

Application to Register Permanent Residence or Adjust Status

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-485OMB No. 1615-0023
Expires 03/31/2027

		F	or USC	CIS Use	Only			
Preference Category:			pt		Action Block			
Country Chargeable:	-							
Priority Date:		-						
Date Form I-693 Received:		-						
Applicant Intervie Interviewed Waived Date of Initial Interview: Lawful Permanent Resident as of:	Section of Law							
	To be c	ompleted by an	attorney	or accred	ited represei	ntative (if any).		
Select this box if Form G-28 is attached.	Volag Nu (if any)	mber	Attorne (if appl	•	ar Number	Attorney or Accredited Representative USCIS Online Account Number (if any)		
NOTE TO ALL APPLICANTS: If you do not completely fill Instructions, U.S. Citizenship and Immigration Services (USCIS Part 1. Information About You (Person applying for lawful permanent residence)) may deny 3.a.	Family Nam (Last Name Given Name	ation. ne			
Your Current Legal N nickname)	l ame (do	not provide a		3.c.	(First Name Middle Nan			
1.a. Family Name (Last Name) 1.b. Given Name (First Name)					Family Nam (Last Name Given Name (First Name	e [
1.c. Middle Name				4.c.	Middle Nan	ne		
Other Names You Have Used Since Birth (if applicable)				Oth	er Informo	ation 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.	NOTE: In include any connection	addition to providing your actual date of birth other dates of birth you have used in with any legal names or non-legal names in tovided in Part 14. Additional Information .		
2.a. Family Name (Last Name)		6. Sex Male Female				Male Female		
2.b. Given Name (First Name)				7.	City or Tow	n of Birth		
2.c. Middle Name								

			A-Number ► A-
Par	et 1. Information About You (Person applying	Soc	ial Security Card
for 8.	Country of Birth	14.	Has the Social Security Administration (SSA) ever officially issued a Social Security card to you? Yes No
9.	Country of Citizenship or Nationality		If you answered "Yes," provide the information requested in Item Number 15.
10.	Alien Registration Number (A-Number) (if any) • A- NOTE: If you have EVER used other A-Numbers, include the additional A-Numbers in the space provided in Part 14. Additional Information.	15. 16.	Provide your U.S. Social Security Number (SSN). Do you want the SSA to issue you a Social Security card? (You must also answer "Yes" to Item Number 17. Consent for Disclosure, to receive a card).
11.	USCIS Online Account Number (if any) •	17.	Consent for Disclosure: I authorize disclosure of information from this application to the SSA as required for the purpose of assigning me an SSN and issuing me a Social Security Card.
U.S	S. Mailing Address		Yes No
12.a.	In Care Of Name (if any)	Rec	ent Immigration History
12.b	Street Number and Name		ide the information for Item Numbers 18 24. if you last ed the United States using a passport or travel document.
12.c.	Apt. Ste. Flr.	18.	Passport Number Used at Last Arrival
	City or Town 12.f. ZIP Code	19.	Travel Document Number Used at Last Arrival
Alte	(USPS ZIP Code Lookup) ernate and/or Safe Mailing Address	20.	Expiration Date of this Passport or Travel Document (mm/dd/yyyy)
(VA	ware 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
noni abou	mmigrant) and you do not want USCIS to send notices at 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)		of Last Arrival into the United States City or Town
13.b	Street Number		
13 c	and Name	23.b.	State

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13.d. City or Town

13.e. State

13.f. ZIP Code

24. Date of Last Arrival (mm/dd/yyyy)

A-Number ►	A-					

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

When I last arrived in the United States, I:								
25.a.	Was inspected at a port of entry and admitted as (for example, exchange visitor; visitor, waived through; temporary worker; student):							
25.b.	Was 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 issued a Form I-94 Arrival-Departure Record Number:							
26.a.	Form I-94 Arrival-Departure Record Number							
	▶							
26.b.	Expiration 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)?							
Provide your name exactly as it appears on your Form I-94 (if any)								
•	Family Name							
	(Last Name)							
28.b.	Given Name (First Name)							
28.c.	Middle 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.):

4	T-7	••		
1.a.	Fam	IIV-	bas	ea

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

1.

