July 29, 2025

USCIS

Attn: NFB P.O. Box 4115

Carol Stream, IL 60197-4115

#### RE: I-485 Application to Register Permanent Residence or Adjust Status

Applicant: Kirill Nikitin
USCIS Receipt Number: ...
Alien Registration Number: ...

#### Dear USCIS Officer:

This application is submitted for the adjustment to the permanent resident status of Dr. Kirill Nikitin under the Section 245 of the Immigration and Nationality Act (INA). He is the beneficiary and the petitioner of an approved I-140 petition under the INA Section 203(b)(1)(A) as an alien of extraordinary ability with the priority date of April 4, 2025. According to the Visa Bulletin for April 2025 issued by the U.S. Department of State Bureau of Consular Affair, the immigrant visa numbers for the Priority Workers (INA Section 203(b)(1)) are immediately available.

Dr. Nikitin is currently present in the United States under the J-1 Research Scholar visa status and he works as a Postdoctoral Research Associate at the New York Genome Center. Kindly find enclosed the following documents in support of this application:

- p. 3 Form G-1450, Authorization for Credit Card Payment for the \$1,440 filing fee
- p. 4 Form G-1145 e-Notification of Application/Petition Acceptance
- p. 5 Form I-797, Approval Notice for I-140 Immigrant Petition for Alien Worker (copy)
- p. 5 Completed and signed Form I-485, Immigrant Petition for Alien Worker
- p. 29 Beneficiary's passport biographic page (copy)
- p. 29 Beneficiary's birth certificate (copy), its translation into English, and the certificate of the accuracy of the translation
- p. 29 Form I-94, Arrival/Departure Record (copy), and travel history
- p. 29 Two issued J-1 visas and corresponding Forms DS-2019 (copies)
- p. 29 A signed statement confirming that I intend to work in the occupational field specified in my approved Form I-140
- p. 30 Two (2) passport-style photos of the beneficiary (in an envelope)
- p. 30 Form I-693, Report of Immigration Medical Exam and Vaccination Record (sealed)

Considering the documentation presented in this application, I kindly ask you to adjust the status of Dr. Kirill Nikitin to the Lawful Permanent Resident. For any further information, please contact me at the following address.

Yours faithfully,

Dr. Kirill Nikitin

. . .

Tel: ...

E-mail: . . .



#### **Authorization for Credit Card Transactions**

USCIS Form G-1450

# **Department of Homeland Security**

U.S. Citizenship and Immigration Services

#### How To Fill Out Form G-1450

- Type or print legibly in black ink.
- Complete the "Applicant's/Petitioner's/Requester's Information," "Credit Card Billing Information," and "Credit Card **Information**" sections and sign the authorization. **NOTE:** The credit card must be issued by a U.S. bank.
- Place your Form G-1450 ON TOP of your application, petition, or request package.

NOTE: Failure to provide the requested information may result in USCIS and your financial institution not accepting the payment. USCIS cannot process credit card payments without an authorized signature.

**NOTE:** Please see the USCIS Form G-1450 website for additional information.

We recommend that you print or save a copy of your completed Form G-1450 to review in the future and for your records.

By completing this transaction, you agree that you have paid for a government service and that the filing fee, biometric services fee and all related financial transactions are final and not refundable, regardless of any action USCIS takes on an application, petition, or request. You must submit all fees in the exact amounts. USCIS will charge your credit card up to the amount you authorize below.

Please refer to the form(s) you are filing for additional information, or you may call the USCIS Customer Contact number at 1-800-375-5283. For TTY (deaf or hard of hearing) call: 1-800-767-1833.

Applicant's/Petitioner's/Requester's Information (Full Legal Name)						
Given Name (First Name)	Middle Nan	ne (if any) Family		Name (Last Name)		
Credit Card Billing Information (Credit Card Holder's Name as it Appears on the Card)						
Given Name (First Name)	ne (if any)		Family Name (Last Name)			
Credit Card Holder's Billing Address:						
Street Number and Name				Apt. Ste. Flr.	Number	
City or Town			State	ZIP Code		
Credit Card Holder's Signature and Con	ntact Inform	ation:				
Credit Card Holder's Signature						
Credit Card Holder's Daytime Telephone N	lumber	Credit Ca	rd Holder's Em	ail Addre	ess	
Credit Card Information						
Credit Card Number	Credit Ca	rd Type:	Гуре: Uisa		Authorized Payment Amount	
			MasterCa	rd	\$ 144	10.00
Credit Card Expiration Date			American	Express		
(mm/yyyy)			Discover			



# e-Notification of Application/Petition Acceptance

#### **Department of Homeland Security**

U.S. Citizenship and Immigration Services

USCIS Form G-1145

#### What Is the Purpose of This Form?

Use this form to request an electronic notification (e-Notification) when U.S. Citizenship and Immigration Services accepts your immigration application. This service is available for applications filed at a USCIS Lockbox facility.

#### **General Information**

Complete the information below and clip this form to the first page of your application package. You will receive one e-mail and/or text message for each form you are filing.

We will send the e-Notification within 24 hours after we accept your application. Domestic customers will receive an e-mail and/or text message; overseas customers will only receive an e-mail. Undeliverable e-Notifications cannot be resent.

The e-mail or text message will display your receipt number and tell you how to get updated case status information. It will not include any personal information. The e-Notification does not grant any type of status or benefit; rather it is provided as a convenience to customers.

USCIS will also mail you a receipt notice (I-797C), which you will receive within 10 days after your application has been accepted; use this notice as proof of your pending application or petition.

### **USCIS Privacy Act Statement**

**AUTHORITIES:** The information requested on this form is collected pursuant to section 103(a) of the Immigration and Nationality Act, as amended INA section 101, et seq.

**PURPOSE:** The primary purpose for providing the information on this form is to request an electronic notification when USCIS accepts immigration form. The information you provide will be used to send you a text and/or email message.

**DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information may prevent USCIS from providing you a text and/or email message receipting your immigration form.

ROUTINE USES: The information provided on this form will be used by and disclosed to DHS personnel and contractors in accordance with approved routine uses, as described in the associated published system of records notices [DHS/USCIS-007 - Benefits Information System and DHS/USCIS-001 - Alien File (A-File) and Central Index System (CIS), which can be found at <a href="https://www.dhs.gov/privacy">www.dhs.gov/privacy</a>]. The information may also be made available, as appropriate for law enforcement purposes or in the interest of national security.

Complete this form and clip it on top of the first page of your immigration form(s).						
Applicant/Petitioner Full Last Name [lastname]	Applicant/Petitioner Full First [firstname]	Name	Applicant/Petitioner Full Middle Name			
Email Address [email]		Mobile Phon [phone]	ne Number (Text Message)			



# **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 10/31/2027

	For USCIS Use Only							
Preference Category:			Receipt		Action Block			
Country Chargeable:								
Priority Date:								
Date Form I-693 Signed By Civ	il Surgeon:							
☐ Applicant ☐ Intervie				Section of Law				
Interviewed Waived		☐ INA 209(	(a)	☐ INA 245(m)				
Date of		☐ INA 209(	(b)	☐ INA 249				
Initial Interview:		☐ INA 245(	(a)	☐ Sec. 13, Act of 9/11/57				
Lawful Permanent		☐ INA 245(	(i)	☐ Cuban Adjustment Act				
Resident as of:		☐ INA 245(	j)	☐ Other				
	To be co	mnleted by	an A	Attorney or Accredited Repres	sentative (if any)			
	10 50 00	inpicted by	411 1	T	The second of th			
Select this box if Form G-28 is attached.		mber	_	Attorney State Bar Number (if applicable)	Attorney or Accredited Representative USCIS Online Account Number (if any)			
attaciicu.								
► START HERE - Typ	START HERE - Type or print in black ink.  A-Number ► A- [ n u m b e r ]							

**NOTE TO ALL APPLICANTS:** If you do not completely fill out this application or fail to submit required documents listed in the Instructions, U.S. Citizenship and Immigration Services (USCIS) may reject or deny your application.

