

Application to Register Permanent Residence or Adjust Status

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-485 OMB No. 1615-0023

Expires 03/31/2023 For USCIS Use Only Receipt **Action Block Preference Category:** Country Chargeable: **Priority Date:** Date Form I-693 Received: Section of Law □ Interview ☐ Applicant ☐ INA 249 ☐ INA 209(a) Interviewed Waived ☐ Sec. 13, Act of 9/11/57 ☐ INA 209(b) Initial Interview: ☐ INA 245(a) ☐ Cuban Adjustment Act Lawful Permanent ☐ INA 245(i) Other Resident as of: ☐ INA 245(m) To be completed by an attorney or accredited representative (if any). Select this box if Volag Number **Attorney State Bar Number** Attorney or Accredited Representative Form G-28 is (if applicable) USCIS Online Account Number (if any) (if any) attached. START HERE - Type or print in black ink. A-Number ▶ NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, U.S. Citizenship and Immigration Services (USCIS) may deny your application. Family Name Part 1. Information About You (Person applying (Last Name) for lawful permanent residence) Given Name (First Name) Your Current Legal Name (do not provide a Middle Name nickname) **1.a.** Family Name **4.a.** Family Name (Last Name) (Last Name) Given Name Given Name 1.b. (First Name) (First Name) 1.c. Middle Name **4.c.** Middle Name Other Names You Have Used Since Birth (if Other Information About You applicable) 5. Date of Birth (mm/dd/yyyy) **NOTE:** Provide all other names you have ever used, including **NOTE:** In addition to providing your actual date of birth, your family name at birth, other legal names, nicknames, include any other dates of birth you have used in aliases, and assumed names. If you need extra space to connection with any legal names or non-legal names in complete this section, use the space provided in Part 14. the space provided in Part 14. Additional Information. Additional Information. Family Name 6. Sex Male Female (Last Name) Given Name 7. 2.b. City or Town of Birth

(First Name)

2.c. Middle Name

			A-Number ► A-
	t 1. Information About You (Person applying	Soc	ial 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	A	If you answered "Yes," provide the information requested in Item Number 15.
10.	Alien Registration Number (A-Number) (if any)	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).
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
U.S.	. Mailing Address		Social Security Card.
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 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	Travel Document Number Used at Last Arrival
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
	a are applying based on the Violence Against Women Act	21	(mm/dd/yyyy)
	WA) or as a special immigrant juvenile, human trafficking n (T nonimmigrant), or victim of a qualifying crime (U	21.	Country that Issued this Passport or Travel Document
nonir about	nmigrant) and you do not want USCIS to send notices a this application to your home, you may provide an native and/or safe mailing address.	22.	Nonimmigrant Visa Number from this Passport (if any)
	In Care Of Name (if any)	Place	e of Last Arrival into the United States
10	In care of Hame (if any)		. City or Town
13.b.	Street Number		
13.c.	and Name	23.b.	. State
13.d.	City or Town	24.	Date of Last Arrival (mm/dd/yyyy)

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13.f. ZIP Code

13.e. State

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Part 2. Application Type or Filing Category Part 1. Information About You (Person applying for lawful permanent residence) (continued) **NOTE:** Attach a copy of the Form I-797 receipt or approval notice for the underlying petition or application, as appropriate. When I last arrived in the United States, I: I am applying to register lawful permanent residence or adjust **25.a.** Was inspected at a port of entry and admitted as (for status to that of a lawful permanent resident based on the example, exchange visitor; visitor, waived through; following immigrant category (select only one box). (See the temporary worker; student): Form I-485 Instructions for more information, including any Additional Instructions that relate to the immigrant category you select.): **25.b.** Was inspected at a port of entry and paroled as (for example, humanitarian parole, Cuban parole): 1.a. Family-based Immediate relative of a U.S. citizen, Form I-130 **25.c.** Came into the United States without admission or Other relative of a U.S. citizen or relative of a lawful parole. permanent resident under the family-based preference categories, Form I-130 25.d. Other: Person admitted to the United States as a fiancé(e) or child of a fiancé(e) of a U.S. citizen, Form I-129F If you were issued a Form I-94 Arrival-Departure Record Number: (K-1/K-2 Nonimmigrant) 26.a. Form I-94 Arrival-Departure Record Number Widow or widower of a U.S. citizen, Form I-360 VAWA self-petitioner, Form I-360 26.b. Expiration Date of Authorized Stay Shown on Form I-94 1.b. Employment-based (mm/dd/yyyy) Alien worker, Form I-140 26.c. Status on Form I-94 (for example, class of admission, or Alien entrepreneur, Form I-526 paroled, if paroled) 1.c. Special Immigrant Religious worker, Form I-360 What is your current immigration status (if it has changed 27. Special immigrant juvenile, Form I-360 since your arrival)? Certain Afghan or Iraqi National, Form I-360 or Form DS-157