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. Human Trafficking Victim or Crime Victim

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

derivative family member, Form I-918A, or qualifying family member, Form I-929

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A-Number ▶	A-				

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,

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	mation.									
3.	Receipt Number of Underlying Petition (if any)									
4.	Priority Date from Underlying Petition (if any)									
	(mm/dd/yyyy)									
child	u are a derivative applicant (the spouse or unmarried under 21 years of age of a principal applicant), provide the wing information for the principal applicant .									
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)									
•	►									
9.	Priority Date of Principal Applicant's Underlying Petition									
	(if any) (mm/dd/yyyy)									
D.	4.2 A 1144 - 11 C 4 - A1 - 4 37									
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 Item Number 1. , complete Item Numbers 2.a 4. below. If you need extra space to complete this section, use the space provided in Part 14. Additional Information .									
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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	111 (dillot) / 11
Part 3. Additional Information About You (continued)	Provide your most recent address outside the United States where you lived for more than one year (if not already listed above).
Address History	9.a. Street Number and Name
Provide physical addresses for everywhere you have lived during the last five years, whether inside or outside the United States. Provide your current address first. If you need extra space to complete this section, use the space provided in Part 14. Additional Information .	9.b. Apt. Ste. Flr. 9.c. City or Town 9.d. State 9.e. ZIP Code
Physical Address 1 (current address)	9.f. Province
5.a. Street Number and Name	
5.b.	9.g. Postal Code
	9.h. Country
5.c. City or Town	
5.d. State 5.e. ZIP Code	Dates of Residence
5.f. Province	10.a. From (mm/dd/yyyy)
5.g. Postal Code	10.b. To (mm/dd/yyyy)
5.h. Country	Employment History
Dates of Residence 6.a. From (mm/dd/yyyy) 6.b. To (mm/dd/yyyy)	Provide your employment history for the last five years, whether inside or outside the United States. Provide the most recent employment first. If you need extra space to complete this section, use the space provided in Part 14. Additional Information .
Physical Address 2	Employer 1 (current or most recent) 11. Name of Employer or Company
7.a. Street Number	11. Name of Employer of Company
and Name	Address of Employer or Company
7.b. Apt. Ste. Flr.	12.a. Street Number
7.c. City or Town	and Name
7.d. State 7.e. ZIP Code	12.b. Apt. Ste. Flr.
7.f. Province	12.c. City or Town
7.g. Postal Code	12.d. State 12.e. ZIP Code
	12.f. Province
7.h. Country	12.g. Postal Code
Dates of Basidanas	
Dates of Residence	12.h. Country
8.a. From (mm/dd/yyyy)	13 Your Occupation

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8.b. To (mm/dd/yyyy)