For all sections of this application, if you need to provide any additional information or are instructed to provide an explanation, use the space provided in **Part 14. Additional Information**.

•	Your Current Legal Name (Do not provide	a nickname)	
	Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
	Nikitin	Kirill	
	Other Names You Have Used Since Birth	(if applicable)	
	Provide all other names you have ever used assumed names.	d, including your family name at birth	n, other legal names, nicknames, aliases, and
	Family Name (Last Name)	Given Name (First Name)	Middle Name (if applicable)
·.	Date of Birth (mm/dd/yyyy) [date]		
	Have you ever used any other date of birth	?	☐ Yes ⊠ No
	If you answered "Yes," provide all other dates of birth (mm/dd/yyyy).		

Par	t 1. Information About You (Person applying for lawful permanent residence) (continued)
١.	Do you have an Alien Registration Number (A-Number)?
	If you answered "Yes," provide your A-Number.
	A-Number (if any) $\blacktriangleright$ A- $\begin{bmatrix} n & u & m & b & e & r \end{bmatrix}$
5.	Have you ever used, or been assigned, any other A-Number?
	If you answered "Yes," provide the A-Numbers.
ó.	Sex Male Female
<b>7.</b>	Place of Birth
	City or Town of Birth Country of Birth
	[city]
3.	Country of Citizenship or Nationality
).	USCIS Online Account Number (if any)
	N / A
	If one has been assigned, you can find it on a notice that USCIS may have sent to you.
0.	Recent Immigration History
	If you last entered the United States using a passport or travel document, provide the following information.
	Passport or Travel Document Number Used at Last Arrival [passport]
	Expiration Date of this Passport or Travel Document (mm/dd/yyyy)
	Country that Issued this Passport or Travel Document
	Nonimmigrant Visa Number Used During Most Recent Arrival (if any)
	Date Nonimmigrant Visa Was Issued (mm/dd/yyyy)
	Place and Date of Last Arrival into the United States
	City or Town State Date of Last Arrival (mm/dd/yyyy)
1.	When I last arrived in the United States:
	✓ I was inspected at a Port of Entry and admitted as (for example, exchange visitor, visitor, temporary worker, student):
	Exchange visitor
	I was inspected at a Port of Entry and paroled as (for example, humanitarian parole, Cuban parole):
	☐ I came into the United States without admission or parole.
	Other:

1	rt 1. Information About You (Person applying for lawful permanent residence	c) (continuct	•)					
•	If you were issued a Form I-94 Arrival/Departure Record, provide the information from your most recent For							
	Family Name (Last Name) Given Name (First Name)							
	Nikitin Kirill							
	Form I-94 Arrival/Departure Record Number							
	Expiration Date of Authorized Stay Shown on Form I-94 (mm/dd/yyyy) or Type or Print "D/S" for Duration of Status							
	Immigration Status on Form I-94 (for example, class of admission, or paroled, if paroled)							
	Was your last arrival the first time you were physically present in the United States?		☐ Yes ⊠ No					
•	What is your current immigration status (if it has changed since your last arrival)?							
•	Expiration Date of Current Immigration Status (mm/dd/yyyy) or Type or Print "D/S" for Duration of Status							
•	Have you ever been issued an "alien crewman" visa?		Yes X No					
•	Did you last arrive in the United States to join a vessel as a seaman or crewman, or while ser capacity aboard a vessel or aircraft?	☐ Yes ⊠ N						
	Addresses							
•	Addresses							
•	Addresses Current U.S. Physical Address							
•		1						
•	Current U.S. Physical Address							
•	Current U.S. Physical Address	Apt. Ste. Flr.	Number					
•	Current U.S. Physical Address In Care Of Name (if any)	Apt. Ste. Flr.	Number					
•	Current U.S. Physical Address In Care Of Name (if any)	Apt. Ste. Flr.  State	Number  ZIP Code					
	Current U.S. Physical Address In Care Of Name (if any)  Street Number and Name							
•	Current U.S. Physical Address In Care Of Name (if any)  Street Number and Name							
•	Current U.S. Physical Address In Care Of Name (if any)  Street Number and Name  City or Town							
•	Current U.S. Physical Address In Care Of Name (if any)  Street Number and Name  City or Town  Date You First Resided at This Address (mm/dd/yyyy)		ZIP Code					
•	Current U.S. Physical Address In Care Of Name (if any)  Street Number and Name  City or Town  Date You First Resided at This Address (mm/dd/yyyy)  Is this your current mailing address?  If you answered "No," provide your current mailing address.		ZIP Code					
•	Current U.S. Physical Address In Care Of Name (if any)  Street Number and Name  City or Town  Date You First Resided at This Address (mm/dd/yyyy)  Is this your current mailing address?  If you answered "No," provide your current mailing address.  Current Mailing Address (Safe or Alternate Mailing Address, if applicable)		ZIP Code					
-	Current U.S. Physical Address In Care Of Name (if any)  Street Number and Name  City or Town  Date You First Resided at This Address (mm/dd/yyyy)  Is this your current mailing address?  If you answered "No," provide your current mailing address.		ZIP Code					
-	Current U.S. Physical Address In Care Of Name (if any)  Street Number and Name  City or Town  Date You First Resided at This Address (mm/dd/yyyy)  Is this your current mailing address?  If you answered "No," provide your current mailing address.  Current Mailing Address (Safe or Alternate Mailing Address, if applicable)		ZIP Code  X Yes No					
-	Current U.S. Physical Address In Care Of Name (if any)  Street Number and Name  City or Town  Date You First Resided at This Address (mm/dd/yyyy)  Is this your current mailing address?  If you answered "No," provide your current mailing address.  Current Mailing Address (Safe or Alternate Mailing Address, if applicable) In Care Of Name (if any)	State	ZIP Code  X Yes No					

		A-Number ► A	A-
art 1. Information About You	(Person applying for lawful permane	ent residence)	(continued)
Have you resided at your current ac	Idress for at least 5 years?		☐ Yes × N
•	r prior address(es) for the last 5 years. Use	the space provide	ed in <b>Part 14. Additional</b>
Information, if necessary.  Prior Address			
In Care Of Name (if any)			
in care of raine (if any)			
Street Number and Name			Apt. Ste. Flr. Number
City or Town			State ZIP Code
Province	Postal Code	Country	
Dates of Residence			
From (mm/dd/yyyy)	To (mm/dd/yyyy)		
Provide your most recent physical a listed above).  Street Number and Name	address outside the United States where you	a lived for more t	han one year (if not already  Apt. Ste. Flr. Number
City or Town			State ZIP Code
Province	Postal Code	Country	
Dates of Residence			
From (mm/dd/yyyy)	To (mm/dd/yyyy)		
Social Security Card			
Has the Social Security Administra	tion (SSA) ever officially issued a Social S	ecurity card to yo	ou? X Yes N
If you answered "Yes," provide you	rr U.S. Social Security Number (SSN). ▶		
Do you want the SSA to issue you	a Social Security card?		× Yes N
•	so answer "Yes" to the Consent for Disclo		
	e disclosure of information from this applicate me an SSN and issuing me a Social Security security of the sec		as X Yes N

