	A-Number ► A-						
3.	Decision (for example, approved, refused, denied, withdrawn)						
4.	Date of Decision (mm/dd/yyyy)						
Add	ress History						
durin States space	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 .						
Physi	ical 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						
7.h.	Country						

Part 2. Application Type or Filing Category (continued)

Information About Your Immigrant Category

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

3. Receipt Number of Underlying Petition (if any)
4. Priority Date from Underlying Petition (if any)
(mm/dd/yyyy)
If you are a derivative applicant (the spouse or unmarried

If you are a **derivative applicant** (the spouse or unmarried child under 21 years of age of a principal applicant), provide the following information for the **principal applicant**.

Principal Applicant's Name

7.

S.a.	(Last Name)	
5.b.	Given Name (First Name)	
5.c.	Middle Name	

6. Principal Applicant's A-Number (if any)

► A-					
Principal Applicant's Date	of Birt	h			

(mm/dd/yyyy)

8. Receipt Number of Principal's Underlying Petition (if any)

9. Priority Date of Principal Applicant's Underlying Petition
(if any) (mm/dd/yyyy)

Part 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?
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**.

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

Education of C.S. Embassy of C.S. Consulate					
2.a.	City				
2.b.	Count	ту			

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Part 3. Additional Information About You (continued)	Address of Employer or Company 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 and Name	12.g. Postal Code 12.h. Country		
9.b.			
9.c. City or Town	13. Your Occupation		
9.d. State 9.e. ZIP Code			
	Dates of Employment		
9.f. Province	14.a. From (mm/dd/yyyy)		
9.g. Postal Code	14.b. To (mm/dd/yyyy)		
9.h. Country	Employer 2		
Dates of Residence	15. Name of Employer or 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. Apt. Ste. Flr.		
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		
	17. Your Occupation		
	Dates of Employment		
	18.a. From (mm/dd/yyyy)		
	18.b. To (mm/dd/yyyy)		

A-Number ► A-

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				A-Number ► A-
	t 3. Addition	nal Information About You	3.	Date of Birth (mm/dd/yyyy) Sex
	de your most re s (if not already	cent employment outside of the United listed above).	5.	City or Town of Birth
19.	Name of Empl	oyer or Company	6.	Country of Birth
Addr	ess of Employer	r or Company		
	Street Number and Name		7.	Current City or Town of Residence (if living)
20.b.	Apt	Ste. Flr.	8.	Current Country of Residence (if living)
20.c.	City or Town			
20.d.	State	20.e. ZIP Code	Info	ormation About Your Parent 2
20.f.	Province		Parer	nt 2's Legal Name
20.g.	Postal Code		9.a.	Family Name (Last Name)
20.h.	Country		9.b.	Given Name (First Name)
			9.c.	Middle Name
21.	Your Occupati	on	Parei	nt 2's Name at Birth (if different than above)
				Family Name
Dates	s of Employmen		10 h	(Last Name) Given Name
22.a.	From (mm/dd/	уууу)	10.0.	(First Name)
22.b.	To (mm/dd/yy	уу)	10.c.	Middle Name
			11.	Date of Birth (mm/dd/yyyy)
Par	t 4. Informa	ntion About Your Parents	12.	Sex Male Female
Info	ormation Abo	out Your Parent 1	13.	City or Town of Birth
Parer	nt 1's Legal Nan	ne		
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			
Parer	nt 1's Name at B	irth (if different than above)	16.	Current Country of Residence (if living)
	Family Name (Last Name)	,		
2.b.	Given Name (First Name)			
2.c.	Middle Name			