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

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7. Current City or Town of Residence (if living) 8. Current Country of Residence (if living) 8. Current Country of Residence (if living) 1. Information About Your Parent 2 Parent 2's Legal Name 9.a. Family Name (Last Name) 9.b. Given Name (First Name) 9.c. Middle Name 9.c. Middle Name 10.a. Family Name (Last Name) 10.b. Given Name (First Name) 10.c. Middle Name 10.c. Current Spouse of Marriage to Current Spouse 10.c. Current Spouse	Par	t 4. Information About Your Parents	3.	How many times have you been married (including annulled marriages and marriages to the same person)?
Information About Your Current Marriage (including if you are legally separated)	(cor	ntinued)		amuned marriages and marriages to the same person):
Current Country of Residence (if living) If you are legally separated)	7.	Current City or Town of Residence (if living)		
If you are currently married, provide the following info about your current spouse. Current Spouse's Legal Name 4.a. Family Name (Last Name) 4.b. Given Name (First Name) 4.c. Middle Name 5. A-Number (if any) A- 1. Date of Birth (mm/dd/yyyy) 10.c. Middle Name 11. Date of Birth (mm/dd/yyyy) 12. Sex Male Female Female 13. City or Town of Birth 8.b. State or Province 14. Country of Residence (if living) 16. Current Country of Residence (if living) 17. State or Province 18. State or Province 19. S				——————————————————————————————————————
about your current spouse. Current Spouse's Legal Name 4.a. Family Name (Last Name) 9.b. Given Name (First Name) 9.c. Middle Name Parent 2's Name at Birth (if different than above) 10.a. Family Name (Last Name) 10.b. Given Name (First Name) 10.b. Given Name (First Name) 11. Date of Birth (mm/dd/yyyy) 12. Sex	8.	Current Country of Residence (if living)	(inc	cluding if you are legally separated)
Parent 2's Legal Name 9.a. Family Name (Last Name) 9.b. Given Name (First Name) 9.c. Middle Name Parent 2's Name at Birth (if different than above) 10.a. Family Name (Last Name) 10.b. Given Name (First Name) 10.b. Given Name (First Name) 11. Date of Birth (mm/dd/yyyy) 12. Sex				ou are currently married, provide the following information at your current spouse.
9.a. Family Name (Last Name) 9.b. Given Name (First Name) 9.c. Middle Name Parent 2's Name at Birth (if different than above) 10.a. Family Name (Last Name) 10.b. Given Name (First Name) 11. Date of Birth (mm/dd/yyyy) 10.c. Middle Name 11. Date of Birth (mm/dd/yyyy) 12. Sex	Info	ormation About Your Parent 2	Curr	ent Spouse's Legal Name
9.a. Family Name (Last Name) 9.b. Given Name (First Name) 9.c. Middle Name 9.c. Current Spouse's Date of Birth (mm/dd/yyyy) 9.c. Middle Name 9.c. Current Spouse's Place of Birth 8.a. City or Town 9.b. State or Province 9.c. Country 9.c. Current Country of Residence (if living) 9.c. Current Spouse (mm/dd/yyy) 9.c. State or Province	Parer	nt 2's Legal Name	4.a.	
9.c. Middle Name Parent 2's Name at Birth (if different than above) 10.a. Family Name (Last Name) 10.b. Given Name (First Name) 11. Date of Birth (mm/dd/yyyy) 12. Sex	9.a.		4.b.	Given Name
9.c. Middle Name Parent 2's Name at Birth (if different than above) 10.a. Family Name (Last Name) 10.b. Given Name (First Name) 10.c. Middle Name 11. Date of Birth (mm/dd/yyyy) 12. Sex Male Female 13. City or Town of Birth 14. Country of Birth 15. Current City or Town of Residence (if living) 16. Current Country of Residence (if living) 17. Date of Marriage to Current Spouse (mm/dd/yyyy) 18. City or Town 19. State or Province 19. State or Province 10. State or Province 11. Date of Marriage to Current Spouse 12. Sex Male Female 13. City or Town of Birth 14. Country of Birth 15. Current City or Town of Residence (if living) 16. Current Country of Residence (if living) 17. Date of Marriage to Current Spouse 18. State or Province 19. State or Province 19. State or Province	9.b.		4.c.	Middle Name
