

## 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 10/31/2025

For USCIS Use Only							
Preference Category:		Receipt		Action Block			
Country Chargeable:	-						
Priority Date:							
Date Form I-693 Received:	-						
☐ Applicant ☐ Interview Interviewed Waived  Date of Initial Interview:  Lawful Permanent Resident as of:	the trice with the relation of the first of the relation of t						
To be o	ompleted by an at	ttorney or accred	ited represe	ntative (if any).			
Select this box if Form G-28 is attached.		Attorney State Ba	ar Number	Attorney or Accredited Representative USCIS Online Account Number (if any)			
► START HERE - Type or print in NOTE TO ALL APPLICANTS: If Instructions, U.S. Citizenship and Imm	you do not complete		plication or f	Number ► A- Cail to submit required documents listed in the ation.			
Part 1. Information About You (Person applying for lawful permanent residence)  Your Current Legal Name (do not provide a nickname)		ying	Family Nar (Last Name Given Nam (First Name Middle Nar	e) Lee Lee Lee Lee Lee Lee Lee Lee Lee L			
1.a. Family Name (Last Name)  1.b. Given Name (First Name)  1.c. Middle Name		4.b.	Family Nar (Last Name Given Nam (First Name Middle Nar	e) lee lee			
Other Names You Have Used Sapplicable)	Since Birth (if	Oth	Other Information About You				
NOTE: Provide all other names you have ever used, including your family name at birth, other legal names, nicknames, aliases, and assumed names. If you need extra space to complete this section, use the space provided in Part 14. Additional Information.		5. luding	NOTE: In include any connection	th (mm/dd/yyyy)  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 rovided in <b>Part 14. Additional Information</b> .			
2.a. Family Name (Last Name) 2.b. Given Name		6.	Sex [ City or Tov	☐ Male ☐ Female			
(First Name)  2.c. Middle Name							

			A-Number ► A-
Par	rt 1. Information About You (Person applying	Soc	cial Security Card
for <b>8.</b>	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	15.	If you answered "Yes," provide the information requested in <b>Item Number 15.</b> Provide your U.S. Social Security Number (SSN).
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	16.	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.	in Part 14. Additional Information.  USCIS Online Account Number (if any)	17.	Yes No  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	S. Mailing Address		Yes No
12.a.	In Care Of Name (if any)	Rec	cent Immigration History
12.b	Street Number and Name		ride the information for <b>Item Numbers 18 24.</b> 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
	State 12.f. ZIP Code (USPS ZIP Code Lookup)	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	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	21.	Country that Issued this Passport or Travel Document
abou	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.	22.	Nonimmigrant Visa Number from this Passport (if any)
13.a.	In Care Of Name (if any)	Place	e of Last Arrival into the United States
		23.a.	. City or Town
13.b	. Street Number and Name		
13.c.		23.b	. State
13 A	City or Town	24.	Date of Last Arrival (mm/dd/yyyy)

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**13.d.** City or Town

13.e. State

**13.f.** ZIP Code

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## **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):					
		STUDENT					
25.b.		Was inspected at a port of entry and paroled as (for example, humanitarian parole, Cuban parole):					
25.c.		Came into the United States without admission or parole.					
25.d.		Other:					
If you	were	e issued a Form I-94 Arrival-Departure Record Number:					
26.a.	Forn	n I-94 Arrival-Departure Record Number					
		<b>&gt;</b>					
26.b.	Expi	ration Date of Authorized Stay Shown on Form I-94					
	(mm	/dd/yyyy)					
26.c.	Status on Form I-94 (for example, class of admission, or paroled, if paroled)						
27.	What is your current immigration status (if it has changed since your arrival)?						
Provi	de yo	our name exactly as it appears on your Form I-94 (if					
28.a.		ily Name t Name)					
28.b.		en Name tt Name)					
28.c.	Mide	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.	Family-based
1.И.	ranniv-dased

		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	ecial Immigrant
		Religious worker, Form I-360
		Special immigrant juvenile, Form I-360
		Certain Afghan or Iraqi National, Form I-360 or Form DS-157
		Certain international broadcaster, Form I-360
		Certain G-4 international organization or family member or NATO-6 employee or family member, Form I-360
1.d.	Asy	lee or Refugee
		Asylum status (INA section 208), Form I-589 or Form I-730
		Refugee status (INA section 207), Form I-590 or Form I-730
1.e.	Hu	man Trafficking Victim or Crime Victim

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

1-914 of derivative family member, Form 1-91
Crime victim (U Nonimmigrant), Form I-918,
derivative family member, Form I-918A, or
qualifying family member, Form I-929

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### **Part 2. Application Type or Filing Category** (continued)

#### 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 1.g. 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 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.