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

1.e. Human Trafficking Victim or Crime Victim

Form I-360

Form I-730

Form I-730

1.d. Asylee or Refugee

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

Certain international broadcaster, Form I-360

Asylum status (INA section 208), Form I-589 or

Refugee status (INA section 207), Form I-590 or

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Certain G-4 international organization or family

member or NATO-6 employee or family member,

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Provide your name exactly as it appears on your Form I-94 (if

any)

28.a. Family Name

28.b. Given Name

28.c. Middle Name

(Last Name)

(First Name)

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Part 2. Application Type or Filing Category (continued)		Information About Your Immigrant Category If you are the principal applicant, provide the following			
1.f.	Special Programs Based on Certain Public Laws	infor	mation.		
	The Cuban Adjustment Act	3.	Receipt Number of Underlying Petition (if any)		
	The Cuban Adjustment Act for battered spouses and				
	children	4.	Priority Date from Underlying Petition (if any)		
	Dependent status under the Haitian Refugee Immigrant Fairness Act	If yo	(mm/dd/yyyy) u are a derivative applicant (the spouse or unmarried		
	Dependent status under the Haitian Refugee Immigrant Fairness Act for battered spouses and children	child	under 21 years of age of a principal applicant), provide the wing information for the principal applicant .		
		Princ	cipal Applicant's Name		
	Lautenberg Parolees	5.a.	Family Name (Last Name)		
	Diplomats or high ranking officials unable to return home (Section 13 of the Act of September 11, 1957)	5.b.	Given Name (First Name)		
	☐ Indochinese Parole Adjustment Act of 2000	5.c.	Middle Name		
1.g.	Additional Options				
	☐ Diversity Visa program	6.	Principal Applicant's A-Number (if any) • A-		
	Continuous residence in the United States since before January 1, 1972 ("Registry")	7.	Principal Applicant's Date of Birth		
	☐ Individual born in the United States under diplomatic		(mm/dd/yyyy)		
	status	8.	Receipt Number of Principal's Underlying Petition (if any)		
	Other eligibility				
2.	Are you applying for adjustment based on the Immigration and Nationality Act (INA) section 245(i)?	9.	Priority Date of Principal Applicant's Underlying Petition (if any) (mm/dd/yyyy)		
	☐ Yes ☐ No	Par	et 3. Additional Information About You		
	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	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.		
	Numbers 1.a 1.g.) and Supplement A Instructions.		tion of U.S. Embassy or U.S. Consulate		
		2.a.	City		
		2.b.	Country		
		3.	Decision (for example, approved, refused, denied,		

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4.

withdrawn)

Date of Decision (mm/dd/yyyy)