Parent 2's Name at Birth (if different than above) 10.a. Family Name (Last Name) 10.b. Given Name (First Name) 10.c. Middle Name 11. Date of Birth (mm/dd/yyyy) 12. Sex	9.c.		5.	A-Number (if any)
10.a. Family Name (Last Name) 10.b. Given Name (First Name) 10.c. Middle Name 11. Date of Birth (mm/dd/yyyy) 12. Sex Male Female 13. City or Town of Birth 14. Country of Birth 15. Current City or Town of Residence (if living) 16. Current Spouse's Date of Birth (mm/dd/yyyy) 7. Date of Marriage to Current Spouse (mm/dd/yyy) 8.a. City or Town 8.b. State or Province 16. Current City or Town of Residence (if living) Place of Marriage to Current Spouse 9.a. City or Town 16. Current Country of Residence (if living) 9.b. State or Province				► A-
Current Spouse of Birth Current Country of Residence (if living) Current Country of Residence (if living) Place of Province State or Province Current Spouse State or Province State or Provin			6.	Current Spouse's Date of Birth (mm/dd/yyyy)
7. Date of Marriage to Current Spouse (mm/dd/yyyy) 10.c. Middle Name Current Spouse's Place of Birth 8.a. City or Town 12. Sex	10.a.			
Current Spouse's Place of Birth 8.a. City or Town 12. Sex	10.b.		7.	Date of Marriage to Current Spouse (mm/dd/yyyy)
11. Date of Birth (mm/dd/yyyy) 12. Sex	10.c.	Middle Name		
8.a. City or Town 12. Sex	11.	Date of Birth (mm/dd/yyyy)		•
13. City or Town of Birth 14. Country of Birth 15. Current City or Town of Residence (if living) 16. Current Country of Residence (if living) 17. State or Province 18. State or Province 18. Description: 19. State or Province 19. State or Province 19. State or Province	10		8.a.	City or Town
14. Country of Birth 15. Current City or Town of Residence (if living) 16. Current Country of Residence (if living) 9.a. City or Town 9.b. State or Province				
15. Current City or Town of Residence (if living) Place of Marriage to Current Spouse 9.a. City or Town 9.b. State or Province	13.	City or Town of Birth	8.b.	State or Province
15. Current City or Town of Residence (if living) Place of Marriage to Current Spouse 9.a. City or Town 9.b. State or Province				
9.a. City or Town 9.b. State or Province	14.	Country of Birth	8.c.	Country
9.a. City or Town 9.b. State or Province				
16. Current Country of Residence (if living) 9.b. State or Province	15.	Current City or Town of Residence (if living)	Place	e of Marriage to Current Spouse
9.b. State or Province			9.a.	City or Town
	16.	Current Country of Residence (if living)		
Part 5. Information About Your Marital History 9.c. Country			9.b.	State or Province
Part 5. Information About Your Marital History 9.c. Country	_			
	Par	t 5. Information About Your Marital History	9.c.	Country
1. What is your current marital status?	1.	What is your current marital status?		
Single, Never Married Married Divorced 10. Is your current spouse applying with you?		Single, Never Married Married Divorced	10.	Is your current spouse applying with you?
☐ Widowed ☐ Marriage Annulled ☐ Yes		☐ Widowed ☐ Marriage Annulled		Yes No
Legally Separated		Legally Separated		
2. If you are married, is your spouse a current member of the	2.	• •		
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/yyyy)
13.	Date of Marriage to Prior Spouse (mm/dd/yyyy)
Place	of Marriage to Prior Spouse
14.a.	City or Town
14.b.	State or Province
14.c.	Country
15.	Date Marriage with Prior Spouse Legally Ended (mm/dd/yyyy)
Dlago	Where Marriage with Prior Spouse Legally Ended
	City or Town
16.b.	State or Province
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