#### Information About Your Immigrant Category

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

infor	rmation.						
3.	Receipt Number of Underlying Petition (if any)						
4.	Priority Date from Underlying Petition (if any)						
	(mm/dd/yyyy)						
child	u are a <b>derivative applicant</b> (the spouse or unmarried under 21 years of age of a principal applicant), provide the wing information for the <b>principal applicant</b> .						
Princ	cipal 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)						
0.	► Indicate of Trinicipal's Chactrying Tetricin (if any)						
9.	Priority Date of Principal Applicant's Underlying Petition						
	(if any) (mm/dd/yyyy)						
Par	t 3. Additional Information About You						
1.	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 <b>Item Number 1.</b> , complete <b>Item Numbers 2.a 4.</b> below. If you need extra space to complete this section, use the space provided in <b>Part 14. Additional Information</b> .						
Loca	tion of U.S. Embassy or U.S. Consulate						
2.a.	City						
2.b.	Country						
3.	Decision (for example, approved, refused, denied, withdrawn)						
4.	Date of Decision (mm/dd/yyyy)						

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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 <b>Part 14. Additional Information</b> .	9.b.
Physical Address 1 (current address)	9.f. Province
5.a. Street Number and Name	
<b>5.b.</b> Apt. Ste. Flr.	9.g. Postal Code
<b>5.c.</b> City or Town	9.h. Country
5.d. State 5.e. ZIP Code	Dates of Residence
	10.a. From (mm/dd/yyyy)
<b>5.f.</b> Province	<b>10.b.</b> To (mm/dd/yyyy)
5.g. Postal Code	10.b. 10 (IIIII/dd/yyyy)
5.h. Country	Employment History
Dates of Residence  6.a. From (mm/dd/yyyy)	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 <b>Part 14. Additional Information</b> .
<b>6.b.</b> To (mm/dd/yyyy)	Employer 1 (current or most recent)
Physical Address 2	11. Name of Employer or Company
7.a. Street Number and Name	
7.b.	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.
<b>7.f.</b> Province	
7.g. Postal Code	12.d. State 12.e. ZIP Code
<b>7.h.</b> Country	12.f. Province
	12.g. Postal Code
Dates of Residence	12.h. Country
8.a. From (mm/dd/yyyy)	
<b>8.b.</b> To (mm/dd/yyyy)	13. Your Occupation

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

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Par	t 4. Information About Your Parents	3.	How many times have you been married (including
	ntinued)		annulled marriages and marriages to the same person)?
7.	Current City or Town of Residence (if living)		
•	Current only of Town of Residence (II II ving)	Inf	ormation About Your Current Marriage
8.	Current Country of Residence (if living)	•	cluding if you are legally separated)
0.	Current Country of Residence (if fiving)	If yo	ou are currently married, provide the following information
		abou	nt your current spouse.
Info	ormation About Your Parent 2		ent Spouse's Legal Name
Parer	at 2's Legal Name	4.a.	Family Name (Last Name)
9.a.	Family Name (Last Name)	4.b.	` <u> </u>
9.b.	Given Name (First Name)	4.c.	Middle Name
9.c.	Middle Name	5.	A-Number (if any)
			► A-
	at 2's Name at Birth (if different than above) Family Name	6.	Current Spouse's Date of Birth (mm/dd/yyyy)
10.a.	(Last Name)		
10.b.	Given Name (First Name)	7.	Date of Marriage to Current Spouse (mm/dd/yyyy)
10.c.	Middle Name		
11.	Date of Birth (mm/dd/yyyy)	Curr	ent Spouse's Place of Birth
		8.a.	City or Town
12.	Sex Male Female		
13.	City or Town of Birth	8.b.	State or Province
14.	Country of Birth	8.c.	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		