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Part 3. Additional Information About You (continued)	Provide your most recent address outside the United States where you lived for more than one year (if not already listed above).
Address History	9.a. Street Number and Name
Provide physical addresses for everywhere you have lived during the last five years, whether inside or outside the United States. Provide your current address first. If you need extra	9.b.
space to complete this section, use the space provided in Part 14. Additional Information .	9.c. City or Town
Physical Address 1 (current address)	9.d. State 9.e. ZIP Code
5.a. Street Number and Name	9.f. Province
5.b.	9.g. Postal Code
5.c. City or Town	9.h. Country
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
Data of Davidson	Provide your employment history for the last five years, whether inside or outside the United States. Provide the most
Dates of Residence	recent employment first. If you need extra space to complete
6.a. From (mm/dd/yyyy)	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. Apt. Ste. Flr.	Address of Employer or Company 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
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 20.a. Street Number
(continued)	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
Address of Employer or Company	20.h. Country
16.a. Street Number and Name	21. Your Occupation
16.b. Apt. Ste. Flr.	21. Four occupation
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	Part 4. Information About Your Parents
16.h. Country	
	Information About Your Parent 1
17. Your Occupation	Parent 1's Legal Name 1.a. Family Name
	(Last Name)
Dates of Employment	1.b. Given Name (First Name)
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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_		3.	How many times have you been married (including
	t 4. Information About Your Parents atinued)	J.	annulled marriages and marriages to the same person)?
	,		
7.	Current City or Town of Residence (if living)	Infe	ormation About Your Current Marriage
			luding if you are legally separated)
8.	Current Country of Residence (if living)	,	u are currently married, provide the following information
		-	t your current spouse.
Info	rmation About Your Parent 2	Curre	ent Spouse's Legal Name
Paren	t 2's Legal Name	4.a.	Family Name (Last Name)
9.a.	Family Name (Last Name)	4.b.	Given Name (First Name)
9.b.	Given Name (First Name)	4.c.	Middle Name
9.c.	Middle Name	5.	A-Number (if any)
	t 2's Name at Birth (if different than above)		→ A-
	Family Name	6.	Current Spouse's Date of Birth (mm/dd/yyyy)
10 L	(Last Name)	T	
10.0.	Given Name (First Name)	7.	Date of Marriage to Current Spouse (mm/dd/yyyy)
10.c.	Middle Name	ノし	
11.	Date of Birth (mm/dd/yyyy)		ent Spouse's Place of Birth
10	Car Mala Especia	8.a.	City or Town
12.	Sex Male Female		
13.	City or Town of Birth	8.b.	State or Province
14.	Country of Birth	8.c.	Country
14.	Country of Birth	o.c.	Country
15.	Current City or Town of Residence (if living)	Place	e of Marriage to Current Spouse
			City or Town
16.	Current Country of Residence (if living)		
		9.b.	State or Province
Par	t 5. Information About Your Marital History	9.c.	Country
1.	What is your current marital status?		
	Single, Never Married Married Divorced	10.	Is your current spouse applying with you?
	☐ Widowed ☐ Marriage Annulled		Yes No
	Legally Separated		
2.	If you are married, is your spouse a current member of the U.S. armed forces or U.S. Coast Guard?		
	N/A Yes No		

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Part 5. Information About Your Marital History (continued)

Information About Prior Marriages (if any)

If you have been married before, whether in the United States or in any other country, provide the following information about your prior spouse. If you have had more than one previous marriage, use the space provided in Part 14. Additional **Information** to provide the information below.

Prior Spouse's Legal Name (provide family name before marriage)

11.a.	Family Name (Last Name)
11.b.	Given Name (First Name)
11.c.	Middle Name
12.	Prior Spouse's Date of Birth (mm/dd/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
	19/1/6
14.c.	Country
15.	Date Marriage with Prior Spouse Legally Ended
	(mm/dd/yyyy)
Place	Where Marriage with Prior Spouse Legally Ended
16.a.	City or Town
16.b.	State or Province
16.c.	Country
	L

Part 6. Information About Your Children

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.