Curr	ent Legal Name	
2.a.	Family Name	

(Last Name)

2.b.	Given Name (First Name)			
2.c.	Middle Name			
3.	A-Number (if a	any)		
		► A-		
4.	Date of Birth (mm/dd/yyyy)		
5.	Country of Bir	th		
6.	Is this child app	plying with you?	Yes	No

Current Legal Name

- 7.a. Family Name (Last Name)
 7.b. Given Name
- (First Name)
- **8.** A-Number (if any)

7.c. Middle Name

► A-	
► A-	

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

10.	Country of Birth

A-Number ► A-					
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	t 6. Information About Your Childrentinued)		t 8. General Eligibility and In ounds	admissibility
12.a. 12.b. 12.c.	Family Name (Last Name) Given Name (First Name) Middle Name A-Number (if any)	Num this s Info	Have you EVER been a member of, is any way associated with any organizar fund, foundation, party, club, society, the United States or in any other locate including any military service? The unaswered "Yes" to Item Number 1. , the state of the space provided in Part transion . If you answered "No," but an ever, provide an explanation of the event the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided in Part 14. Additional states of the space provided	ation, association, or similar group in tion in the world Yes No complete Item ra space to complete 14. Additional re unsure of your s and circumstances
14.	Date of Birth (mm/dd/yyyy)	Orga	nization 1	
15.	Country of Birth	2.	Name of Organization	
16.	Is this child applying with you? Yes	3.a.	City or Town	
Par	t 7. Biographic Information	3.b.	State or Province	
1.	Ethnicity (Select only one box)			
_,	Hispanic or Latino	3.c.	Country	
	Not Hispanic or Latino			
2.	Race (Select all applicable boxes)	4.	Nature of Group	
4.	White			
	Asian	Date	s of Membership or Dates of Involvem	ent
	Black or African American	5.a.	From (mm/dd/yyyy)	
	American Indian or Alaska Native	<i>5</i> h	To (mm/dd/mm)	
	Native Hawaiian or Other Pacific Islander	5.D. 	To (mm/dd/yyyy)	
3.	Height Feet Incl	hes Orga	nization 2	
4.	Weight Pounds	─	Name of Organization	
5.	Eye Color (Select only one box)	7.a.	City or Town	
	Black Blue Brown			
	Gray Green Hazel	7.b.	State or Province	
6		wn/Other		
6.	Hair Color (Select only one box)	7.c.	Country	
	Bald (No hair) Black Blond			
	Brown Gray Red	8.	Nature of Group	
	Sandy White Unknow	wn/Other		

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	t 8. General Eligibility and Incounds (continued)	admissibility	20.	Have you EVER had a prior final order of exclusion, deportation, or removal reinstated? Yes No
Dates	s of Membership or Dates of Involvem	nent	21.	Have you EVER held lawful permanent resident status which was later rescinded? Yes No
	From (mm/dd/yyyy) To (mm/dd/yyyy)		22.	Have you EVER 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		••	TY
10.	Name of Organization		23.	Have you EVER applied for any kind of relief or protection from removal, exclusion, or deportation? Yes No
11.a.	City or Town		24.a	Have you EVER been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement?
11.b.	State or Province			Yes No
11.c.	Country		Nun	ou answered "Yes" to Item Number 24.a. , complete Item nbers 24.b 24.c. If you answered "No" to Item Number 1. , skip to Item Number 25.
			24.b	Have you complied with the foreign residence
12.	Nature of Group			requirement?
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 nees in the space ion. ion to the United Yes No to the United States? Yes No	ques other enfo have ques Unit "Yes Part that when (date exam	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 s" to Item Numbers 25 45., use the space provided in a 14. Additional Information to provide an explanation includes why you were arrested, cited, detained, or charged; re you were arrested, cited, detained, or charged; when the event occurred; and the outcome or disposition (for apple, no charges filed, charges dismissed, jail, probation, munity service).
17.	authorization? Have you EVER violated the terms of	Yes No	25.	Have you EVER 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 EVER exclusion, rescission, or deportation p			Coast Guard)? Yes No
19.	Have you EVER been issued a final deportation, or removal?	Yes No	26.	Have you EVER committed a crime of any kind (even if you were not arrested, cited, charged with, or tried for that crime)? Yes No
	asportation, or removal:	Yes No		

