

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 02/28/2026

For USCIS Use Only								
Preference Category:			Recei	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: ☐		☐ INA 209(a) ☐ INA 209(b) ☐ INA 245(a) ☐ INA 245(i) ☐ INA 245(m)	f Law 249 3, Act of 9/1 1 Adjustment					
	To be c	ompleted by an	attorney	or accred	ited represe	ntative (if any).		
			Attorne (if appli		ar Number	Attorney or Accredited Representative USCIS Online Account Number (if any)		
NOTE TO ALL APPLIC. Instructions, U.S. Citizensh Part 1. Information for lawful permanent 1 Your Current Legal N nickname) 1.a. Family Name (Last Name)	ANTS: If y hip and Imm About Your residence)	you do not compl higration Services Ou (Person app	s (USCIS	3.a. 3.b. 3.c.	plication or for your applicate Family Nan (Last Name Given Nam (First Name	ne e e e e e e e e e e e e e e e e e e		
1.b. Given Name (First Name)					Given Nam (First Name			
1.c. Middle Name				4.c.	Middle Nar	ne		
Other Names You Have Used Since Birth (if					er Inform	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 the space pr	addition to providing your actual date of birth, other dates of birth you have used in with any legal names or non-legal names in rovided in Part 14. Additional Information .			
2.a. Family Name (Last Name)				6.	Sex [Male Female		
2.b. Given Name (First Name)				7.	City or Tow	n of Birth		
2.c. Middle Name								

			A-Number ► A-
Par	rt 1. Information About You (Person applying	Soc	cial Security Card
for 8.	lawful permanent residence) (continued) 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-	15.	Provide your U.S. Social Security Number (SSN). ▶ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
	NOTE: If you have EVER used other A-Numbers, include the additional A-Numbers in the space provided in Part 14. Additional Information.	16.	Do you want the SSA to issue you a Social Security card? (You must also answer "Yes" to Item Number 17. Consent for Disclosure , to receive a card). Yes No
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)	Red	cent Immigration History
12.b	Street Number and Name		ride the information for Item Numbers 18 24. if you last red the United States using a passport or travel document.
12.c.	Apt. Ste. Flr.	18.	Passport Number Used at Last Arrival
12.d	. City or Town	10	
12.e.	State 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	wu are applying based on the Violence Against Women Act WA) or as a special immigrant juvenile, human trafficking m (T nonimmigrant), or victim of a qualifying crime (U	21.	Country that Issued this Passport or Travel Document
abou	mmigrant) and you do not want USCIS to send notices 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)	Place	e of Last Arrival into the United States
		23.a	. City or Town
13.b	. Street Number and Name		
13.c.		23.b	. State

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13.d. City or Town

13.e. State

13.f. ZIP Code

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

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

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: 16 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) 28.a. Family Name (Last Name) 28.b. Given Name (First Name) 28.c. Middle Name	When	I last arrived in the United States, I:								
example, humanitarian parole, Cuban parole): Came into the United States without admission or parole. 25.d.	25.a.	example, exchange visitor; visitor, waived through;								
example, humanitarian parole, Cuban parole): Came into the United States without admission or parole. 25.d.										
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) 28.a. Family Name (Last Name) 28.b. Given Name (First Name)	25.b.									
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26.a. Form I-94 Arrival-Departure Record Number ▶	25.d.	Other:								
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any) 28.a. Family Name (Last Name) 28.b. Given Name (First Name)	27.									
any) 28.a. Family Name (Last Name) 28.b. Given Name (First Name)										
(Last Name) 28.b. Given Name (First Name)		de your name exactly as it appears on your Form I-94 (if								
(First Name)	28.a.									
28.c. Middle Name	28.b.									
	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	-		
1.a.	Fami	uv-b	ased

	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
Em	ployment-based
	Alien worker, Form I-140
	Alien entrepreneur, Form I-526
Spe	cial 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
Asy	elee or Refugee
	Asylum status (INA section 208), Form I-589 or Form I-730
	Refugee status (INA section 207), Form I-590 or Form I-730
	Spee

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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Part 2. Application Type or Filing Category (continued)