If yo	by have more than three children, use the space provided in the sp		
Child Curr	d 1 ent Legal Name		
	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		
Chile	12		
Curr	ent Legal Name		
7.a.	Family Name (Last Name)		
7.b.	Given Name (First Name)		
7.c.	Middle Name		
8.	A-Number (if any)		
	► A-		
9.	Date of Birth (mm/dd/yyyy)		
10.	Country of Birth		
11.	Is this child applying with you? Yes No		

	A-Number ► A-
Part 6. Information About Your Children (continued)	Part 8. General Eligibility and Inadmissibility Grounds
Child 3 Current Legal Name 12.a. Family Name (Last Name) 12.b. Given Name (First Name) 12.c. Middle Name 13. A-Number (if any) A- 14. Date of Birth (mm/dd/yyyy)	1. Have you EVER been a member of, involved in, or in any way associated with any organization, association, fund, foundation, party, club, society, or similar group in the United States or in any other location in the world including any military service? Yes No If you answered "Yes" to Item Number 1., complete Item Numbers 2 13.b. below. If you need extra space to complete this section, use the space provided in Part 14. Additional Information. If you answered "No," but are unsure of your answer, provide an explanation of the events and circumstances in the space provided in Part 14. Additional Information. Organization 1
15. Country of Birth	2. Name of Organization
Part 7. Biographic Information 1. Ethnicity (Select only one box)	3.a. City or Town 3.b. State or Province 3.c. Country
☐ Hispanic or Latino ☐ Not Hispanic or Latino 2. Race (Select all applicable boxes) ☐ White ☐ Asian ☐ Plantage A Signar Agenting	4. Nature of Group Dates of Membership or Dates of Involvement
☐ Black or African American☐ American Indian or Alaska Native☐ Native Hawaiian or Other Pacific Islander	5.a. From (mm/dd/yyyy) 5.b. To (mm/dd/yyyy)
3. Height Feet Inches4. Weight Pounds I	Organization 2 6. Name of Organization
 Eye Color (Select only one box) Black Blue Brown Gray Green Hazel Maroon Pink Unknown/Other 	7.a. City or Town 7.b. State or Province

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8.

7.c. Country

Nature of Group

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

Gray

White

Blond

Unknown/Other

Red

Bald (No hair) Black

Brown

Sandy

6.

	et 8. General Eligibility and Inadmissibility bunds (continued)	20.	Have you EVER had a prior final order of exclusion, deportation, or removal reinstated? Yes No
Dates	s of Membership or Dates of Involvement	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: 10.	nization 3 Name of Organization	23.	Have you EVER applied for any kind of relief or protection from removal, exclusion, or deportation? Yes No
	City or Town State or Province	24.a.	Have you EVER been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement? Yes No
	Country	Num	u answered "Yes" to Item Number 24.a. , complete Item Item 24.b 24.c. If you answered "No" to Item Number , skip to Item Number 25.
12.	Nature of Group		Have you complied with the foreign residence requirement? Yes No Have you been granted a waiver or has Department of
	s of Membership or Dates of Involvement		State issued a favorable waiver recommendation letter for you? Yes No
13.a.	From (mm/dd/yyyy)	<i>a</i> ·	min al A ata and IV-1-2-
13.b.	. To (mm/dd/yyyy)	/ /	minal Acts and Violations
think you a an ex provi	ver Item Numbers 14 86.b. Choose the answer that you as is correct. If you answer "Yes" to any questions (or if answer "No," but are unsure of your answer), provide aplanation of the events and circumstances in the space ided in Part 14. Additional Information.	quest other enfor have quest	tem Numbers 25 45., you must answer "Yes" to any tion that applies to you, even if your records were sealed or twise cleared, or even if anyone, including a judge, law recement 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
14.	Have you EVER been denied admission to the United States? Yes No	"Yes Part	" to Item Numbers 25 45. , use the space provided in 14. Additional Information to provide an explanation
15.	Have you EVER been denied a visa to the United States? Yes No	wher (date	ncludes why you were arrested, cited, detained, or charged; e you were arrested, cited, detained, or charged; when) the event occurred; and the outcome or disposition (for aple, no charges filed, charges dismissed, jail, probation,
16.	Have you EVER worked in the United States without authorization? Yes No	com	munity service).
17.	Have you EVER violated the terms or conditions of your nonimmigrant status? Yes No	25.	Have you EVER been arrested, cited, charged, or detained for any reason by any law enforcement official (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 been in removal, exclusion, rescission, or deportation proceedings?		Coast Guard)?
19.	Yes No Have you EVER been issued a final order of exclusion,	26.	Have you EVER committed a crime of any kind (even if you were not arrested, cited, charged with, or tried for that crime)?
	deportation, or removal? Yes No		Yes No