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			A-Number ► A-
	rt 8. General Eligibility and Inadmissibility ounds (continued)	35.	Have you EVER engaged in prostitution or are you coming to the United States to engage in prostitution? Yes No
27.	Have you EVER pled guilty to or been convicted of a crime or offense (even if the violation was subsequently expunged or sealed by a court, or if you were granted a pardon, amnesty, a rehabilitation decree, or other act of	36.	Have you EVER directly or indirectly procured (or attempted to procure) or imported prostitutes or persons for the purpose of prostitution? Yes No
	clemency)?	37.	Have you EVER received any proceeds or money from prostitution? Yes No
28.	a rehabilitation decree, or other act of clemency, provide documentation of that post-conviction action. Have you EVER been ordered punished by a judge or had conditions imposed on you that restrained your liberty (such as a prison sentence, suspended sentence, house arrest, parole, alternative sentencing, drug or alcohol treatment, rehabilitative programs or classes, probation, or	38. 39.	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 Have you EVER exercised immunity (diplomatic or otherwise) to avoid being prosecuted for a criminal
29.	community service)?	40.	offense in the United States? Yes No Have you EVER , while serving as a foreign government
	criminal proceeding (including pre-trial diversion, deferred prosecution, deferred adjudication, or any withheld adjudication)? Yes No	41.	official, been responsible for or directly carried out violations of religious freedoms? Yes No Have you EVER induced by force, fraud, or coercion (or
30.	Have you EVER violated (or attempted or conspired to violate) any controlled substance law or regulation of a state, the United States, or a foreign country?	41.	otherwise been involved in) the trafficking of persons for commercial sex acts? Yes No
31.	Yes No Have you EVER been convicted of two or more offenses (other than purely political offenses) for which the combined sentences to confinement were five years or	42.	Have you EVER trafficked a person into involuntary servitude, peonage, debt bondage, or slavery? Trafficking includes recruiting, harboring, transporting, providing, or obtaining a person for labor or services through the use of force, fraud, or coercion. Yes No
32.	more?	43.	Have you EVER knowingly aided, abetted, assisted, conspired, or colluded with others in trafficking persons for commercial sex acts or involuntary servitude, peonage, debt bondage, or slavery? Yes No
33.	Have you EVER knowingly aided, abetted, assisted, conspired, or colluded in the illicit trafficking of any illegal narcotic or other controlled substances? Yes No	44.	Are you the spouse, son or daughter of a foreign national who engaged in the trafficking of persons and have received or obtained, within the last five years, any financial or other benefits from the illicit activity of your process or your person although you know or received by
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		spouse or your parent, although you knew or reasonably should have known that this benefit resulted from the illicit activity of your spouse or parent? Yes No
	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?	45.	Have you EVER engaged in money laundering or have you EVER knowingly aided, assisted, conspired, or colluded with others in money laundering or do you seek to enter the United States to engage in such activity? Yes No

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Yes No

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

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Yes No

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	et 8. General Eligibility and Inadmissibility bunds (continued)	60. Have you EVER used any person under 15 years of age to take part in hostilities, or to help or provide services to people in combat? Yes No
53.	Have you EVER worked, volunteered, or otherwise served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons? Yes No	NOTE: If you answered "Yes" to any part of Item Numbers 52 60., explain what occurred, including the dates and location of the circumstances, in the space provided in Part 14. Additional Information.
54.	Have you EVER 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 No	Public Charge61. Are you subject to the public charge ground of inadmissibility under INA section 212(a)(4)?
55.	Have you EVER 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	Yes No If you answered "Yes" to Item Number 61., complete Item Numbers 62 68.d. below. If you answered "No" to Item Number 61., go to Item Number 69.a. If you need extra space to complete this section, use the space provided in Part 14. Additional Information.
56.	Have you EVER been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party (in the United States or abroad)? Yes No	62. What is the size of your household?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
	e you EVER ordered, incited, called for, committed, assisted, ed with, or otherwise participated in any of the following:	64. Identify the total value of your household assets.
58.b.	Acts involving torture or genocide? Yes No Killing any person? Yes No Intentionally and severely injuring any person?	\$18,401-136,000 \$136,001-321,400 \$321,401-707,100
58.d.	Yes No 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 Limiting or denying any person's ability to exercise	Over \$707,100
59.	religious beliefs? Yes No Have you EVER recruited, enlisted, conscripted, or used	

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Yes No

any person under 15 years of age to serve in or help an

armed force or group?

				TTTGING	<i>.</i> , 11		
rt 8 Ceneral	Eligibility and Ina	admissibility G	rounds (con	tinued)			
	<u> </u>	•	•		1 11 .1. 11	(')	
•	ll value of your househ		•		_		
S \$0 S	\$1-10,100	.01-57,700	\$57,701-	186,800	∫ Over \$	186,800	
What is the hig	hest degree or level of	school you have co	ompleted?				
Grades 1 th	arough 11 🔲 12 th g	grade - no diploma	High sch	ool diploma, Gl	ED, or alt	ernative credential	
1 or more y	vears of college credit,	no degree	Associate	e's degree	Bachel	or's degree	
Master's de	gree Profe	essional degree (JD	, MD, DMD, et	tc.)	Doctor	ate degree	
List your certifi	cations, licenses, skills	obtained through	work experienc	e, and education	nal certifi	cates.	
(TANF), or Star	received Supplemental te, Tribal, territorial, or ance" in the State cont	local, cash benefi	t programs for i	ncome mainten			
o. Have you ever i	received long-term inst	itutionalization at	government exp	pense?		Yes No	
•	to Item Number 68.a. dollar amount of bene		pecific benefit(s) you received,	the start	and end dates of each period of	
	Benefit Received	1	Start Date End			Dollar Amount	
I. If your answer t	to Item Number 68.b.	is "Yes," list the n	ame, city, and	state for each in	stitution,	the start and end dates of each	
period of institu	tionalization, and the i	reason you were in	stitutionalized.				
Institution	Name/City/State	Date Fron	1	Date To		Reason	