	A-Number ► A-
Par	t 2. Application Type or Filing Category
1.	Are you filing for adjustment of status with the Executive Office for Immigration Review (EOIR) while Yes X No in removal, exclusion, rescission, or deportation proceedings?
2.	Receipt Number of Underlying Petition (if any)  Priority Date from Underlying Petition (if any)  [number]  (mm/dd/yyyy)  [date]
	I am filing this Form I-485 as a (select <b>only one</b> box):
	X  Principal Applicant
	Derivative Applicant (Provide the following information about the principal applicant.)
	Principal Applicant's Name
	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
	Principal Applicant's A-Number (if any)  Principal Applicant's Date of Birth
	► A- (mm/dd/yyyy)
3 a	applicant, select the appropriate box based on the category under which the principal applicant is applying or has applied. See the Form I-485 Instructions for more information, including any <b>Additional Instructions</b> that relate to the immigrant category you select.):  Family based
3.a.	Family-based
	Immediate relative of a U.S. citizen, Form I-130, I-129F, or I-360 (select your specific category below):
	Spouse of a U.S. Citizen.
	Unmarried child under 21 years of age of a U.S. citizen.
	Parent of a U.S. citizen (if the citizen is at least 21 years of age).
	Person admitted to the United States as a fiancé(e) or child of a fiancé(e) of a U.S. citizen (K-1/K-2 Nonimmigrant).
	Widow or widower of a U.S. citizen.
	Spouse, child, or parent of a deceased U.S. active-duty service member in the armed forces under the National Defense Authorization Act (NDAA).
	Other relative of a U.S. citizen under the family-based preference categories, Form I-130 (select your specific category below):
	Unmarried son or daughter of a U.S. citizen and I am 21 years of age or older.
	Married son or daughter of a U.S. citizen.
	Brother or sister of a U.S. citizen (if the citizen is at least 21 years of age).
	Relative of a lawful permanent resident under the family-based preference categories, Form I-130 (select your specific category below):
	Spouse of a lawful permanent resident.
	Unmarried child under 21 years of age of a lawful permanent resident.
	Unmarried son or daughter of a lawful permanent resident and I am 21 years of age or older.
	VAWA self-petitioner (victim of battery or extreme cruelty), Form I-360 (select your specific category below):
	VAWA self-petitioning spouse of a U.S. citizen or lawful permanent resident.
	☐ VAWA self-petitioning child of a U.S. citizen or lawful permanent resident.
	VAWA self-petitioning parent of a U.S. citizen (if the citizen is at least 21 years of age).

	A-Number ► A-
Par	t 2. Application Type or Filing Category (continued)
3.b.	Employment-based
	Alien Investor, Form I-526 or Form I-526E
	Alien Workers, Form I-140 (select your category below and answer the following questions below, as applicable):
	Outstanding Professor or Researcher
	Multinational Executive or Manager
	Member of the Professions Holding an Advanced Degree or Alien of Exceptional Ability (who is NOT seeking a National Interest Waiver)
	A Professional (at a minimum, requiring a bachelor's degree or a foreign degree equivalent to a U.S. bachelor's degree)
	A Skilled Worker (requiring at least 2 years of specialized training or experience)
	Any Other Worker (requiring less than 2 years of training or experience)
	An Alien Applying For a National Interest Waiver (who IS a member of the professions holding an advanced degree or an alien of exceptional ability)
	Did a relative file the associated Form I-140 for you (or for the principal applicant if you are a derivative applicant) or does a relative have a significant ownership interest (5 percent or more) in the business that filed Form I-140 for you (or for the principal applicant, if you are a derivative applicant)?
	N/A (I am adjusting on the basis of a Form I-140 self-petition)
	□ No
	Yes Yes
	If you answered "Yes," is this relative your (select <b>only one</b> box):
	☐ Father ☐ Mother ☐ Child ☐ Adult Son ☐ Adult Daughter ☐ Brother ☐ Sister
	None of These
	Is the relative above a:
	U.S. Citizen U.S. National Lawful Permanent Resident None of These
3.c.	Special Immigrant
	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
	Certain U.S. Armed Forces Members (also known as the Six and Six program), Form I-360
	Panama Canal Zone Employees, Form I-360
	Certain Physicians, Form I-360
	Certain Employee or Former Employee of the U.S. Government Abroad, DS-1884
	Religious Worker, Form I-360 (select your specific category below):
	Minister of Religion

Other Religious Worker

	A-Number ► A-
Par	rt 2. Application Type or Filing Category (continued)
3.d.	Asylee or Refugee
	Asylum Status (Immigration and Nationality Act (INA) section 208), Form I-589 or Form I-730
	If you selected asylum, date you were granted asylum (mm/dd/yyyy).
	Refugee Status (INA section 207), Form I-590 or Form I-730
	If you selected refugee, date of initial admission as refugee (mm/dd/yyyy).
3.e.	Human Trafficking Victim or Crime Victim
	Human Trafficking Victim (T Nonimmigrant), Form I-914 or Derivative Family Member, Form I-914A
	☐ Victim of Qualifying Criminal Activity (U Nonimmigrant), Form I-918, Derivative Family Member, Form I-918A, or Qualifying Family Member, Form I-929
3.f.	Special Programs Based on Certain Public Laws
	☐ The Cuban Adjustment Act
	A Victim of Battery or Extreme Cruelty as a Spouse or Child Under the Cuban Adjustment Act
	Applicant Adjusting Based on Dependent Status Under the Haitian Refugee Immigrant Fairness Act
	A Victim of Battery or Extreme Cruelty as a Spouse or Child Applying Based on Dependent Status Under the Haitian Refugee Immigrant Fairness Act
	Lautenberg Parolees
	Diplomats or High-Ranking Officials Unable to Return Home (Section 13 of the Act of September 11, 1957)
	Nationals of Vietnam, Cambodia, and Laos Applying for Adjustment of Status Under section 586 of Public Law 106-429
	Applicant Adjusting Under the Amerasian Act (October 22, 1982), Form I-360
3.g.	Additional Options
	☐ Diversity Visa program
	If you selected Diversity Visa program, provide your Diversity Visa Rank Number:
	Continuous Residence in the United States Since Before January 1, 1972 ("Registry")
	☐ Individual Born in the United States Under Diplomatic Status
	S Nonimmigrants and Qualifying Family Members (can only adjust in this category with an approved Form I-854B filed by a law enforcement officer)
	Other Eligibility
1.	If you selected a family-based, employment-based, special immigrant, or Diversity Visa immigrant   Category listed above in <b>Item Numbers 3.a 3.g.</b> as the basis for your application for adjustment of status, are you applying for adjustment based on INA section 245(i)?
5.	Are you 21 years of age or older and applying for adjustment based on classification as a child, under the provisions of the Child Status Protection Act (CSPA)?
	<b>NOTE:</b> For more information to determine if you are eligible under CSPA, see the <b>Who May File Form I-485</b> section of these Instructions