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et 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
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
NOTE: If you were the beneficiary of a pardon, amnesty, a rehabilitation decree, or other act of clemency, provide documentation of that post-conviction action.	37. 38.	Have you EVER received any proceeds or money from prostitution? Yes No Do you intend to engage in illegal gambling or any other form of commercialized vice, such as prostitution,
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 community service)? Yes No	39.	bootlegging, or the sale of child pornography, while in the United States? Yes No Have you EVER exercised immunity (diplomatic or otherwise) to avoid being prosecuted for a criminal offense in the United States? Yes No
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
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
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?	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
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
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 spouse or your parent, although you knew or reasonably
Are you the spouse, son, or daughter of a foreign national who illicitly trafficked or aided (or otherwise abetted, assisted, conspired, or colluded) in the illicit trafficking of a controlled substance, such as chemicals, illegal drugs, or narcotics and you obtained, within the last five years, any financial or other benefit from the illegal activity of your spouse or parent, although you knew or reasonably should have known that the financial or other benefit resulted from the illicit activity of your spouse or parent?	45.	should have known that this benefit resulted from the illicit activity of your spouse or parent? Yes No Have you EVER engaged in money laundering or have you EVER knowingly aided, assisted, conspired, or colluded with others in money laundering or do you seek to enter the United States to engage in such activity? Yes No
	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 clemency)?	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 community service)? 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)? Have you EVER violated (or attempted or conspired to violate) any controlled substances as the United States, or a foreign country? 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? 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 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 illicit 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?

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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	ies 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 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. ? 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 48.d. Provided money, a thing of value, services or labor, or any other assistance or support for any of the activities 	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 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? Yes No

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	t 8. General Eligibility and Inadmissibility ounds (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	A	 Public Charge 61. Are you subject to the public charge ground of inadmissibility 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	7	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	T	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
	you EVER ordered, incited, called for, committed, assisted, d with, or otherwise participated in any of the following:)	64. Identify the total value of your household assets. \$0-18,400
58.a.	Acts involving torture or genocide?		\$18,401-136,000
58.b.	Killing any person?		\$136,001-321,400 \$321,401-707,100
58.c.	Intentionally and severely injuring any person? Yes No		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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			A-Numbe	er ▶ A-
Par	t 8. General Eligibility and Inac	lmissibility Groun	ds (continued)	
65.	Identify the total value of your household	ld liabilities (including	ooth secured and unsecu	red liabilities).
	\$0 \$1-10,100 \$10,10	1-57,700	\$57,701-186,800	Over \$186,800
66.	What is the highest degree or level of so	chool you have complet	ed?	
	Grades 1 through 11 12 th gra	ade - no diploma	High school diploma, Gl	ED, or alternative credential
	1 or more years of college credit, no	o degree .	Associate's degree	Bachelor's degree
	Master's degree Profess	sional degree (JD, MD,	DMD, etc.)	Doctorate degree
67.	List your certifications, licenses, skills of	obtained through work e	experience, and education	nal certificates.
		A 4.4		
	3 7			
	DDA			IONI
68.a.	Have you ever received Supplemental S	ecurity Income (SSI), T	emporary Assistance for	r Needy Families Yes No
	(TANF), or State, Tribal, territorial, or I "General Assistance" in the State context			ance (often called
68.b.	Have you ever received long-term instit	utionalization at govern	ment expense?	Yes No
68.c.	If your answer to Item Number 68.a. is	s "Yes," list the specific	benefit(s) you received,	the start and end dates of each period of
	receipt, and the dollar amount of benefit			
	Benefit Received	Start D	ate End Da	Dollar Amount
68.d.	If your answer to Item Number 68.b. is		•	stitution, the start and end dates of each
	period of institutionalization, and the res	•		D.
	Institution Name/City/State	Date From	Date To	Reason