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	8. General Eligibility and Inadmissibility ands (continued)	Unite	e April 1, 1997, have you been unlawfully present in the ed States:				
Illego	al Entries and Other Immigration Violations	78.a.	For more than 180 days but less than a year, and then departed the United States? Yes No				
69.b. I	Have you EVER failed or refused to attend or to remain n attendance at any removal proceeding filed against you on or after April 1, 1997? Yes No ff your answer to Item Number 69.a. is "Yes," do you believe you had reasonable cause? Yes No	NOT you e admi	Yes No TE: You were unlawfully present in the United States if entered the United States without being inspected and tted or inspected and paroled, or if you legally entered the ed States but you stayed longer than permitted.				
V	If your answer to Item Number 69.b. is "Yes," attach a written statement explaining why you had reasonable cause.	Since	e April 1, 1997, have you EVER reentered or attempted to er the United States without being inspected and admitted roled after:				
71. H	Have you EVER submitted fraudulent or counterfeit documentation to any U.S. Government official to obtain or attempt to obtain any immigration benefit, including a visa or entry into the United States? Yes No Have you EVER lied about, concealed, or misrepresented	 79.a. Having been unlawfully present in the United States for more than one year in the aggregate? Yes Yes 79.b. Having been deported, excluded, or removed from the United States? Yes Yes 					
V U	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	<i>Mis</i> 80.	Do you plan to practice polygamy in the United States? Yes No				
73. H	Have you EVER falsely claimed to be a U.S. citizen (in writing or any other way)? Yes No Have you EVER been a stowaway on a vessel or aircraft arriving in the United States? Yes No	81.	Are you accompanying another foreign national who requires your protection or guardianship but who is inadmissible after being certified by a medical officer as being helpless from sickness, physical or mental disability, or infancy, as described in INA section 232(c)?				
75. A	Have you EVER knowingly encouraged, induced, assisted, abetted, or aided any foreign national to enter or to try to enter the United States illegally (alien smuggling)? Yes No Are you under a final order of civil penalty for violating	82.	☐ Yes ☐ No Have you EVER assisted in detaining, retaining, or withholding custody of a U.S. citizen child outside the United States from a U.S. citizen who has been granted custody of the child? ☐ Yes ☐ No				
Remo	NA section 274C for use of fraudulent documents? Yes No oval, Unlawful Presence, or Illegal Reentry Previous Immigration Violations	83. 84.	Have you EVER voted in violation of any Federal, state, or local constitutional provision, statute, ordinance, or regulation in the United States? Yes No Have you EVER renounced U.S. citizenship to avoid				
f U	Have you EVER been excluded, deported, or removed from the United States or have you ever departed the United States on your own after having been ordered excluded, deported, or removed from the United States? Yes No	Have	being taxed by the United States? Yes No You EVER: Applied for exemption or discharge from training or service in the U.S. armed forces or in the U.S. National				

Have you EVER entered the United States without being

inspected and admitted or paroled?

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Yes No

Security Training Corps on the ground that you are a

Yes No

foreign national?