1.f. Special Programs Based on Certain Public Laws The Cuban Adjustment Act The Cuban Adjustment Act for battered spouses and children Dependent status under the Haitian Refugee Immigrant Fairness Act Dependent status under the Haitian Refugee Immigrant Fairness Act for battered spouses and children Lautenberg Parolees Diplomats or high ranking officials unable to return home (Section 13 of the Act of September 11, 1957) Indochinese Parole Adjustment Act of 2000 1.g. Additional Options Diversity Visa program Continuous residence in the United States since before January 1, 1972 ("Registry") Individual born in the United States under diplomatic status Other eligibility 2. Are you applying for adjustment based on the Immigration and Nationality Act (INA) section 245(i)? Yes No NOTE: If you answered "Yes" to Item Number 2., you must have selected a family-based, employment-based, special immigrant, or Diversity Visa immigrant category

NOTE: If you answered "Yes" to **Item Number 2.**, you must have selected a family-based, employment-based, special immigrant, or Diversity Visa immigrant category listed above in **Item Numbers 1.a. - 1.g.** as the basis for your application for adjustment of status. Fill out the rest of this application **and** Supplement A to Form I-485, Adjustment of Status Under Section 245(i) (Supplement A). For detailed filing instructions, read the Form I-485 Instructions (including any **Additional Instructions** that relate to the immigrant category that you selected in **Item Numbers 1.a. - 1.g.**) and Supplement A Instructions.

Information About Your Immigrant Category

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

infor	rmation.
3.	Receipt Number of Underlying Petition (if any)
4.	Priority Date from Underlying Petition (if any)
	(mm/dd/yyyy)
child	ou are a derivative applicant (the spouse or unmarried lunder 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)
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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	A-Number ► A-								
Part 3. Additional Information About You (continued)	Provide your most recent address outside the United States where you lived for more than one year (if not already listed above).								
Address History	9.a. Street Number and Name								
Provide physical addresses for everywhere you have lived during the last five years, whether inside or outside the United States. Provide your current address first. If you need extra space to complete this section, use the space provided in Part 14. Additional Information .	9.b.								
Physical Address 1 (current address)									
5.a. Street Number and Name	9.f. Province9.g. Postal Code								
5.b. Apt. Ste. Flr.	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)	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 .								
6.b. To (mm/dd/yyyy)	Employer 1 (current or most recent)								
Physical Address 2	11. Name of Employer or Company								
7.a. Street Number and Name									
7.b.	Address of Employer or Company								
7.c. City or Town	12.a. Street Number and Name								
7.d. State 7.e. ZIP Code	12.b.								
7.f. Province	12.c. City or Town								
7.g. Postal Code	12.d. State 12.e. ZIP Code								
7.h. Country	12.f. Province								
	12.g. Postal Code								
Dates of Residence	12.h. Country								
8.a. From (mm/dd/yyyy)									
8.b. To (mm/dd/yyyy)	13. Your Occupation								

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Part 3. Additional Information About You	Address of Employer or Company							
(continued)	20.a. Street Number and Name							
Dates of Employment	20.b. Apt. Ste. Flr.							
14.a. From (mm/dd/yyyy)	20.c. City or Town							
14.b. To (mm/dd/yyyy)	20.d. State 20.e. ZIP Code							
Employer 2	20.f. Province							
15. Name of Employer or Company	20.g. Postal Code							
	20.h. Country							
Address of Employer or Company	Zo.ii. 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)							
	22.b. To (mm/dd/yyyy)							
16.f. Province								
16.g. Postal Code	Part 4. Information About Your Parents							
16.h. Country	Information About Your Parent 1							
17 Vous Occupation	Parent 1's Legal Name							
17. Your Occupation	1.a. Family Name							
Dates of Employment	(Last Name) 1.b. Given Name							
18.a. From (mm/dd/yyyy)	(First Name)							
	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-				——————————————————————————————————————
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) 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)
	Where Marriage with Prior Spouse Legally Ended
16.a.	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 any)

► A-	
------	--

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

5.	Country of Birth

6. Is this child applying with you?

Yes	No
-----	----

Child 2

10.