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## **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	Date of Birth (mm/dd/	уууу)
13.	Date of Marria	ge to Prior Spouse (mr	n/dd/yyyy)
Place	of Marriage to	Prior Spouse	
14.a.	City or Town		
14.b.	State or Provin	ice	
14.c.	Country		
15.	Date Marriage	with Prior Spouse Leg	ally Ended
	(mm/dd/yyyy)		
Place	Where Marriag	ge with Prior Spouse L	egally Ended
16.a.	City or Town		
16.b.	State or Provin	ice	
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

Junem Legai Name	;	

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

► A-					

**4.** Date of Birth (mm/dd/yyyy)

5.	Country of Birth					

**6.** Is this child applying with you?

Yes	No
1 05	110

Child 2

10.

Current Legal Name

- 7.a. Family Name (Last Name)
- **7.b.** Given Name (First Name)
- (First Name)

  7.c. Middle Name
- **8.** A-Number (if any)

► A-					

**9.** Date of Birth (mm/dd/yyyy)

Country of Birth

11. Is this child applying with you?

Yes	No

A-Number ► A-
Part 8. General Eligibility and Inadmissibility Grounds
1. Have you <b>EVER</b> been a member of, involved in, or in any way associated with any organization, association, fund, foundation, party, club, society, or similar group in
the United States or in any other location in the world including any military service?  Yes No

Yes No

Inches

Pounds

Brown

Hazel

Blond

Red

Unknown/Other

Unknown/Other

If you answered "Yes" to **Item Number 1.**, complete **Item** Numbers 2. - 13.b. below. If you need extra space to complete this section, use the space provided in Part 14. Additional 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**.

	• •
Orga	nization 1
2.	Name of Organization
3.a.	City or Town
J.u.	Chy of Town
3.b.	State or Province
3.c.	Country
4.	Nature of Group
	- Institute of the state of the
_	
Date	s of Membership or Dates of Involvement
5.a.	From (mm/dd/yyyy)
<i>-</i> 1	T. ( /11/ )
5.b.	To (mm/dd/yyyy)
Orga	nization 2
6.	Name of Organization
_	C'. T
7.a.	City or Town
7.b.	State or Province
7.c.	Country
0	N. C.C.
8.	Nature of Group

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12.c. Middle Name

14.

15.

1.

2.

3.

4.

5.

6.

A-Number (if any)

Country of Birth

Date of Birth (mm/dd/yyyy)

Is this child applying with you?

Part 7. Biographic Information

Hispanic or Latino Not Hispanic or Latino

White Asian

Height

Weight

Black

Gray

Maroon

Brown

Sandy

Ethnicity (Select **only one** box)

Race (Select all applicable boxes)

Black or African American

Eye Color (Select **only one** box)