	Part 3. Request for Exemption for Intending Immigrant's Affidavit of Support Under Section 213A of the INA							
	-	sting an exemption from submitting an Affidavit of Support Under Section 213A of the INA (Form I-864 or Form I-864EZ) elect <b>only one</b> ):						
1.a.	I have earned or can receive credit for 40 qualifying quarters (credits) of work in the United States (as defined by the Social Security Act (SSA)). (Attach your SSA earnings statements. Do not count any quarters during which you received a meanstested public benefit.)							
1.b.	I am under 18 years of age, unmarried, the child of a U.S. citizen, am not likely to become a public charge, and will automatically become a U.S. citizen under INA section 320, upon my admission as a lawful permanent resident.							
1.c.	I am applying under the widow or widower of a U.S. citizen (Form I-360) immigrant category.							
1.d.		I am applying as a VAWA self-petitioner.						
1.e.	$\times$	None of these exemptions apply to me and I am not required by statute to submit an Affidavit of Support Under Section 213A of the INA, nor am I required to request an exemption.						
1.f.		None of these exemptions apply to me and I am not requesting an exemption as I am required to submit an Affidavit of Support Under Section 213A of the INA.						
Par	t 4.	Additional Information About You						
1.		you ever applied for an immigrant visa to obtain permanent resident status at a U.S. Embassy or  Yes  No Consulate abroad?						
	If y	u answered "Yes," complete Item Numbers 2 4. below.						
2.	Loc	tion of U.S. Embassy or U.S. Consulate						
	City	or Town Country						
3.	Dec	sion (for example, approved, refused, denied, withdrawn)						
4.	Dat	of Decision (mm/dd/yyyy)						
5.	Hav	you previously applied for permanent residence while in the United States? Yes X No						
6.	Hav	you <b>EVER</b> held lawful permanent resident status which was later rescinded under INA section 246? Yes X No						
Emp	loyn	ent and Educational History						
7.								
	Em	oyer or School (current or most recent)  Name of Employer, Company, or School						
	[e	ployer]						
	You	Occupation (if unemployed or retired, so state)						

Pai	t 4. Additional Information Abou	ut You (cont	tinued)			
	Address of Employer, Company, or Scho	ool				
	Street Number and Name				Apt. Ste. Flr.	Number
	City or Town				State	ZIP Code
	Province	Postal Code		Country		
Dates of Employment, Unemployment, Retirement, or School Attendance						
	From (mm/dd/yyyy)		To (mm/dd/yyyy)			
	If unemployed or retired, source of finance	cial support:	ı	L		
3.	Provide your most recent employer or so	hool outside of	the United States (if	not already listed a	bove).	
	Name of Employer, Company, or School	<u> </u>	Your Occu	upation (if unemplo	yed or retired, s	so state)
	Address of Employer, Company, or Scho	ool				
	Street Number and Name				Apt. Ste. Flr.	Number
	City or Town				State	ZIP Code
					•	
	Province	Postal Code		Country		
	Dates of Employment, Unemployment, F	Retirement, or S	School Attendance			
	From (mm/dd/yyyy)		To (mm/dd/yyyy)			
	If unemployed or retired, source of finance	cial support:	•			
Pa	rt 5. Information About Your Par	ents				
T4	Communication About Voice Descript					
	formation About Your Parent 1					
l <b>.</b>	Parent 1's Legal Name	C' 37	(Fig. 13)			
	Family Name (Last Name)	Given Nar	me (First Name)	Middl	e Name (if app	licable)
	D 41 37					
2.	Parent 1's Name at Birth (if different than	, i	(E' (N			
	Family Name (Last Name)	Given Nar	me (First Name)	Middl	le Name (if app	licable)
3.	Date of Birth (mm/dd/yyyy)					

	A-Number ► A-
Pai	rt 5. Information About Your Parents (continued)
1.	Country of Birth
Inf	Formation About Your Parent 2
5.	Parent 2's Legal Name  Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
5.	Parent 2's Name at Birth (if different than above)  Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)
7. 3.	Date of Birth (mm/dd/yyyy)  Country of Birth
Pai	rt 6. Information About Your Marital History
1. 2. 3.	What is your current marital status?  Single, Never Married
Inf	formation About Your Current Marriage (including if you are legally separated)
1.	Current Spouse's Legal Name Family Name (Last Name)  Given Name (First Name)  Middle Name (if applicable)  N/A
5.	Current Spouse's A-Number (if any)  ► A-  Current Spouse's Date of Birth  (mm/dd/yyyy)
7.	Current Spouse's Country of Birth
3.	Current Spouse's Current Physical Address  Street Number and Name Apt. Ste. Flr. Number  City or Town  State ZIP Code
	Province Postal Code Country

Pal	rt 6. Information About Your Marital Histor	y (conti	ntinued)					
9.	Place of Marriage to Current Spouse							
	City or Town		State or Province					
	Country							
	Date of Marriage to Current Spouse (mm/dd/yyyy)							
10.	Is your current spouse applying with you?		Yes I					
Inf	formation About Prior Marriages (if any)							
11.	Prior Spouse's Legal Name (provide family name before	e marriaş	iage)					
	Family Name (Last Name) Given Name  N/A	ne (First	st Name) Middle Name (if applicable)					
12.	Prior Spouse's Date of Birth (mm/dd/yyyy)							
13.	Prior Spouse's Country of Birth	1	14. Prior Spouse's Country of Citizenship or Nationality					
15.	Date of Marriage to Prior Spouse's (mm/dd/yyyy)							
16.	Place of Marriage to Prior Spouse							
	City or Town		State or Province					
	Country							
17.	Place Where Marriage with Prior Spouse Legally Ended	 d						
	City or Town		State or Province					
	Country		]					
		/11/						
18.	Date of Marriage with Prior Spouse Legally Ended (mr How Marriage Ended with Prior Spouse (select one):	n/aa/yyy	ууу)					

	A-Number ► A-							
Pa	rt 7. Information About Your Children							
1.	Indicate the total number of ALL living children anywhere in the world (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 two children, use the space provided in <b>Part 14. Additional Information</b> .							
2.	Child 1							
	Current Legal Name							
	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)							
	N/A							
	A-Number (if any) ► A- Date of Birth (mm/dd/yyyy)							
	Country of Birth							
	What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)							
	Is this child also applying now on a separate Form I-485?							
3.	Child 2							
	Current Legal Name							
	Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)							
	A-Number (if any) ► A- Date of Birth (mm/dd/yyyy)							
	Country of Birth							
	What is your child's relationship to you? (for example, biological child, stepchild, legally adopted child)							
	Is this child also applying now on a separate Form I-485?							

	A-Number A-							
Pai	rt 8. Biographic Information							
1.	Ethnicity (Select only one box)							
	Hispanic or Latino Not Hispanic or Latino							
2.	Race (Select all applicable boxes)							
	American Indian or Alaska Native Asian Black or African American							
	Native Hawaiian or Other Pacific Islander White							
3.	Height Feet Inches 4. Weight Pounds							
5.	Eye Color (Select <b>only one</b> box)							
5.								
	Black Blue Brown Gray Green Hazel Maroon Pink Unknown/Other							
6.	Hair Color (Select only one box)  Pald (No hoir)  Plant Plant Prove Cross Pad Sends White Unfragge Other							
	Bald (No hair) Black Blond Brown Gray Red Sandy White Unknown/Other							
Pai	rt 9. General Eligibility and Inadmissibility Grounds							
	ose the answer that you think is correct in <b>Part 9.</b> If you answer "Yes" to any questions (or if you answer "No," but are unsure our answer), provide an explanation of the events and circumstances in the space provided in <b>Part 14. Additional Information</b> .							
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?							
	If you answered "Yes" to <b>Item Number 1.</b> , complete <b>Item Numbers 2 9.</b> If you were a member of more than two organizations, use the space provided in <b>Part 14. Additional Information</b> .							
Orgo	anization I							
2.	Name of Organization							
3.	City or Town State or Province							
	Country							
4.	Nature of Organization, including its purposes and activities, whether illicit or legitimate.							
	5,							
	Nature of involvement in organization, including role or positions(s) held, whether illicit or legitimate.							
5.	Dates of Membership or Dates of Involvement							
	From (mm/dd/yyyy) To (mm/dd/yyyy)							
Orgo	anization 2							
6.	Name of Organization							