Current Legal Name

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

r +=

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

Country of Birth

		\neg
		- 1

11. Is this child applying with you?

A-Number	\blacktriangleright	A-				

	t 6. Information About Your Chatinued)		t 8. General Eligibility and In ounds	admissibility
12.a. 12.b. 12.c.	ent Legal Name Family Name (Last Name) Given Name (First Name) Middle Name A-Number (if any)	Num this s Infor	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 rmation . If you answered "No," but are, provide an explanation of the event as space provided in Part 14. Additional	tion, association, or similar group in tion in the world Yes No No complete Item ra space to complete 14. Additional te 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 No 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	
	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	5 h	To (mm/dd/mm)	
	Native Hawaiian or Other Pacific Isla	ander	To (mm/dd/yyyy)	
3.	Height Feet	Inches Orga	nization 2	
4.	Weight Pou	unds	Name of Organization	
		unds		
5.	Eye Color (Select only one box)	7.a.	City or Town	
		Brown		
		Tazel 7.b.	State or Province	
<i>(</i>		Jnknown/Other		
6.	Hair Color (Select only one box)	7.c.	Country	
		Blond		
		Red 8.	Nature of Group	
	Sandy White U	Jnknown/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-
	t 8. General Eligibility and Inadmissibility bunds (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	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
	treatment, rehabilitative programs or classes, probation, or community service)? Yes No	37.	otherwise) to avoid being prosecuted for a criminal offense in the United States? Yes No
29.	Have you EVER been a defendant or the accused in a criminal proceeding (including pre-trial diversion, deferred prosecution, deferred adjudication, or any withheld adjudication)? Yes No	40.	Have you EVER , while serving as a foreign government official, been responsible for or directly carried out violations of religious freedoms? Yes No 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 more? Yes No	42.	Have you EVER trafficked a person into involuntary servitude, peonage, debt bondage, or slavery? Trafficking includes recruiting, harboring, transporting, providing, or obtaining a person for labor or services through the use of force, fraud, or coercion. Yes No
32.	Have you EVER illicitly (illegally) trafficked or benefited from the trafficking of any controlled substances, such as chemicals, illegal drugs, or narcotics? Yes No	43.	Have you EVER knowingly aided, abetted, assisted, conspired, or colluded with others in trafficking persons for commercial sex acts or involuntary servitude, peonage, debt bondage, or slavery? Yes No
33. 34.	Have you EVER knowingly aided, abetted, assisted, conspired, or colluded in the illicit trafficking of any illegal narcotic or other controlled substances? Yes No Are you the spouse, son, or daughter of a foreign national	44.	Are you the spouse, son or daughter of a foreign national who engaged in the trafficking of persons and have received or obtained, within the last five years, any financial or other benefits from the illicit activity of your spouse or your parent, although you knew or reasonably should have known that this benefit resulted from the illicit
	who illicitly trafficked or aided (or otherwise abetted, assisted, conspired, or colluded) in the illicit trafficking of a controlled substance, such as chemicals, illegal drugs, or narcotics and you obtained, within the last five years, any financial or other benefit from the illegal activity of your spouse or parent, although you knew or reasonably should have known that the financial or other benefit resulted from the illicit activity of your spouse or parent?	45.	Activity of your spouse or parent? Yes No Have you EVER engaged in money laundering or have you EVER knowingly aided, assisted, conspired, or colluded with others in money laundering or do you seek to enter the United States to engage in such activity? Yes No

