group or organization that did any of the activities described in Item Number 48.a. ? Yes No	NOTE: If you answered "Yes" to any part of Item Number 51., explain the relationship and what occurred, including the					
48.d. Provided money, a thing of value, services or labor, or	dates and location of the circumstances, in the space provided in Part 14. Additional Information.					
any other assistance or support for any of the activities described in Item Number 48.a. ? Yes No	52. Have you EVER assisted or participated in selling, providing, or transporting weapons to any person who, to your knowledge, used them against another person?					

Yes No

	t 8. General Eligibility and Incumos (continued)	admissibility	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					
53.	Have you EVER worked, volunteered served in any prison, jail, prison camp labor camp, or any other situation that persons?	, detention facility,	52. - locat	TE: If you answered "Yes" to any part of Item Numbers 60., explain what occurred, including the dates and ion of the circumstances, in the space provided in Part 14. itional Information.				
54.	Have you EVER been a member of, a participated in any group, unit, or organization	anization of any	Pul	blic Charge				
	kind in which you or other persons us weapon against any person or threater		61.	Are you subject to the public charge ground of inadmissibility under INA section 212(a)(4)? Yes No				
55.	Have you EVER served in, been a me or participated in any military unit, pa police unit, self-defense unit, vigilante guerilla group, militia, insurgent organother armed group?	ramilitary unit, e unit, rebel group,	Num Num to co	u answered "Yes" to Item Number 61., complete Item abers 62 68.d. below. If you answered "No" to Item aber 61., go to Item Number 69.a. If you need extra space implete this section, use the space provided in Part 14. itional Information.				
56.	Have you EVER been a member of, of affiliated with, the Communist Party of totalitarian party (in the United States	or any other	62.	What is the size of your household?				
		Yes No	63.	Indicate your annual household income.				
57.	During the period from March 23, 193 did you ever order, incite, assist, or of in the persecution of any person becau national origin, or political opinion, ir either the Nazi government of German organization or government associated Nazi government of Germany?	herwise participate use of race, religion, a association with any or any		 □ \$0-27,000 □ \$27,001-52,000 □ \$52,001-85,000 □ \$85,001-141,000 □ Over \$141,000 				
	you EVER ordered, incited, called for, d with, or otherwise participated in any		64.	Identify the total value of your household assets. \$0-18,400				
58.a.	Acts involving torture or genocide?	Yes No		\$18,401-136,000				
58.b.	Killing any person?	Yes No		\$136,001-321,400				
58.c.	Intentionally and severely injuring an	y person?		\$321,401-707,100 Over \$707,100				
58.d.	Engaging in any kind of sexual contact any person who did not consent or was or was being forced or threatened?							
58.e.	Limiting or denying any person's abilireligious beliefs?	ity to exercise Yes No						
59.	Have you EVER recruited, enlisted, of any person under 15 years of age to searmed force or group?	_						

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Par	t 8. General Eligibility and Inac	dmissib	oility Ground	ds (contin	nued)		
65.	Identify the total value of your household	ld liabilit	ies (including b	oth secure	d and unsecure	ed liabiliti	ies).
	\$0 \$1-10,100 \$10,10	1-57,700		557,701-186	6,800	Over \$1	86,800
66.	1 or more years of college credit, no	ade - no o degree	diploma I	High school Associate's	degree	Bachelo	rnative credential r's degree te degree
67.	List your certifications, licenses, skills of	obtained '	through work e	xperience,	and education	al certific	ates.
68.a.	Have you ever received Supplemental S (TANF), or State, Tribal, territorial, or l "General Assistance" in the State contest	ocal, cas	h benefit progra	ams for inc	ome maintena		
	Have you ever received long-term instit If your answer to Item Number 68.a. is receipt, and the dollar amount of benefit	s "Yes,"]	list the specific	_		the start a	Yes No
	Benefit Received	is receive	Start Da	ite	End Dat	te	Dollar Amount
68.d.	If your answer to Item Number 68.b. is period of institutionalization, and the re-			•	te for each ins	titution, th	ne start and end dates of each
	Institution Name/City/State	Da	ite From	Da	te To		Reason
		-					

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	t 8. General Eligibility and Inadmissibility ounds (continued)		April 1, 1997, have you been unlawfully present in the				
	gal Entries and Other Immigration Violations	78.a. For more than 180 days but less than a year, and departed the United States? Yes					
,	a. Have you EVER failed or refused to attend or to remain in attendance at any removal proceeding filed against you on or after April 1, 1997? Yes No		For one year or more and then departed the United States? Yes No Yes No Yes Vou were unlawfully present in the United States if				
69.b.	If your answer to Item Number 69.a. is "Yes," do you believe you had reasonable cause? Yes No	you e admi	entered the United States without being inspected and ted or inspected and paroled, or if you legally entered the d States but you stayed longer than permitted.				
69.c.	If your answer to Item Number 69.b. is "Yes," attach a written statement explaining why you had reasonable cause.	reent	April 1, 1997, have you EVER reentered or attempted to er the United States without being inspected and admitted roled after:				
70.	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		Having been unlawfully present in the United States for more than one year in the aggregate? Yes No				
71.	visa or entry into the United States? Yes No Have you EVER lied about, concealed, or misrepresented	79.b.	Having been deported, excluded, or removed from the United States? Yes No				
	any information on an application or petition to obtain a visa, other documentation required for entry into the	Mis	cellaneous Conduct				
	United States, admission to the United States, or any other kind of immigration benefit? Yes No	80.	Do you plan to practice polygamy in the United States? Yes No				
72.	Have you EVER falsely claimed to be a U.S. citizen (in writing or any other way)? Yes No	81.	Are you accompanying another foreign national who requires your protection or guardianship but who is				
73.	Have you EVER been a stowaway on a vessel or aircraft arriving in the United States? Yes No		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)?				
74.	Have you EVER knowingly encouraged, induced, assisted, abetted, or aided any foreign national to enter or		Yes No				
	to try to enter the United States illegally (alien smuggling)? Yes No	82.	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				
75.	Are you under a final order of civil penalty for violating INA section 274C for use of fraudulent documents?		custody of the child?				
	☐ Yes ☐ No	83.	Have you EVER voted in violation of any Federal, state, or local constitutional provision, statute, ordinance, or regulation in the United States?				
	noval, Unlawful Presence, or Illegal Reentry	<i>-</i> .	163 110				
<i>Afte</i> 76.	Have you EVER been excluded, deported, or removed from the United States or have you ever departed the	84.	Have you EVER renounced U.S. citizenship to avoid being taxed by the United States? Yes No				
	United States on your own after having been ordered excluded, deported, or removed from the United States?		you EVER: Applied for exemption or discharge from training or				
	Yes No	22	service in the U.S. armed forces or in the U.S. National				
77.	Have you EVER entered the United States without being inspected and admitted or paroled?		Security Training Corps on the ground that you are a foreign national? Yes No				