	A-Number A-								
Par	rt 9. General Eligibility and Inadmissibility Grounds (continued)								
	, ,								
7.	City or Town State or Province								
	Country								
0	Natural of Open institute including the many and the first of the control of the								
8.	Nature of Organization, including its purposes and activities, whether illicit or legitimate.								
	Nature of involvement in organization, including role or positions(s) held, whether illicit or legitimate.								
	realists of involvement in organization, including fole of positions(s) field, whether fillest or legitimate.								
9.	Dates of Membership or Dates of Involvement								
	From (mm/dd/yyyy)  To (mm/dd/yyyy)								
10									
10.	Have you <b>EVER</b> been denied admission to the United States?	☐ Yes ⋉ No							
11.	Have you <b>EVER</b> been denied a visa to the United States?	☐ Yes ⊠ No							
12.	Have you <b>EVER</b> worked in the United States without authorization?	☐ Yes × No							
13.	Have you <b>EVER</b> violated the terms or conditions of your nonimmigrant status?	☐ Yes ⊠ No							
14.	Are you presently or have you <b>EVER</b> been in removal, exclusion, rescission, or deportation proceedings, including expedited removal proceedings?	∐ Yes ⊠ No							
15.	Have you EVER been issued a final order of exclusion, deportation, or removal?	☐ Yes ⊠ No							
16.	Have you EVER had a prior final order of exclusion, deportation, or removal reinstated?	☐ Yes ⊠ No							
17.	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							
18.	Have you <b>EVER</b> applied for any kind of relief or protection from removal, exclusion, or deportation?	☐ Yes ⊠ No							
19.	Have you <b>EVER</b> been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement?	☐ Yes ⊠ No							
20.	If you answered "Yes" to Item Number 19., have you complied with the foreign residence requirement?	Yes No							
21.	If you answered "Yes" to <b>Item Number 19.</b> and "No" to <b>Item Number 20.</b> , have you been granted a waiver or has Department of State issued a favorable waiver recommendation letter for you?	Yes No							
Cri	minal Acts and Violations								
Criminal Acts and Violations  For Item Numbers 22 41., you must answer "Yes" to any question that applies to you, even if your records were sealed or otherwise cleared, or even if anyone, including a judge, law enforcement officer, or attorney, told you that you no longer have a record. You must also answer "Yes" to the following questions whether the action or offense occurred here in the United States or anywhere else is the world. If you answer "Yes" to Item Numbers 22 41., use the space provided in Part 14. Additional Information to provide an explanation for each offense, if applicable, that includes a description of the criminal offense; where the criminal offense occurred; when the criminal offense occurred; whether you were arrested, cited, charged, or detained for the criminal offense you committed; and the outcome or disposition of that criminal offense (for example, convicted, placement in a diversion program, no charges filed, charges dismissed, jail, prison, detention, probation, or community service). Your explanation must include the duration of any sentence to confinement (even if suspended).									
22.	Have you <b>EVER</b> been arrested, cited, charged, or permitted to participate in a diversion program (including pre-trial diversion, deferred prosecution, deferred adjudication, or any withheld adjudication), or detained for any reason by any law enforcement official in any country including but not limited to any U.S. immigration official or any official of the U.S. armed forces or U.S. Coast Guard or by a similar official of a country other than the United States?	g Nes X No							

	A-Number ► A-		
Par	t 9. General Eligibility and Inadmissibility Grounds (continued)		
	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, or convicted)?	Yes	× No
24.	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)?	Yes	× No
	<b>NOTE:</b> If you were the beneficiary of a pardon, amnesty, a rehabilitation decree, or other act of elemency, p documentation of that post-conviction action.	rovide	
25.	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
26.	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?	Yes	× No
27.	Have you <b>EVER</b> trafficked in or benefited from, or knowingly aided, abetted, assisted, conspired or colluded in the illegal trafficking of any controlled substances, such as chemicals, illegal drugs, or narcotics?	Yes	× No
28.	Are you the spouse, son, or daughter of an alien 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 5 years, any financial or other benefit from this activity of your spouse or parent?	Yes	× No
29.	If your answer to <b>Item Number 28.</b> is "Yes," did you know or should you have reasonably known that the financial or other benefit you obtained resulted from this activity of your spouse or parent?	Yes	☐ No
30.	Have you <b>EVER</b> engaged in prostitution or are you coming to the United States to engage in prostitution?	Yes	× No
31.	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
32.	Have you EVER received any proceeds or money from prostitution?	Yes	× No
33.	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
34.	Have you <b>EVER</b> exercised immunity (diplomatic or otherwise) to avoid being prosecuted for a criminal offense in the United States?	Yes	× No
35.a.	Have you EVER served as a foreign government official?	Yes	× No
35.b.	If your answer to <b>Item Number 35.a.</b> is "Yes," have you <b>EVER</b> been responsible for, enforced, or directly carried out violations of religious freedoms?	Yes	☐ No
36.	Have you <b>EVER</b> induced by force, fraud, or coercion (or otherwise been involved in) the trafficking of another person for commercial sex acts (sex trafficking)?	Yes	× No
	<b>NOTE:</b> Sex trafficking involves inducing or causing an adult to engage in a commercial sex act (any sex act anything of value) through fraud, force, or coercion, or inducing or causing any person under 18 years of age commercial sex act (even without force, fraud, or coercion). Sex trafficking may include recruiting, enticing transporting, providing, obtaining, advertising, maintaining, patronizing, or soliciting by any means a person commercial sex act knowing (or, in the case of advertising, with reckless disregard of the fact) that the person fage or that force, fraud, or coercion was used to induce or cause the person to engage in the commercial set trafficking may also include knowingly benefiting financially or by receiving anything of value, from participations involving sex trafficking.	e to engage , harboring to engage n is under ex act. Sex	e in a S, in the 18 years
37.	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

Par	t 9. General Eligibility and Inadmissibility Grounds (continued)		
38.	Have you <b>EVER</b> knowingly aided, abetted, assisted, conspired, or colluded with others in trafficking in persons for commercial sex acts or involuntary servitude, peonage, debt bondage, or slavery?	Yes	× No
39.	Are you the spouse, son, or daughter of an alien who engaged in the trafficking in persons and have received or obtained, within the last 5 years, any financial or other benefits from this activity of your spouse or your parent?	Yes	× No
40.	If your answer is "Yes" to <b>Item Number 39.</b> , did you know or reasonably should have known that this benefit resulted from this activity of your spouse or parent?	Yes	☐ No
41.	Have you <b>EVER</b> engaged in money laundering or have you <b>EVER</b> knowingly aided, assisted, abetted, conspired, or colluded with others in money laundering or do you seek to enter the United States to engage in such activity?	Yes	× No
Seci	urity and Related		
Do yo	ou intend to:		
42.a.	Engage in any activity that violates or evades any law relating to espionage (including spying) or sabotage in the United States?	Yes	× No
42.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
42.c.	Engage in any activity whose purpose includes opposing, controlling, or overthrowing the U.S. Government by force, violence, or other unlawful means while in the United States?	Yes	× No
42.d.	Engage in any other unlawful activity?	Yes	× No
Have	you EVER:		
43.a.	Received any weapons training, paramilitary training, or other military-type training?	Yes	× No
43.b.	Committed kidnapping, assassination, or hijacking or sabotage of a conveyance (including an aircraft, vessel, vehicle, or train)?	Yes	× No
43.c.	Used a weapon or explosive or any dangerous device with the intent to endanger the safety of another person or people or cause damage to property?	Yes	× No
43.d.	Threatened, attempted, conspired, prepared, or planned to do any of the things described in <b>Item Numbers 43.b.</b> - <b>43.c.</b> ?	Yes	× No
43.e.	Incited, under circumstances indicating an intention to cause death or serious bodily harm/injury, any of the activities described in <b>Item Numbers 43.b.</b> - <b>43.c.?</b>	Yes	× No
43.f.	Participated in, or been a member of, a group or organization that did any of the activities described in <b>Item Numbers 43.b 43.e.?</b>	Yes	× No
43.g.	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 Numbers 43.b.</b> - <b>43.e.?</b>	Yes	× No
43.h.	Provided money, a thing of value, services or labor, or any other assistance or support for any of the activities described in <b>Item Numbers 43.b.</b> - <b>43.e.?</b>	Yes	× No
43.i.	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 Numbers 43.b 43.e.?</b>	Yes	× No
44.	Do you intend to engage in any of the activities listed in any part of Item Numbers 43.b 43.e.?	Yes	× No
45.	Do you intend to engage in any activity that could endanger the welfare, safety, or security of the United States?	Yes	× No
	<b>NOTE:</b> If you answered "Yes" to any part of <b>Item Numbers 42.a 45.</b> , explain what you did, including the of the circumstances or what you intend to do in the space provided in <b>Part 14. Additional Information</b>	e dates and	location