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Part 8. General Eligibility and Inadmissibility Grounds (continued)	48.e. Provided money, a thing of value, services or labor, or any other assistance or support for an individual, group, or organization who did any of the activities described in Item Number 48.a.?
Security and Related	
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	
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 46.e. Engage in any other unlawful activity? Yes No	51.b. Participated in, or been a member or a representative of a group or organization that did any of the activities described in Item Number 51.a. ?
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	Yes No
for a group or organization that did any of the activities described in Item Number 48.a. ? Yes No	NOTE: If you answered "Yes" to any part of Item Number 51. , explain the relationship and what occurred, including the dates and location of the circumstances, in the space provided
48.d. Provided money, a thing of value, services or labor, or any other assistance or support for any of the activities	in Part 14. Additional Information.
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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			A-Number ► A-					
	t 8. General Eligibility and Inadmissibility ounds (continued)	60. Have you EVER used any person under 15 years of a to take part in hostilities, or to help or provide service people in combat?						
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	52 60 location	Yes No If you answered "Yes" to any part of Item Numbers In of the circumstances, in the space provided in Part 14. In onal 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?	<i>Public Charge</i>61. Are you subject to the public charge ground of						
	Yes No	ir	nadmissibility under INA section 212(a)(4)? Yes No					
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	Number Number to comp	answered "Yes" to Item Number 61., complete Item ers 62 68.d. below. If you answered "No" to Item er 61., go to Item Number 69.a. If you need extra space plete this section, use the space provided in Part 14. conal 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)?	62. V	What is the size of your household?					
	Yes No	63. In	ndicate your annual household income.					
57.	During the period from March 23, 1933 to May 8, 1945, did you ever order, incite, assist, or otherwise participate in the persecution of any person because of race, religion, national origin, or political opinion, in association with either the Nazi government of Germany or any organization or government associated or allied with the Nazi government of Germany? Yes No	[] [] []	\$0-27,000 \$27,001-52,000 \$52,001-85,000 \$85,001-141,000 Over \$141,000					
	you EVER ordered, incited, called for, committed, assisted, and with, or otherwise participated in any of the following:		dentify the total value of your household assets. \$\textstyle \text{ \$0-18,400}\$					
58.a.	Acts involving torture or genocide?		\$18,401-136,000					
58.b.	Killing any person?		\$136,001-321,400					
58.c.	Intentionally and severely injuring any person? Yes No		\$321,401-707,100 Over \$707,100					
58.d.	Engaging in any kind of sexual contact or relations with any person who did not consent or was unable to consent, or was being forced or threatened? Yes No							
58.e.	Limiting or denying any person's ability to exercise religious beliefs? Yes No							
59.	Have you EVER recruited, enlisted, conscripted, or used any person under 15 years of age to serve in or help an armed force or group? Yes No							

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rt 8. General Eligibility and Inc	admissibility Groun	ds (continued)		
Identify the total value of your househ			ared liabilities).	
•		\$57,701-186,800	Over \$186,800	
	_	_		
What is the highest degree or level of Grades 1 through 11 12 th s	<u>-</u>	tea <i>?</i> High school diploma, G	ED or alternative crede	ntial
1 or more years of college credit,	_	Associate's degree	Bachelor's degree	iitiai
	essional degree (JD, MD,	0 =	Doctorate degree	
List your certifications, licenses, skills				
List your certifications, needses, skins	ootamed unough work	experience, and education	mar certificates.	
Have you ever received Supplemental (TANF), or State, Tribal, territorial, or "General Assistance" in the State cont	r local, cash benefit progr	rams for income mainten		Yes \[\] No
. Have you ever received long-term inst	titutionalization at govern	nment expense?		Yes No
. If your answer to Item Number 68.a.	is "Yes." list the specific	: benefit(s) you received	. the start and end dates	of each period
receipt, and the dollar amount of bene	-	, concin(s) you received	, the start and the dates	or cach period
Benefit Received	Start D	ate End Da	ate Dollar	r Amount
I. If your answer to Item Number 68.b.	is "Vas" list the name	vity and state for each in	estitution the start and a	nd dates of and
period of institutionalization, and the			istitution, the start and e	nu uates of eac.
Institution Name/City/State	Date From	Date To	Reaso	n
	2 1	20020	120050	
				