Hair Color (Select only one box) Bald (No hair) Black

American Indian or Alaska Native

Native Hawaiian or Other Pacific Islander

Blue

Pink

Green

Gray

White

Feet

	Part 8. General Eligibility and Inadmissibility Grounds (continued)			Have you <b>EVER</b> had a prior final order of exclusion, deportation, or removal reinstated? Yes No
Dates	s of Membership or Dates of Involvem	ent	21.	Have you <b>EVER</b> held lawful permanent resident status which was later rescinded? Yes No
	From (mm/dd/yyyy) To (mm/dd/yyyy)		22.	Have you <b>EVER</b> been granted voluntary departure by an immigration officer or an immigration judge but failed to depart within the allotted time? Yes No
Orga	nization 3		22	Have you EVED applied for any kind of ratiof or
10.	Name of Organization		23.	Have you <b>EVER</b> applied for any kind of relief or protection from removal, exclusion, or deportation?  Yes No
11.a.	a. City or Town		24.a.	Have you <b>EVER</b> been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement?
11.b.	State or Province			
11.c.	Country		Nun	u answered "Yes" to Item Number 24.a., complete Item nbers 24.b 24.c. If you answered "No" to Item Number ., skip to Item Number 25.
			24.b	· Have you complied with the foreign residence
12.	Nature of Group			requirement? Yes No
Dates	s of Membership or Dates of Involvem	ent	24.c.	Have you been granted a waiver or has Department of State issued a favorable waiver recommendation letter for you?  Yes No
13.a.	From (mm/dd/yyyy)			
13.b.	To (mm/dd/yyyy)		Cri	minal Acts and Violations
think you a an ex	ver Item Numbers 14 86.b. Choose is correct. If you answer "Yes" to any answer "No," but are unsure of your planation of the events and circumstarded in Part 14. Additional Information Have you EVER been denied admiss States?  Have you EVER been denied a visa to the Have you EVER worked in the United	y questions (or if r answer), provide nces in the space ion. ion to the United	ques other enformation have ques Unit: "Yes Part that is when (date exan	Item Numbers 25 45., you must answer "Yes" to any tion that applies to you, even if your records were sealed or rwise cleared, or even if anyone, including a judge, law reement officer, or attorney, told you that you no longer a record. You must also answer "Yes" to the following tions whether the action or offense occurred here in the ed States or anywhere else in the world. If you answer "to Item Numbers 25 45., use the space provided in 14. Additional Information to provide an explanation includes why you were arrested, cited, detained, or charged; the event occurred; and the outcome or disposition (for aple, no charges filed, charges dismissed, jail, probation, munity service).
17.	authorization?  Have you EVER violated the terms of	Yes No	25.	Have you <b>EVER</b> been arrested, cited, charged, or detained for any reason by any law enforcement official
	nonimmigrant status?	Yes No		(including but not limited to any U.S. immigration official or any official of the U.S. armed forces or U.S.
18.	Are you presently or have you <b>EVER</b> exclusion, rescission, or deportation p			Coast Guard)?
19.	Have you <b>EVER</b> been issued a final deportation, or removal?	Yes No	26.	Have you <b>EVER</b> committed a crime of any kind (even if you were not arrested, cited, charged with, or tried for that crime)?  Yes No
	acportation, or removar?	Yes No		

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	rt 8. General Eligibility and Inadmissibility ounds (continued)	35.	Have you <b>EVER</b> engaged in prostitution or are you coming to the United States to engage in prostitution?
27.	Have you <b>EVER</b> 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 clemency)?  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.	36. 37. 38.	Have you <b>EVER</b> directly or indirectly procured (or attempted to procure) or imported prostitutes or persons for the purpose of prostitution?  Yes No  No  Have you <b>EVER</b> received any proceeds or money from prostitution?  Yes No  Do you intend to engage in illegal gambling or any other
28.	Have you <b>EVER</b> 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	39.	form of commercialized vice, such as prostitution, bootlegging, or the sale of child pornography, while in the United States?  Yes No  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 <b>EVER</b> been a defendant or the accused in a criminal proceeding (including pre-trial diversion, deferred prosecution, deferred adjudication, or any withheld adjudication)?	40.	Have you <b>EVER</b> , while serving as a foreign government official, been responsible for or directly carried out violations of religious freedoms? Yes No
30.	Have you <b>EVER</b> 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 <b>EVER</b> induced by force, fraud, or coercion (or otherwise been involved in) the trafficking of persons for commercial sex acts?  Yes No
31.	Yes No  Have you <b>EVER</b> 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 <b>EVER</b> 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 <b>EVER</b> illicitly (illegally) trafficked or benefited from the trafficking of any controlled substances, such as chemicals, illegal drugs, or narcotics? Yes No	43.	Have you <b>EVER</b> 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 <b>EVER</b> 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 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	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 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