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Par	t 9. General Eligibility and Inadmissibility Grounds (continued)				
16.	Are you the spouse or child of an individual who <b>EVER</b> engaged in any of the activities listed in <b>Item Numbers 43.b.</b> - <b>43.i.</b> ?		Yes	$\times$	No
	<b>NOTE:</b> If you answered "Yes" to any part of <b>Item Number 46.</b> , explain what your parent or spouse did, inclocation of the circumstances in <b>Part 14. Additional Information</b> .	ludir	ng the	dates	and
17.	Have you <b>EVER</b> sold, provided, or transported weapons, or assisted any person in selling, providing, or transporting weapons, which you knew or believed would be used against another person?		Yes	$\times$	No
18.	Have you <b>EVER</b> worked, volunteered, or otherwise served in any prison, jail, prison camp, detention facility, labor camp, or any other place where people were detained, or have you <b>EVER</b> directed or participated in any other activity that involved detaining people?		Yes	$\times$	No
19.	Have you <b>EVER</b> been a member of, assisted, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so?		Yes	$\times$	No
50.	Have you <b>EVER</b> served in, been a member of, assisted (helped), or participated in any military or police unit?		Yes	$\times$	No
51.	Have you <b>EVER</b> served in, been a member of, assisted (helped), or participated in any armed group (a group that carries weapons), for example: paramilitary unit (a group of people who act like a military group, but are not part of the official military), self-defense unit, vigilante unit, rebel group, or guerrilla group?		Yes	$\times$	No
	If you answered "Yes" to <b>Item Number 50.</b> or <b>51.</b> , include the name of the country, the name of the military group, your rank or position, and your dates of involvement in your explanation in <b>Part 14. Additional Info</b>			med	
52.	Have you <b>EVER</b> been a member of, or in any way affiliated with, the Communist Party or any totalitarian party (in the United States or abroad)?		Yes	$\times$	No
Have	you EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the	follo	wing		
53.a.	Torture?		Yes	$\times$	No
53.b.	Genocide?		Yes	$\times$	No
53.c.	Killing, or trying to kill, any person?		Yes	$\times$	No
53.d.	Intentionally and severely injuring or trying to injure any person?		Yes	$\times$	No
54.	Have you <b>EVER</b> recruited, enlisted, conscripted, or used any person under 15 years of age to take part in hostilities or to serve in or help an armed force or group, or attempted or worked with others to do so?		Yes	$\times$	No
55.	Have you <b>EVER</b> used any person under 15 years of age to take part in hostilities, for instance, participating in combat or providing services related to combat (such as sabotage or serving as a courier) or providing support services (such as transporting supplies), or attempted or worked with others to do so?		Yes	$\times$	No
	<b>NOTE:</b> If you answered "Yes" to any part of <b>Item Numbers 47 55.</b> , explain what occurred, including the of the circumstances, in the space provided in <b>Part 14. Additional Information</b> .	date	s and	locati	on

A-Number ► A-					
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## Part 9. General Eligibility and Inadmissibility Grounds (continued)

### Public Charge

Each alien who is subject to the public charge ground of inadmissibility in INA section 212(a)(4) must complete **Item Numbers 57.-66.** An alien is subject to the public charge ground of inadmissibility if the alien does not fall under one of the categories exempt from the public charge ground of inadmissibility listed below. If you fall under one of the exempt categories listed below, please select the exempt category, and skip **Item Numbers 57.-66.** If you do not fall under one of the exempt categories listed below, select "I do not fall under any of the exempt categories listed above and will complete **Item Numbers 57.-66.**"

NOTE: For more information, see Part 9. General Eligibility and Inadmissibility Grounds, *Public Charge* section of these Instructions.

Instr	actio	ns.
56.	I an	n exempt from the public charge ground of inadmissibility because I am a/an (select <b>only one</b> box):
		VAWA Self-Petitioner (Form I-360)
		Special Immigrant Juvenile (Form I-360)
		Certain Afghan or Iraqi National (Form I-360 or Form DS-157)
		Asylee (Form I-589 or Form I-730)
		Refugee (Form I-590 or Form I-730)
		Victim of Qualifying Criminal Activity (U Nonimmigrant) under INA section 245(m) (Form I-918, Form I-918A, or Form I-929)
		Any category other than INA section 245(m), but you are in valid U nonimmigrant status at the time you file your application for adjustment of status. (This exemption only applies if, at the time of the adjudication of Form I-485, you are still in valid U nonimmigrant status. If, at the time of adjudication of Form I-485, you are no longer in valid U nonimmigrant status, you will be subject to the public charge ground of inadmissibility.)
		Human Trafficking Victim (T nonimmigrant) under INA section 245(l) (Form I-914 or Form I-914A)
		Any category other than INA section 245(l), but you either have a pending application for T nonimmigrant status (Form I-914) that sets forth a prima facie case for eligibility or are in valid T nonimmigrant status at the time you file your application for adjustment of status. (This exemption only applies if your Form I-914 is still pending and deemed to be prima facie eligible or you are in valid T nonimmigrant status when we adjudicate your adjustment of status application.)
		Cuban Adjustment Act
		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
		Cuban and Haitian Entrants Applying for Adjustment of Status under section 202 of the Immigration Reform and Control Act of 1986
		A Lautenberg Parolee
		National of Vietnam, Cambodia, or Laos Applying under the Foreign Operations, Export Financing, and Related Programs
		Continuous Residence in the United States Since Before January 1, 1972 ("Registry")
		Amerasian Homecoming Act
		Polish or Hungarian Parolee
		Nicaraguans and Other Central Americans under section 203 of the Nicaraguan Adjustment and Central American Relief Act (NACARA)
		American Indian Born in Canada (INA section 289) or the Texas Band of Kickapoo Indians of the Kickapoo Tribe of Oklahoma, Public Law 97-429 (Jan. 8, 1983)
		Section 7611 of the National Defense Authorization Act for Fiscal Year 2020 (Liberian Refugee Immigration Fairness)