Illeg	gal Entries and Other Immigration Violations	nce April 1, 1997, have you ited States:	been unlawfully present in the		
69.a.	Have you EVER failed or refused to attend or to remain in attendance at any removal proceeding filed against you	a. For more than 180 days departed the United Stat	but less than a year, and then es? Yes No		
69.b.	on or after April 1, 1997? Yes No If your answer to Item Number 69.a. is "Yes," do you believe you had reasonable cause? Yes No		d then departed the United States? Yes No present in the United States if		
69.c.	If your answer to Item Number 69.b. is "Yes," attach a written statement explaining why you had reasonable cause.	u entered the United States	without being inspected and bled, or if you legally entered the		
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 visa or entry into the United States? Yes No	nter the United States with paroled after: a. Having been unlawfully	EVER reentered or attempted to out being inspected and admitted present in the United States for		
71.	Have you EVER lied about, concealed, or misrepresented any information on an application or petition to obtain a	more than one year in the b. Having been deported, e	e aggregate? Yes No xcluded, or removed from the		
	visa, other documentation required for entry into the United States, admission to the United States, or any other kind of immigration benefit?	United States?	Yes No		
	Yes No	iscellaneous Conduct			
72.	Have you EVER falsely claimed to be a U.S. citizen (in writing or any other way)? Yes No	Do you plan to practice	polygamy in the United States? Yes No		
73. 74.	Have you EVER been a stowaway on a vessel or aircraft arriving in the United States? Yes No 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	requires your protection inadmissible after being being helpless from sick	another foreign national who or guardianship but who is certified by a medical officer as ness, physical or mental described in INA section 232(c)? Yes No		
	t 8. General Eligibility and Inadmissibility bunds (continued)	withholding custody of	d in detaining, retaining, or a U.S. citizen child outside the 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? Yes No	Have you EVER voted	Yes No in violation of any Federal, state, ovision, statute, ordinance, or States? Yes No		
	noval, Unlawful Presence, or Illegal Reentry or Previous Immigration Violations	Have you EVER renour being taxed by the Unite	aced U.S. citizenship to avoid d States?		
76.	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	ve you EVER:	Yes No		
	excluded, deported, or removed from the United States? Yes No	service in the U.S. armed Security Training Corps	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		
77.	Have you EVER entered the United States without being inspected and admitted or paroled? Yes No	foreign national?	∐ Yes ∐ No		

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	111(4111041) 12
Part 8. General Eligibility and Inadmissibility Grounds (continued) 85.b. Been relieved or discharged from such training or service on the ground that you are a foreign national?	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 requesting.)
Yes No	
35.c. Been convicted of desertion from the U.S. armed forces? Yes No No 36.a. Have you EVER left or remained outside the United	Part 10. Applicant's Statement, Contact Information, Declaration, Certification, and Signature
States to avoid or evade training or service in the U.S. armed forces in time of war or a period declared by the President to be a national emergency? Yes No 86.b. If your answer to Item Number 86.a. is "Yes," what was	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 immigration status immediately before	Applicant's Statement
you left (for example, U.S. citizen or national, lawful permanent resident, nonimmigrant, parolee, present without admission or parole, or any other status)?	NOTE: Select the box for either Item Number 1.a. or 1.b. If applicable, select the box for Item Number 2.
Part 9. Accommodations for Individuals With Disabilities and/or Impairments	 1.a.
NOTE: Read the information in the Form I-485 Instructions before completing this part.	answer to every question in
Are you requesting an accommodation because of your disabilities and/or impairments? Yes No	a language in which I am fluent, and I understood everything.
If you answered "Yes" to Item Number 1. , select any applicable box in Item Numbers 2.a 2.c. and provide an answer.	2. At my request, the preparer named in Part 12., prepared this application for me based only upon
I am deaf or hard of hearing and request the following accommodation. (If you are requesting a sign-language interpreter, indicate for which	information I provided or authorized.
language (for example, American Sign Language).):	Applicant's Contact Information
	3. Applicant's Daytime Telephone Number
2.b. I am blind or have low vision and request the following accommodation:	4. Applicant's Mobile Telephone Number (if any)
	5. Applicant's Email Address (if any)

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Part 10. Applicant's Statement, Contact Information, Declaration, Certification, and Signature (continued)

Applicant's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS may require that I submit original documents to USCIS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for the immigration benefit that I seek.