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Part 8. General Eligibility and Inadmissibility Grounds (continued)	<b>48.e.</b> 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 <b>Item Number 48.a.</b> ? Yes No
Security and Related	
Do you intend to:	<b>49.</b> Have you <b>EVER</b> received any type of military, paramilitary, or weapons training? Yes No
<b>46.a.</b> Engage in any activity that violates or evades any law relating to espionage (including spying) or sabotage in the United States?  Yes No	50. Do you intend to engage in any of the activities listed in any part of Item Numbers 48.a 49.? Yes No
<ul><li>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?</li><li>Yes No</li></ul>	<b>NOTE:</b> If you answered "Yes" to any part of <b>Item Numbers 46.a.</b> - <b>50.</b> , explain what you did, including the dates and location of the circumstances, or what you intend to do in the space provided in <b>Part 14. Additional Information</b> .
<b>46.c.</b> 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	<b>51.a.</b> Committed, threatened to commit, attempted to commit, conspired to commit, incited, endorsed, advocated, planned, or prepared any of the following: hijacking,
<b>46.d.</b> Engage in any activity that could endanger the welfare, safety, or security of the United States?	sabotage, kidnapping, political assassination, or use of a weapon or explosive to harm another individual or cause substantial damage to property?   Yes No
Yes No  46.e. Engage in any other unlawful activity? Yes No	<b>51.b.</b> Participated in, or been a member or a representative of a group or organization that did any of the activities described in <b>Item Number 51.a.</b> ? 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	<b>51.c.</b> Recruited members, or asked for money or things of value, for a group or organization that did any of the activities described in <b>Item Number 51.a.</b> ? Yes No
Have you EVER:	<b>51.d.</b> Provided money, a thing of value, services or labor, or
<b>48.a.</b> 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 <b>Item Number 51.a.</b> ? 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	<ul><li>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</li></ul>
<b>48.b.</b> Participated in, or been a member of, a group or organization that did any of the activities described in <b>Item Number 48.a.</b> ?  Yes No	<b>51.f.</b> Received any type of military, paramilitary, or weapons training from a group or organization that did any of the activities described in <b>Item Number 51.a.</b> ?
<ul> <li>48.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 48.a.? Yes No</li> <li>48.d. Provided money, a thing of value, services or labor, or any other activities.</li> </ul>	NOTE: If you answered "Yes" to any part of <b>Item Number</b> 51., explain the relationship and what occurred, including the dates and location of the circumstances, in the space provided in <b>Part 14. Additional Information.</b>
any other assistance or support for any of the activities described in <b>Item Number 48.a.</b> ? Yes No	<b>52.</b> Have you <b>EVER</b> assisted or participated in selling, providing, or transporting weapons to any person who, to your knowledge, used them against another person?

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Yes No

			A-ivuilibei > A-					
	t 8. General Eligibility and Inadmissibility ounds (continued)	60.	Have you <b>EVER</b> 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 <b>EVER</b> worked, volunteered, or otherwise served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?  Yes No	<b>52.</b> - 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 <b>EVER</b> been a member of, assisted, or participated in any group, unit, or organization of any		Public Charge					
	kind in which you or other persons used any type of weapon against any person or threatened to do so?  Yes No	61.	Are you subject to the public charge ground of inadmissibility under INA section 212(a)(4)?					
55.	Have you <b>EVER</b> served in, been a member of, assisted, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerilla group, militia, insurgent organization, or any other armed group?  Yes No	Num Num to co	Yes No u answered "Yes" to Item Number 61., complete Item thers 62 68.d. below. If you answered "No" to Item ther 61., go to Item Number 69.a. If you need extra space mplete this section, use the space provided in Part 14. itional Information.					
56.	Have you <b>EVER</b> been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party (in the United States or abroad)?	62.	What is the size of your household?					
	Yes No	63.	Indicate your annual household income.					
57.	During the period from March 23, 1933 to May 8, 1945, did you ever order, incite, assist, or otherwise participate in the persecution of any person because of race, religion, national origin, or political opinion, in association with either the Nazi government of Germany or any organization or government associated or allied with the Nazi government of Germany?  Yes No		\$0-27,000 \$27,001-52,000 \$52,001-85,000 \$85,001-141,000 Over \$141,000					
	you <b>EVER</b> ordered, incited, called for, committed, assisted, and with, or otherwise participated in any of the following:	64.	Identify the total value of your household assets.  \$\sumset\$ \$\\$\\$0-18,400\$					
58.a.	Acts involving torture or genocide?		\$18,401-136,000					
58.b.	Killing any person?		\$136,001-321,400					
	Intentionally and severely injuring any person?  Yes No		\$321,401-707,100 Over \$707,100					
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							
58.e.	Limiting or denying any person's ability to exercise religious beliefs?							
59.	Have you <b>EVER</b> recruited, enlisted, conscripted, or used any person under 15 years of age to serve in or help an							

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Yes No

armed force or group?