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rt	9. General Eligibility and Inadmissibility Grounds (continued)
[	Syrian National Adjusting Status under Public Law 106-378
[	Spouse, Child, or Parent of a U.S. Active-Duty Service Member in the Armed Forces under the National Defense Authorization Act (NDAA) (Form I-130 or Form I-360)
[	I do not fall under any of the exempt categories listed above and will complete <b>Item Numbers 57 66</b> .
mb	selected "I do not fall under any of the exempt categories listed above and will complete <b>Item Numbers 57 66.</b> " in <b>Item er 56.</b> , complete <b>Item Numbers 57 66.</b> below. If you selected an exempt category in <b>Item Number 56.</b> , go to <b>Item Number</b> you need extra space to complete this section, use the space provided in <b>Part 14. Additional Information</b> .
1	What is the size of your household?
]	indicate your annual household income.
[	\$0-27,000 \$27,001-52,000 \$52,001-85,000 \$85,001-141,000 Over \$141,000
]	dentify the total value of your household assets.
[	\$0-18,400 \$18,401-136,000 \$136,001-321,400 \$321,401-707,100 Over \$707,100
]	dentify the total value of your household liabilities (including both secured and unsecured liabilities).
[	\$0 \$1-10,100 \$10,101-57,700 \$57,701-186,800 Over \$186,800
1	What is the highest degree or grade of school you have completed?
[	Less than a high school diploma. If you select this option, indicate the highest grade of school you have completed.
[	High school diploma, GED, or alternative credential 1 or more years of college credit, no degree
[	Associate's degree Bachelor's degree Master's degree Professional degree (JD, MD, DMD, etc.)
[	Doctorate degree
]	List your certifications, licenses, skills obtained through work experience, and educational certificates.
	List of Certifications
	Ph.D. in Computer and Communication Sciences
	M.S. in Information and Communication Technology
	M.S. in Information Security
(	Have you ever received Supplemental Security Income (SSI), Temporary Assistance for Needy Families Yes No TANF), or state, Tribal, territorial, or local cash benefit programs for income maintenance (often called 'General Assistance' in the state context, but which also exist under other names)?
]	Have you ever received long-term institutionalization at government expense?

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Par	Part 9. General Eligibility and Inadmissibility Grounds (continued)									
55.	If your answer to <b>Item Number 63.</b> is "Yes," list the specific benefit(s) you received, the start and end dates of each period receipt, the dollar amount of benefits received, and whether you received the benefits while you were in an immigration category exempt from the public charge ground of inadmissibility.									of
	Benefit Received		Start D		End Da	ate	Dollar Amount	In a Cate		
								☐ Ye		No
								☐ Ye	s 🗌	No
								☐ Ye	s 🗌	No
								☐ Ye	s 🔲	No
<b>66.</b>	If your answer to <b>Item Number 6</b> period of institutionalization, the rimmigration category exempt from	eason you	were insti	tutionali	zed, and whe	ether you				
	Institution Name/City/State	Date I	rom	D	ate To		Reason	In a Category Exen from Public Charg		
								☐ Ye	s 🔲	No
								☐ Ye	s 🗌	No
								☐ Ye	s 🗌	No
								☐ Ye	s 🗌	No
Ille	gal Entries and Other Immig	ration V	iolations	5						
<b>57.</b>	Have you <b>EVER</b> failed or refused against you on or after April 1, 19	Have you <b>EVER</b> failed or refused to attend or to remain in attendance at any removal proceeding filed							$\times$	No
	<b>NOTE:</b> If your answer to <b>Item N</b> or remain in attendance at the rem									
<b>58.</b>	Have you <b>EVER</b> submitted altered official to obtain or attempt to obtain States?							Yes	$\times$	No
<b>59.</b>	Have you <b>EVER</b> lied about, conce obtain a visa, other documentation or any other kind of immigration by	required f	-	-		-		Yes	$\times$	No
70.	Have you EVER falsely claimed t	o be a U.S.	citizen (i	n writin	g or any othe	r way)?		Yes	$\times$	No
71.	Have you EVER been a stowaway	on a vesse	el or aircra	aft arrivi	ing in the Un	ited Stat	es?	Yes	$\times$	No
72.	Have you <b>EVER</b> knowingly encounter the United States illegally (al	_		sted, abe	etted, or aided	d any ali	en to enter or to try to	Yes	$\times$	No
73.	Are you under a final order of civi documents?	l penalty fo	r violatinį	g INA se	ection 274C f	or use o	f fraudulent	Yes	$\times$	No
Rei	noval, Unlawful Presence, or	· Illegal I	Reentry .	After F	Previous In	nmigra	tion Violations			
74.	Have you <b>EVER</b> been excluded, d United States on your own after ha States?	•					•	Yes	$\times$	No
75.									$\times$	No

Part 9. General Eligibility and Inadmissibility Grounds (continued)						
76.	Since April 1, 1997, have you been unlawfully present in the United States? You were unlawfully present in the United States if you were present in the United States after the expiration of the period of stay authorized by the Department of Homeland Security (DHS) Secretary or were present in the United States without being admitted or paroled.	☐ Yes ⊠ No				
	NOTE: If you answered "Yes" to <b>Item Number 76.</b> , give the dates of unlawful presence in the space provided in <b>Part 14. Additional Information</b> .					
77.	If you answered "Yes" to <b>Item Number 76.</b> , was a severe form of trafficking in persons at least one central reason for your unlawful presence in the United States?	Yes No				
<b>NOTE:</b> Severe trafficking in persons involves sex trafficking (the recruitment, harboring, transportation, provision, of a person to commit a commercial sex act) induced by force, fraud, coercion, or in which the person is induced to such act has not reached 18 years of age, or the recruitment, harboring, transportation, provision, or obtaining of a p labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, debt bondage, or slavery.						
	Since April 1, 1997, have you <b>EVER</b> reentered or attempted to reenter the United States without being inspected and admitted or paroled after:					
78.a.	Having been unlawfully present in the United States for more than one year in the aggregate on or after April 1, 1997? You were unlawfully present in the United States for more than one year in the aggregate if you count all of the days during all of your stays that you were present in the United States after the expiration of the period of stay authorized by the DHS Secretary or were present in the United States without being admitted or paroled.	☐ Yes ⊠ No				
78.b.	Having been deported, excluded, or removed from the United States?	☐ Yes ⊠ No				
Miscellaneous Conduct						
79.	Do you plan to practice polygamy in the United States?	☐ Yes ⊠ No				
80.	Are you accompanying an alien who is inadmissible and who has been certified by a medical officer as helpless from sickness, mental or physical disability, or infancy, and who requires your protection or guardianship, as described in INA section 232(c)?	☐ Yes ⊠ No				
81.	Have you <b>EVER</b> assisted in detaining, retaining, or withholding custody of a U.S. citizen child outside the United States from a person who has been granted custody of the child?	☐ Yes ⊠ No				
82.	Have you <b>EVER</b> voted in violation of any Federal, state, or local constitutional provision, statute, ordinance, or regulation in the United States?	☐ Yes ⊠ No				
83.	Have you EVER renounced U.S. citizenship to avoid being taxed by the United States?	☐ Yes ⊠ No				
Have	you EVER:					
84.a.	Applied for exemption or discharge from training or service in the U.S. armed forces or in the U.S. National Security Training Corps on the ground that you are an alien?	☐ Yes ⊠ No				
84.b.	Been relieved or discharged from such training or service on the ground that you are an alien?	☐ Yes ⊠ No				
84.c.	Been convicted of desertion from the U.S. armed forces?	☐ Yes ⊠ No				
85.	Have you <b>EVER</b> left or remained outside the United States to avoid or evade training or service in the U.S. armed forces in time of war or a period declared by the President to be a national emergency?	☐ Yes ⊠ No				
86.	f you answered "Yes" to <b>Item Number 85.</b> , what was your nationality or immigration status immediately before you left (for xample, U.S. citizen or national, lawful permanent resident, nonimmigrant, parolee, present without admission or parole, or any ther status)?					