Yes No

inspected and admitted or paroled?

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Part 8. General Eligibility and Inadmissibility Grounds (continued)	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						
85.b. Been relieved or discharged from such training or service on the ground that you are a foreign national? Yes No	requesting.)						
85.c. Been convicted of desertion from the U.S. armed forces? Yes No No 86.a. Have you EVER left or remained outside the United States to avoid or evade training or service in the U.S.	Part 10. Applicant's Statement, Contact Information, Declaration, Certification, and Signature						
armed forces in time of war or a period declared by the President to be a national emergency? Yes No 86.b. If your answer to Item Number 86.a. is "Yes," what was	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.						
your nationality or immigration status immediately before	Applicant's Statement						
you left (for example, U.S. citizen or national, lawful permanent resident, nonimmigrant, parolee, present without admission or parole, or any other status)?	NOTE: Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.						
Part 9. Accommodations for Individuals With Disabilities and/or Impairments NOTE: Read the information in the Form I-485 Instructions before completing this part.	 1.a.						
1. Are you requesting an accommodation because of your disabilities and/or impairments? Yes No	a language in which I am fluent, and I understood everything.						
If you answered "Yes" to Item Number 1. , select any applicable box in Item Numbers 2.a 2.c. and provide an answer.	2. At my request, the preparer named in Part 12., prepared this application for me based only upon						
2.a. I am deaf or hard of hearing and request the following accommodation. (If you are requesting a sign-language interpreter, indicate for which language (for example, American Sign Language).):	 information I provided or authorized. Applicant's Contact Information 3. Applicant's Daytime Telephone Number 						
2.b. I am blind or have low vision and request the following accommodation:	4. Applicant's Mobile Telephone Number (if any)						
	5. Applicant's Email Address (if any)						

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Part 10. Applicant's Statement, Contact Information, Declaration, Certification, and Signature (continued)

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:

- 1) 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.

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

Inte	erpreter's Full Name
1.a.	Interpreter's Family Name (Last Name)
1.b.	Interpreter's Given Name (First Name)
2.	Interpreter's Business or Organization Name (if any)
Inte	erpreter's Mailing Address
3.a.	Street Number and Name
3.b.	Apt. Ste. Flr.
3.c.	City or Town
3.d.	State 3.e. ZIP Code
3.f.	Province
3.g.	Postal Code
3.h.	Country
Inte	erpreter's Contact Information
4.	Interpreter's Daytime Telephone Number
5.	Interpreter's Mobile Telephone Number (if any)
J.	interpreter's twoone rerepnone realmost (if any)
6.	Interpreter's Email Address (if any)

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	et 11. Interpreter's Contact Information etification, and Signature (continued)	Preparer's Mailing Address 3.a. Street Number and Name						
Inte	erpreter's Certification	3.b.	Apt. Ste. Flr.					
I am whice 1.b., every answ she u appli	fluent in English and his the same language specified in Part 10., Item Number and I have read to this applicant in the identified language question and instruction on this application and his or her ter to every question. The applicant informed me that he or understands every instruction, question, and answer on the cation, including the Applicant's Declaration and ification, and has verified the accuracy of every answer. *Expreter's Signature* Interpreter's Signature (sign in ink)	3.f. 3.g. 3.h.	City or Town State 3.e. ZIP Code Province Postal Code Country parer's Contact Information Preparer's Daytime Telephone Number					
7.b.	Date of Signature (mm/dd/yyyy)	5.	Preparer's Mobile Telephone Number (if any)					
Sign	et 12. Contact Information, Declaration, and nature of the Person Preparing this plication, if Other Than the Applicant	6.	Preparer's Email Address (if any)					
Provi	ide the following information about the preparer.	Pre	parer's Statement					
<i>Pre</i> ₁	parer's Full Name Preparer's Family Name (Last Name)	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.					
1.b.	Preparer's Given Name (First Name)	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.					
2.	Preparer's Business or Organization Name (if any)		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.					

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

Preparer's Certification

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

Preparer's Signature (sign in ink)	
Treparer's Signature (sign in link)	
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)							
·							

Part 14. Additional Information		5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the Page Number , Part Number , and Item Number to which your answer refers; and sign and date each sheet.		5.d.					
	Family Name (Last Name) Given Name (First Name)						
1.c.	Middle Name	6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
2.	A-Number (if any) ► A-	6.d.					
3.a.	Page Number 3.b. Part Number 3.c. Item Number						
3.d.							
		7.a.	Page Number	7.b.	Part Number	7.c.	Item Number
		7.d.					
4.a. 4.d.	Page Number 4.b. Part Number 4.c. Item Number						