I understand that if I am a male who is 18 to 26 years of age, submitting this application will automatically register me with the Selective Service System as required by the Military Selective Service Act.

I furthermore authorize release of information contained in this application, in supporting documents, and in my USCIS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I understand that USCIS may require me to appear for an appointment to take my biometrics (fingerprints, photograph, and/or signature) and, at that time, if I am required to provide biometrics, I will be required to sign an oath reaffirming that:

- 1) I reviewed and understood all of the information contained in, and submitted with, my application; and
- 2) All of this information was complete, true, and correct at the time of filing.

I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my application and that all of this information is complete, true, and correct.

Applicant's Signature 6.a. Applicant's Signature (sign in ink) 6.b. Date of Signature (mm/dd/yyyy)

NOTE TO ALL APPLICANTS: If you do not completely fill out this application or fail to submit required documents listed in the Instructions, USCIS may deny your application.

Part 11. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Inte	erpreter's Full Name
1.a.	Interpreter's Family Name (Last Name)
1.b.	Interpreter's Given Name (First Name)
2.	Interpreter's Business or Organization Name (if any)
$\overline{}$	
_	
Inte	rpreter'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. Apt. Ste. Flr.				
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 Numbe	3.d. State 3.e. ZIP Code				
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	r 3.f. Province				
she understands every instruction, question, and answer on the	3 D 1 C 1				
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 Signature of the Person Preparing this	6. Preparer's Email Address (if any)				
Application, if Other Than the Applicant					
Provide the following information about the preparer.	Preparer's Statement				
Preparer's Full Name 1.a. Preparer's Family Name (Last 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. Treparer's Family Wante (Last Wante)	7.b. I am an attorney or accredited representative and my representation of the applicant in this case				
1.b. Preparer's Given Name (First Name)	extends does not extend beyond the preparation of this application.				
2. 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.

P	rei	oar	er'	S	Sie	nai	ture

8.a.	Preparer's Signature (sign in ink)								
	DDO								
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

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)		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
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)		corrections made to this application, numbered
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)	٨	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
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)		numbered pages through are complete,
USCIS Officer's Printed Name or Stamp Date of Signature (mm/dd/yyyy) Applicant's Signature (sign in ink)		
Date of Signature (mm/dd/yyyy) Applicant's Signature (sign in ink)		Subscribed to and sworn to (affirmed) before me
Date of Signature (mm/dd/yyyy) Applicant's Signature (sign in ink)		USCIS Officer's Printed Name or Stamp
Applicant's Signature (sign in ink)		
		Date of Signature (mm/dd/yyyy)
USCIS Officer's Signature (sign in ink)		Applicant's Signature (sign in ink)
USCIS Officer's Signature (sign in ink)		
		USCIS Officer's Signature (sign in ink)

09/08/2022

Part 14. Additional Information	5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
If you need extra space to provide any additional information within this application, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this application or attach a separate	5.d.					
sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the Page Number , Part Number , and Item Number to which your answer refers; and sign and date each sheet.	Λ					
1.a. Family Name (Last Name) 1.b. Given Name						
(First Name) 1.c. Middle Name	_					
2. A-Number (if any) ► A-	6.a. 6.d.	Page Number	6.b.	Part Number	6.c.	Item Number
3.a. Page Number 3.b. Part Number 3.c. Item Number						
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09/08	7.a. 7.d.	Page Number	7.b.	Part Number	7.c.	Item Number
4.a. Page Number 4.b. Part Number 4.c. Item Number 4.d.						

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