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Par	t 5. Information About Your Marital History	Place of Marriage to Current Spouse		
1.	What is your current marital status?	9.a. City or Town		
	Single, Never Married Married Divorced			
	Widowed Marriage Annulled	9.b. State or Province		
	Legally Separated			
2.	If you are married, is your spouse a current member of the	9.c. Country		
	U.S. armed forces or U.S. Coast Guard?			
	☐ N/A ☐ Yes ☐ No	10. Is your current spouse applying with you?		
3.	How many times have you been married (including annulled marriages and marriages to the same person)?	Yes No		
	manages and manages to the same person).	Information About Prior Marriages (if any)		
•	ormation About Your Current Marriage cluding if you are legally separated)	If you have been married before, whether in the United States of 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 t your current spouse.	marriage, use the space provided in Part 14. Additional Information to provide the information below.		
	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		
		14.a. City or Town		
Curr	ent Spouse's Place of Birth			
8.a.	City or Town	14.b. State or Province		
8.b.	State or Province	14.c. Country		
0				
8.c.	Country	15. Date Marriage with Prior Spouse Legally Ended (mm/dd/yyyy)		

A-Number ► A-

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			A remove p 11
	rt 5. Information About Your Marital History ntinued)	Chile Curr	d 2 ent Legal Name
	e Where Marriage with Prior Spouse Legally Ended		Family Name
	. City or Town	7.b.	(Last Name) Given Name
		7.00	(First Name)
16.b.	State or Province	7.c.	Middle Name
		8.	A-Number (if any)
16.c.	Country		► A-
		9.	Date of Birth (mm/dd/yyyy)
		10.	Country of Birth
Par	rt 6. Information About Your Children		
1.	Indicate the total number of ALL living children (including adult sons and daughters) that you have.	11.	Is this child applying with you?
	NOTE: The term "children" includes all biological or	Chile	d 3
	legally adopted children, as well as current stepchildren, of any age, whether born in the United States or other	Curr	ent Legal Name
	countries, married or unmarried, living with you or	12.a	Family Name (Last Name)
	elsewhere and includes any missing children and those born to you outside of marriage.	12.b	Given Name
			(First Name)
Provide the following information for each of your children. If you have more than three children, use the space provided in		12.c.	Middle Name
	14. Additional Information.	13.	A-Number (if any)
Chile	1 1		► A-
Curr	ent Legal Name	14.	Date of Birth (mm/dd/yyyy)
2.a.	Family Name (Last Name)	15.	Country of Birth
2.b.	Given Name		
	(First Name)	16.	Is this child applying with you?
2.c.	Middle Name		
3.	A-Number (if any)	Par	rt 7. Biographic Information
	► A-	1.	Ethnicity (Select only one box)
4.	Date of Birth (mm/dd/yyyy)		Hispanic or Latino
5.	Country of 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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Part 7. Biographic Information (continued)					Dates of Membership or Dates of Involvement			
3.	Height	Feet	Inches	5.a.	From (mm/dd/yyyy)			
1.	Weight		Pounds []	5.b.	To (mm/dd/yyyy)			
5.	Eye Color (Select on	ly 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 on	ly one box)						
	Bald (No hair)	Black	Blond	7.b.	State or Province			
	Brown [Gray	Red					
	Sandy [White	Unknown/Other	7.c.	Country			
	t 8. General Eligi	ibility and	Inadmissibility	8.	Nature of Group			
Gro	ounds							
l .	Have you EVER been a member of, involved in, or in any way associated with any organization, association, fund, foundation, party, club, society, or similar group in			Dates of Membership or Dates of Involvement				
				9.a.	From (mm/dd/yyyy)			
	the United States or i	n any other l			To (mm/dd/yyyy)			
including any military service?				J.D.	10 (mm/dd/yyyy)			
	answered "Yes" to It			Orga	nization 3			
	ection, use the space p		extra space to complete Part 14. Additional	10.	Name of Organization			
	mation. If you answer		ut are unsure of your vents and circumstances					
	er, provide an explana e space provided in Pa			11.a.	City or Town			
Orgai	nization 1							
2.	Name of Organization	n		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 Involver	nent		
				13.a.	From (mm/dd/yyyy)			
١.	Nature of Group			13.b	To (mm/dd/yyyy)			

A-Number ► A-

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