					TT TVWIIIO			
ar	t 8. General Eligibility and Ina	dmissib	oility Ground	ds (cont	inued)			
j.	Identify the total value of your househo	ld liabilit	ies (including b	ooth secur	ed and unsecu	red liabili	ties).	
	•	01-57,700	` _	\$57,701-186,800  Over \$186,800				
		Ź		•		_		
<b>.</b>	What is the highest degree or level of s	-	_					
				•	•	_	ernative credential	
	1 or more years of college credit, n	_		Associate'	_	_	or's degree	
	Master's degree Profes	sional de	gree (JD, MD, 1	DMD, etc	.)	Doctora	ate degree	
<b>'</b> .	List your certifications, licenses, skills	obtained	through work e	xperience	, and educatio	nal certific	cates.	
3.a.	Have you ever received Supplemental S (TANF), or State, Tribal, territorial, or General Assistance" in the State conte	local, cas	h benefit progra	ams for in	come mainter			
8.b.	Have you ever received long-term instit	tutionaliz	ation at govern	ment expe	ense?		Yes No	
3.c.	If your answer to <b>Item Number 68.a.</b> is receipt, and the dollar amount of benefi			benefit(s)	you received	, the start a	and end dates of each period of	
	Benefit Received		Start Da	ate	End Da	ate	Dollar Amount	
1, (	If we want to Id Now have CO. 1.	a 44 <b>3</b> 7 22	Link 41. n. a	:41	ata Can 1. *		he start and and determine the	
.a.	If your answer to <b>Item Number 68.b.</b> i period of institutionalization, and the re				ate for each in	istitution, t	he start and end dates of each	
	Institution Name/City/State		ite From	1	ate To		Reason	

		A-Number ► A-	
	et 8. General Eligibility and Inadmissibility bunds (continued)	Since April 1, 1997, have you been United States:	unlawfully present in the
	gal Entries and Other Immigration Violations	<b>78.a.</b> For more than 180 days but led departed the United States?	ess than a year, and then  Yes No
69.a.	Have you <b>EVER</b> failed or refused to attend or to remain in attendance at any removal proceeding filed against you	<b>78.b.</b> For one year or more and the	n departed the United States?  Yes No
69.b	on or after April 1, 1997?	<b>NOTE:</b> You were unlawfully pres you entered the United States with admitted or inspected and paroled, United States but you stayed longer	out being inspected and or if you legally entered the
69.c.	If your answer to <b>Item Number 69.b.</b> is "Yes," attach a written statement explaining why you had reasonable cause.	Since April 1, 1997, have you <b>EVE</b> reenter the United States without be or paroled after:	
70.	Have you <b>EVER</b> 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?   Yes  No	<ul><li>79.a. Having been unlawfully pres more than one year in the agg</li><li>79.b. Having been deported, excluding the control of the cont</li></ul>	gregate? Yes No
71.	Have you <b>EVER</b> lied about, concealed, or misrepresented any information on an application or petition to obtain a visa, other documentation required for entry into the United States, admission to the United States, or any other kind of immigration benefit?  Yes No	United States?  Miscellaneous Conduct  80. Do you plan to practice polys	Yes No
72.	Have you <b>EVER</b> falsely claimed to be a U.S. citizen (in writing or any other way)?  Yes No	81. Are you accompanying anoth requires your protection or guinadmissible after being certi	uardianship but who is
73.	Have you <b>EVER</b> been a stowaway on a vessel or aircraft arriving in the United States? Yes No	being helpless from sickness, disability, or infancy, as desc	, physical or mental
74.	Have you <b>EVER</b> knowingly encouraged, induced, assisted, abetted, or aided any foreign national to enter or to try to enter the United States illegally (alien smuggling)?  Yes No	82. Have you EVER assisted in a withholding custody of a U.S. United States from a U.S. cit.	S. citizen child outside the
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
Ren	Yes No noval, Unlawful Presence, or Illegal Reentry	83. Have you EVER voted in vio or local constitutional provisi regulation in the United State	ion, statute, ordinance, or
Afte	er Previous Immigration Violations	84. Have you EVER renounced	U.S. citizenship to avoid
76.	Have you <b>EVER</b> been excluded, deported, or removed from the United States or have you ever departed the	being taxed by the United Sta	
	United States on your own after having been ordered excluded, deported, or removed from the United States?	Have you <b>EVER</b> :	
77	Yes No	<b>85.a.</b> Applied for exemption or dis service in the U.S. armed for Security Training Corps on the Security Training Corps on	ces or in the U.S. National

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☐ Yes ☐ No

foreign national?