Part 8. General Eligibi Grounds (continued)	lity and Inadmissibility	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 dischar on the ground that you a	ged from such training or service re a foreign national? Yes No		requesting.)					
86.a. Have you EVER left or	tion from the U.S. armed forces? Yes No remained outside the United training or service in the U.S.		10. Applicant's Statement, Contact mation, Declaration, Certification, and ature					
armed forces in time of v President to be a national	war or a period declared by the	NOTE: Read the Penalties section of the Form I-485 Instructions before completing this part. You must file Form I-485 while in the United States.						
your nationality or immi	gration status immediately before	Appli	cant's Statement					
permanent resident, noni	S. citizen or national, lawful immigrant, parolee, present role, or any other status)?		: Select the box for either Item Number 1.a. or 1.b. If ble, select the box for Item Number 2.					
Part 9. Accommodation Disabilities and/or Impa		1.a. [1.b. [I can read and understand English, and I have read and understand every question and instruction on this application and my answer to every question. The interpreter named in Part 11. read to me every question and instruction on this application and my 					
NOTE: Read the information before completing this part.	in the Form I-485 Instructions		answer to every question in					
1. Are you requesting an addisabilities and/or impair	ccommodation because of your rments? Yes No		a language in which I am fluent, and I understood everything.					
	o Item Number 1., select any Numbers 2.a 2.c. and provide	2.	At my request, the preparer named in Part 12. , prepared this application for me based only upon					
2.a. I am deaf or hard of following accommo	hearing and request the dation. (If you are requesting a		information I provided or authorized.					
	oreter, indicate for which ple, American Sign Language).):	Appli	cant's Contact Information					
	me, American Sign Language).).	3. [Applicant's Daytime Telephone Number					
<u> </u>		4. A	Applicant's Mobile Telephone Number (if any)					
2.b. I am blind or have lo following accommo	ow vision and request the dation:		Tr					
<i>C</i>		5. A	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	Interpreter'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)								

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Part 11. Interpreter's Contact Information	Preparer's Mailing Address
Certification, and Signature (continued)	3.a. Street Number and Name
Interpreter's Certification	3.b.
I certify, under penalty of perjury, that:	3.c. City or Town
I am fluent in English and which is the same language specified in Part 10., Item Numb 1.b. , and I have read to this applicant in the identified language	ber 3.d. State 3.e. ZIP Code
every question and instruction on this application and his or h	
answer to every question. The applicant informed me that he 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.	3.h. Country
Interpreter's Signature	Preparer's Contact Information
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)
Part 12. Contact Information, Declaration, and	6. Preparer's Email Address (if any)
Signature of the Person Preparing this Application, if Other Than the Applicant	o. Treparer's Email Address (If any)
	Duan anoula Statement
Provide the following information about the preparer.	Preparer's Statement
Preparer's Full Name	7.a. I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.
1.a. Preparer's Family Name (Last Name)	7.b. I am an attorney or accredited representative and
1.b. Preparer's Given Name (First Name)	my representation of the applicant in this case extends does not extend beyond the preparation of this application.
Preparer's Business or Organization Name (if any)	NOTE: If you are an attorney or accredited representative, you may be obliged to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, with this application.

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

Preparer's Certification

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

Preparer's Signature								
8.a.	Preparer's Signature (sign in ink)							
8.b.	Date of Signature (mm/dd/yyyy)							

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

Part 13. Signature at Interview

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

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							D 17 1		D. W.	_	Y
Pa	rt 14. Additi	ional I	nformatio	n		5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
within space to co sheet at the Num sign	u need extra spa in this application than what is promplete and file that of paper. Type the top of each shall ber, and Item Item Item Item Item Item Item Item	on, use to rovided, with thite or printed eet; indi Number	he space bel you may may application t your name cate the Pag	ow. If yo ake copies or attach and A-No e Numbe	ou need more s of this page a separate umber (if any) r, Part	5.d.					
	Family Name (Last Name)										
1.b.	Given Name (First Name)										
1.c.	Middle Name					6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
2.	A-Number (if	any) 🕨	A-			6.d.					
3.a.	Page Number	3.b.	Part Numbe	3.c.	Item Number	0.u.					
3.d.											
4.a. 4.d.	Page Number	4.b.	Part Numbe	r 4.c.	Item Number	7.a. 7.d.	Page Number	7.b.	Part Number	7.c.	Item Number

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