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	et 8. General Eligibility and Inadmissibility bunds (continued)	Since April 1, 1997, have you been unlawfully present in the United States:				
	gal 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				
	Have you EVER failed or refused to attend or to remain in attendance at any removal proceeding filed against you	78.b. For one year or more and then departed the United States Yes No				
69.b.	on or after April 1, 1997?	NOTE: You were unlawfully present in the United States if you entered the United States without being inspected and admitted or inspected and paroled, or if you legally entered the United States but you stayed longer than permitted.				
69.c.	If your answer to Item Number 69.b. is "Yes," attach a written statement explaining why you had reasonable cause.	Since April 1, 1997, have you EVER reentered or attempted to reenter the United States without being inspected and admitted or paroled after:				
70.	Have you EVER submitted fraudulent or counterfeit documentation to any U.S. Government official to obtain or attempt to obtain any immigration benefit, including a	79.a. Having been unlawfully present in the United States for more than one year in the aggregate? Yes No				
= 4	visa or entry into the United States? Yes No	79.b. Having been deported, excluded, or removed from the United States? Yes No				
71.	Have you EVER lied about, concealed, or misrepresented any information on an application or petition to obtain a visa, other documentation required for entry into the	Miscellaneous Conduct				
	United States, admission to the United States, or any other kind of immigration benefit? Yes No	80. Do you plan to practice polygamy in the United States? Yes No				
72.	Have you EVER falsely claimed to be a U.S. citizen (in writing or any other way)? Yes No	81. Are you accompanying another foreign national who requires your protection or guardianship but who is				
73.	Have you EVER been a stowaway on a vessel or aircraft arriving in the United States? Yes No	inadmissible after being certified by a medical officer as being helpless from sickness, physical or mental disability, or infancy, as described in INA section 232(c)				
74.	Have you EVER knowingly encouraged, induced, assisted, abetted, or aided any foreign national to enter or to try to enter the United States illegally (alien	Yes No				
75	smuggling)?	withholding custody of a U.S. citizen child outside the United States from a U.S. citizen who has been granted				
75.	Are you under a final order of civil penalty for violating INA section 274C for use of fraudulent documents?	custody of the child? Yes No 83. Have you EVER voted in violation of any Federal, state.				
Ren	☐ Yes ☐ No noval, Unlawful Presence, or Illegal Reentry	or local constitutional provision, statute, ordinance, or regulation in the United States? Yes No				
Afte	er Previous Immigration Violations	84. Have you EVER renounced U.S. citizenship to avoid				
76.	Have you EVER been excluded, deported, or removed from the United States or have you ever departed the	being taxed by the United States? Yes No				
	United States on your own after having been ordered excluded, deported, or removed from the United States?	Have you EVER :				
77.	Yes No Have you EVER entered the United States without being	85.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 a				

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Yes No

inspected and admitted or paroled?

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	Instruc	: Read the Penalties section of the Form I-485 tions before completing this part. You must file Form 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
		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	erpreter's Full Name									
1.a.	Interpreter's Family Name (Last Name)									
1.b.	Interpreter's Given Name (First Name)									
2.	Interpreter's Business or Organization Name (if any)									
Inte	erpreter's Mailing Address									
3.a.	Street Number and Name									
3.b.	Apt. Ste. Flr.									
3.c.	City or Town									
3.d.	State 3.e. ZIP Code									
3.f.	Province									
3.g.	Postal Code									
3.h.	Country									
Inte	erpreter's Contact Information									
4.	Interpreter's Daytime Telephone Number									
5.	Interpreter's Mobile Telephone Number (if any)									
6.	Interpreter's Email Address (if any)									

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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.
certify, under penalty of perjury, that: am fluent in English and , which is the same language specified in Part 10., Item Number 1.b., and I have read to this applicant in the identified language every question and instruction on this application and his or her answer to every question. The applicant informed me that he or she understands every instruction, question, and answer on the	3.c. City or Town 3.d. State 3.e. ZIP Code 3.f. Province 3.g. Postal Code
application, including the Applicant's Declaration and Certification, and has verified the accuracy of every answer.	3.h. Country
Interpreter's Signature 7.a. Interpreter's Signature (sign in ink) 7.b. Date of Signature (mm/dd/yyyy)	 Preparer's Contact Information 4. Preparer's Daytime Telephone Number 5. Preparer's Mobile Telephone Number (if any)
Part 12. Contact Information, Declaration, and Signature of the Person Preparing this Application, if Other Than the Applicant	6. Preparer's Email Address (if any)
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.
I.a. Preparer's Family Name (Last Name) I.b. Preparer's Given Name (First Name)	7.b. I am an attorney or accredited representative and my representation of the applicant in this case extends does not extend beyond the preparation of this application.
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.

Pre	parer's Signature	
8.a.	Preparer's Signature (sign in ink)	
	Coffee	
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,									
rue, 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)									
esses estates a argumento (argum mino)									

Pa	rt 14. Additional Information	5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
withis space to co sheet at the Num	u need extra space to provide any additional information in this application, use the space below. If you need more than what is provided, you may make copies of this page mplete and file with this application or attach a separate to f paper. Type or print your name and A-Number (if any) to top of each sheet; indicate the Page Number, Part aber, and Item Number to which your answer refers; and and date each sheet.	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 Number 3.c. Item Number	v.u.					
3.d.							
4.a. 4.d.	Page Number 4.b. Part Number 4.c. Item Number	7.a. 7.d.	Page Number	7.b.	Part Number	7.c.	Item Number

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