Yes No

Have you EVER entered the United States without being

inspected and admitted or paroled?

	et 8. General Eligibility and Inadmissibility bunds (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.)
	Been convicted of desertion from the U.S. armed forces?  Yes No  Have you <b>EVER</b> 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
86.b.	armed forces in time of war or a period declared by the President to be a national emergency? Yes No  If your answer to <b>Item Number 86.a.</b> is "Yes," what was	<b>NOTE:</b> Read the <b>Penalties</b> 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)?	<b>NOTE:</b> Select the box for either <b>Item Number 1.a.</b> or <b>1.b.</b> If applicable, select the box for <b>Item Number 2.</b>
Dis NOT	rt 9. Accommodations for Individuals With abilities and/or Impairments  TE: Read the information in the Form I-485 Instructions re completing this part.	<ul> <li>1.a.</li></ul>
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.
2.a.	If you answered "Yes" to <b>Item Number 1.</b> , select any applicable box in <b>Item Numbers 2.a 2.c.</b> and provide an answer.  I am deaf or hard of hearing and request the following accommodation. (If you are requesting a	2. At my request, the preparer named in Part 12.,  prepared this application for me based only upon information I provided or authorized.
	sign-language interpreter, indicate for which	Applicant's Contact Information
	language (for example, American Sign Language).):	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)
6.	Interpreter's Email Address (if any)