Part 11. Interpreter's Contact Information, Certification, and Signature  Interpreter's Full Name  Interpreter's Family Name (Last Name)  Interpreter's Given Name (First Name)  Interpreter's Business or Organization Name  Interpreter's Contact Information  Interpreter's Daytime Telephone Number  Interpreter's Email Address (if any)  Interpreter's Certification and Signature  I certify, under penalty of perjury, that I am fluent in English and and I have interpreted every question on the application and Instructions and interpreted the applicant's answers to the quanguage, and the applicant informed me that he or she understood every instruction, question, and answer on the application, and answer on the application.	ıber ► A-	A-Number ▶			
Provide your daytime telephone number, mobile telephone number (if any), and email address (if any).  1. Applicant's Daytime Telephone Number 2. Applicant's Mobile Telephone Number (if a any), and email address (if any).  3. Applicant's Email Address (if any)  Applicant's Certification and Signature  1. Certify, under penalty of perjury, that I provided or authorized all of the responses and information contained in and su my application, I read and understand or, if interpreted to me in a language in which I am fluent by the interpreter listed anderstood, all of the responses and information contained in, and submitted with, my application from any and all of that USCIS may need to determine my eligibility for an immigration request and to other entities and persons where nee administration and enforcement of U.S. immigration law.  4. Applicant's Signature  Date of Signature  Part 11. Interpreter's Contact Information, Certification, and Signature  Interpreter's Family Name  1. Interpreter's Family Name (Last Name)  N/A  Interpreter's Given Name (First Name)  Interpreter's Daytime Telephone Number  4. Interpreter's Mobile Telephone Number (if Interpreter's Email Address (if any)  Interpreter's Email Address (if any)  Interpreter's Certification and Signature  1. Interpreter's Certification and Signature  1. Interpreter's Certification and Signature  2. Interpreter's Email Address (if any)  Interpreter's Certification and Signature  2. Interpreter's Daytime Telephone Number  4. Interpreter's and interpreted the application and Instructions and interpreted the applicant's answers to the quanting and I have interpreted every question on the application and Instructions and interpreted the applicant's answers to the quanting and I have interpreted every question on the application and Instructions and interpreted the applicant's answers to the quanting and the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruc		on, and Signature	tion, ar	. Applicant's Contact Information, Certificat	Part
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Interpreter's Full Name  Interpreter's Family Name (Last Name)  Interpreter's Given Name (First Name)  Interpreter's Business or Organization Name  Interpreter's Contact Information  Interpreter's Daytime Telephone Number  Interpreter's Email Address (if any)  Interpreter's Certification and Signature  I certify, under penalty of perjury, that I am fluent in English and and I have interpreted every question on the application and Instructions and interpreted the applicant's answers to the quanguage, and the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruction, question, and answer on the applicant informed me that he or she understood every instruction, question the applicant informed me that he or she understood every instruction.	Date of Signature (mm/dd/yyyy)			olicant's Signature	4. <b>→</b>
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6. Interpreter's Signature Date of Signature				e interpreted every question on the application and Instruc	and I
	Date of Signature (mm/dd/yyyy)			rpreter's Signature	6.

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	Part 12. Contact Information, Certification, and Signat Other Than the Applicant	ure of the Person Preparing this Application,	if			
Pre	Preparer's Full Name					
1.	Preparer's Family Name (Last Name)	Preparer's Given Name (First Name)				
	N/A					
2.	Preparer's Business or Organization Name					
Pre	Preparer's Contact Information					
3.	Preparer's Daytime Telephone Number	Preparer's Mobile Telephone Number (if any)				
5.	Preparer's Email Address (if any)					
Pre	Preparer's Certification and Signature					
I certify, under penalty of perjury, that I prepared this application for the applicant at his or her request and with express consent and that all of the responses and information contained in and submitted with the application are complete, true, and correct and reflects only information provided by the applicant. The applicant reviewed the responses and information and informed me that he or she understands the responses and information in or submitted with the application.						
6.	Preparer's Signature	Date of Signature (mm/dd/	уууу)			
	NOTE: Do not complete Part 13. until the USCIS Officer instructs you to do so at the interview.					
D.	D4-12-C					
	Part 13. Signature at Interview	ha Liuita d States of America that I live out that the contests	- C			
	swear (affirm) and certify under penalty of perjury under the laws of this Form I-485, Application to Register Permanent Residence or Adju					
	nanges made to this application, numbered through					
info	formation on additional pages submitted by me with this Form I-485,	on numbered pages through				
are o	e complete, true, and correct. All documents submitted at this intervi	ew were provided by me and are complete true and corre	ect			
Subscribed to and sworn to (affirmed) before me						
- <b>.</b>	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)				

					A-Number ▶	• A-	
Pa	rt 14. Additio	onal Informa	tion				
wha Typ	it is provided, you	u may make cop ame and A-Num	ies of this page ber (if any) at t	formation within this applicate to complete and file with this the top of each sheet; indicate date each sheet.	s application or a	attach a separate	sheet of paper.
1.	Family Name (	(Last Name)	(	Given Name (First Name)	M	Middle Name (if	applicable)
2.	Page Number	Part Number	Item Number	r			
3.	Page Number	Part Number	Item Number	r			
4.	Page Number	Part Number	Item Numbe	r			
5.	Page Number	Part Number	Item Number	<u>r</u>			

# Statement from Dr. Kirill Nikitin on how he intends to continue work in the United States

July 29, 2025

I am the beneficiary of an approved I-140 Immigrant Petition for an Alien Worker under the EB-1A classification as an individual of extraordinary ability. I have a vast experience in the field of Data Privacy and Computer Security, and I intend to continue carrying out research in this area in the United States.

I am already employed as a postdoctoral researcher and I conduct research in the area of my expertise. Specifically, I analyze the leakage of sensitive information from de-identified medical data and develop privacy-preserving methods for data sharing. I began my work in the United States at Cornell University, and then continued to conduct research at the New York Genome Center.

After completing my postdoctoral appointment, I plan to apply for professorship positions in Computer Science at research universities in the United States. Having become one of the top experts in the field of Data Privacy and Computer Security, I believe that I have a duty to use my expertise to advance the state of the art in privacy technologies and to share my knowledge with the next generation of scientists, engineers, and policy-makers in the United States. I will also continue my presenting research results at international conferences and serving as a reviewer for conferences and journals in my field.

My research will continue to focus on strengthening privacy protections for users and improving the cybersecurity posture of computer systems, including software-update systems and blockchain networks. I will work on developing mechanisms for private communication and the private retrieval of information, which, I believe, will become even more in demand in the future. I will also continue my work on developing tools for privacy-preserving analysis and sharing of medical data, which is a field of growing importance in the upcoming era of personalized medicine. The National Strategy to Advance Privacy-Preserving Data Sharing and Analytics highlights the importance of such tools for responsible scientific research and innovation, especially in healthcare research where data are highly sensitive and their sharing is limited by the existing regulations. Obtaining the permanent residency will enable me to maximize the positive impact of my research and to contribute more significantly to the United States' innovation ecosystem.

Yours faithfully,

Dr. Kirill Nikitin

. .

Tel: ...

E-mail: ...

- Two (2) passport-style photos of the beneficiary (in an envelope)
- Form I-693, Report of Immigration Medical Exam and Vaccination Record (sealed)