Part 11. Interpreter's Contact Information Certification, and Signature (continued)  Interpreter's Certification I certify, under penalty of perjury, that: I am fluent in English and which is the same language specified in Part 10., Item Number 1.b., and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.  Interpreter's Signature 7.a. Interpreter's Signature (sign in ink)  Preparer's Signature (mm/dd/yyyy)  Part 12. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant  Provide the following information about the preparer.  Preparer's Full Name  Preparer's Full Name  Preparer's Mailing Address  3.a. Street Number and Name  3.b.		
Interpreter's Certification  I certify, under penalty of perjury, that:  I am fluent in English and which is the same language specified in Part 10., Item Number 1.b., and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.  Interpreter's Signature  7.a. Interpreter's Signature (sign in ink)  Preparer's Contact Information  4. Preparer's Contact Information  4. Preparer's Daytime Telephone Number  5. Preparer's Mobile Telephone Number (if any)  Preparer's Email Address (if any)  Preparer's Statement  7.a.		
3.c. City or Town  3.d. State  3.e. ZIP Code  3.f. Province  3.g. Postal Code  3.h. Country  1.h. and have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.  Interpreter's Signature  7.a. Interpreter's Signature (sign in ink)  Preparer's Contact Information  4. Preparer's Daytime Telephone Number  5. Preparer's Mobile Telephone Number (if any)  6. Preparer's Email Address (if any)  Preparer's Statement  7.a. I am not an attorney or accredited represen		
I am fluent in English and which is the same language specified in Part 10., Item Number 1.b., and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.  Interpreter's Signature  7.a. Interpreter's Signature (sign in ink)  Part 12. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant  Provide the following information about the preparer.  I am not an attorney or accredited represen		
I am fluent in English and which is the same language specified in Part 10., Item Number 1.b., and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.  Interpreter's Signature  7.a. Interpreter's Signature (sign in ink)  Part 12. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant  Provide the following information about the preparer.  3.d. State 3.e. ZIP Code 3.f. Province 3.g. Postal Code 3.h. Country  7.a. Declaration and Country  3.d. State 3.e. ZIP Code 4.f. Province 3.g. Province 4.f. Province 5.f. Province 5.f. Province 6.f. Preparer's Contact Information 6.f. Preparer's Mobile Telephone Number (if any)  Preparer's Email Address (if any)  Preparer's Statement 7.a. I am not an attorney or accredited represen		
3.f. Province answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.  Interpreter's Signature 7.a. Interpreter's Signature (sign in ink)  Preparer's Contact Information  1. Preparer's Daytime Telephone Number  1. Preparer's Mobile Telephone Number  1. Preparer's Email Address (if any)  Preparer's Statement  1. Preparer's Statement  1. I am not an attorney or accredited represen		ode
3.g. Postal Code 3.h. Country  **Transport of the Preparer's Signature (sign in ink)  **Preparer's Contact Information  **Preparer's Mobile Telephone Number (if any)  **Preparer's Email Address (if any)  **Preparer's Statement  **Preparer's State		
Interpreter's Signature 7.a. Interpreter's Signature (sign in ink)  Preparer's Contact Information  4. Preparer's Daytime Telephone Number  5. Preparer's Mobile Telephone Number (if any)  Part 12. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant  Provide the following information about the preparer.  7.a. I am not an attorney or accredited represen		
Interpreter's Signature  7.a. Interpreter's Signature (sign in ink)  7.b. Date of Signature (mm/dd/yyyy)  Part 12. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant  Provide the following information about the preparer.  Preparer's Contact Information  4. Preparer's Mobile Telephone Number (if any)  6. Preparer's Email Address (if any)  Preparer's Statement  7.a.  I am not an attorney or accredited represent		
7.a. Interpreter's Signature (sign in ink)  4. Preparer's Daytime Telephone Number  7.b. Date of Signature (mm/dd/yyyy)  5. Preparer's Mobile Telephone Number (if any)  Freparer's Email Address (if any)  Provide the following information about the preparer.  Provide the following information about the preparer.  7.a. I am not an attorney or accredited representation.		
7.b. Date of Signature (mm/dd/yyyy)  Part 12. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant  Provide the following information about the preparer.  4. Preparer's Daytime Telephone Number  5. Preparer's Mobile Telephone Number (if any)  6. Preparer's Email Address (if any)  Provide the following information about the preparer.  7.a. I am not an attorney or accredited represent		,•
7.b. Date of Signature (mm/dd/yyyy)  5. Preparer's Mobile Telephone Number (if any)  6. Preparer's Email Address (if any)  Provide the following information about the preparer.  Provide the following information about the preparer.  7.a. I am not an attorney or accredited representation.		non
Provide the following information about the preparer.  5. Preparer's Mobile Telephone Number (if any)  6. Preparer's Email Address (if any)  Provide the following information about the preparer.  7.a. I am not an attorney or accredited represent		e Number
Signature of the Person Preparing this Application, if Other Than the Applicant  Provide the following information about the preparer.  Provide the following information about the preparer.  7.a. I am not an attorney or accredited represent		Number (if any)
7.a.   I am not an attorney or accredited represen		any)
the applicant and with the applicant's conse	fof	oplication on behalf of
1.a. Preparer's Family Name (Last Name)       7.b. I am an attorney or accredited representative my representation of the applicant in this can be seen that what the applicant in this can be seen that what the applicant is the applicant of the applicant in this can be seen that what the applicant is the applicant of the applicant in this can be seen that what the applicant is the applicant of the applicant in this can be seen that what the applicant is the applicant of the applicant of the applicant in this can be seen that what the applicant is the applicant of the applicant of the applicant in this can be seen that what the applicant is the applicant of the applicant in this can be seen that what the applicant is the applicant of the applicant in this can be seen that what the applicant is the applicant of the applicant in this can be seen that what the applicant is the applicant of the applicant in this can be seen that what the applicant is the applicant of the applicant in this can be seen that what the applicant is the applicant in this can be seen that what the applicant is the applicant in the applicant is the applicant in this can be seen that what the applicant is the applicant in the applicant is the applicant		applicant in this case extend beyond the
preparation of this application.  NOTE: If you are an attorney or accredite representative, you may be obliged to subm completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.		torney or accredited be obliged to submit a Notice of Entry of or Accredited

A-Number	<b></b>	<b>A-</b>					
A-Number		<b>A-</b>					

## 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.

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, <b>numbered</b>					
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 <b>Page Number</b> , <b>Part Number</b> , and <b>Item Number</b> to which your answer refers; and sign and date each sheet.		5.d.					
1.a.	Family Name (Last Name)						
1.b.	Given Name (First Name)						
1.c.	Middle Name KHANH	6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
2.	A-Number (if any) ► A-	( )					
3.a.	Page Number 3.b. Part Number 3.c. Item Number	6.d.					
3.d.							
4.a. 4.d.	Page Number 4.b. Part Number 4.c. Item Number	7.a. 7.d.	Page Number	7.b.	Part Number	7.c.	Item Number

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