

## 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 09/30/2021

		F	or USC	CIS Use	Only	
Preference Category:			Recei	pt		Action Block
Country Chargeable:						
Priority Date:						
Date Form I-693 Received:						
☐ Applicant ☐ Interview Interviewed Waived  Date of Initial Interview: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐		Section of Law				
	To be c	ompleted by an	attorney	or accred	ited represei	ntative (if any).
Select this box if Form G-28 is attached.	Volag Nu (if any)			ey State B	ar Number	Attorney or Accredited Representative USCIS Online Account Number (if any)
Instructions, U.S. Citizensh  Part 1. Information for lawful permanent r	ip and Imm	igration Services  ou (Person app	(USCIS	) may deny	Family Nam (Last Name Given Name	ne e
Your Current Legal N nickname)	l <b>ame</b> (do	not provide a		3.c.	(First Name Middle Nan	
1.a. Family Name (Last Name)  1.b. Given Name (First Name)					Family Nam (Last Name Given Name (First Name	e [
<b>1.c.</b> Middle Name				4.c.	Middle Nan	ne
Other Names You Ha applicable)	ve Used S	Since Birth (if		Oth	er Informa	ation About You
NOTE: Provide all other names you have ever used, including your family name at birth, other legal names, nicknames, aliases, and assumed names. If you need extra space to complete this section, use the space provided in Part 14. Additional Information.		5.	NOTE: In include any connection	addition to providing your actual date of birth other dates of birth you have used in with any legal names or non-legal names in ovided in <b>Part 14. Additional Information</b> .		
2.a. Family Name (Last Name)				6.	Sex	Male Female
2.b. Given Name (First Name)				7.	City or Tow	vn of Birth
<b>2.c.</b> Middle Name						

			A-Number ► A-
	et 1. Information About You (Person applying	Rec	cent Immigration History
8.	Country of Birth		ride the information for <b>Item Numbers 15 19.</b> if you last red the United States using a passport or travel document.  Passport Number Used at Last Arrival
9.	Country of Citizenship or Nationality	16.	Travel Document Number Used at Last Arrival
10.	Alien Registration Number (A-Number) (if any)  • A-  NOTE: If you have EVER used other A-Numbers, include the additional A-Numbers in the space provided in Part 14. Additional Information.	17. 18.	Expiration Date of this Passport or Travel Document (mm/dd/yyyy)  Country that Issued this Passport or Travel Document
11.	USCIS Online Account Number (if any)	19.	Nonimmigrant Visa Number from this Passport (if any)
12.	U.S. Social Security Number (if any)		e of Last Arrival into the United States  City or Town
U.S	. Mailing Address		
13.a.	In Care Of Name (if any)	20.b	. State
13.c.		21. Whe 22.a	Date of Last Arrival (mm/dd/yyyy)  In I last arrived in the United States, I:  Was inspected at a port of entry and admitted as (for example, exchange visitor; visitor, waived through; temporary worker; student):
13.e.	State 13.f. ZIP Code (USPS ZIP Code Lookup)	22.b	
Alte	ernate and/or Safe Mailing Address		
(VA' victii	u are applying based on the Violence Against Women Act WA) or as a special immigrant juvenile, human trafficking m (T nonimmigrant), or victim of a qualifying crime (U mmigrant) and you do not want USCIS to send notices	22.c. 22.d	parole.

#### Alternate and/or Safe

8.

9.

10.

If you are applying based of (VAWA) or as a special in victim (T nonimmigrant), o nonimmigrant) and you do not want USCIS to send notices about this application to your home, you may provide an alternative and/or safe mailing address.

14.a.	In Care Of Name (if any)
14.b.	Street Number and Name
14.c.	Apt. Ste. Flr.
14.d.	City or Town
14.e.	State 14.f. ZIP Code

If you were issued a Form I-94 Arrival-Departure Record Number:

23.a. Form I-94 Arrival-Departure Record Number

23.b. Expiration Date of Authorized Stay Shown on Form I-94 (mm/dd/yyyy)

23.c. Status on Form I-94 (for example, class of admission, or paroled, if paroled)

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			A-Number ► A-
	t 1. Information About You (Person applying lawful permanent residence) (continued)  What is your current immigration status (if it has changed since your arrival)?	1.d.	Asylee or Refugee  Asylum status (INA section 208), Form I-589 or Form I-730  Refugee status (INA section 207), Form I-590 or Form I-730
		1.e.	<b>Human Trafficking Victim or Crime Victim</b>
Provi any)	ide your name exactly as it appears on your Form I-94 (if		Human trafficking victim (T Nonimmigrant), Form I-914 or derivative family member, Form I-914A
	Family Name (Last Name)  Given Name (First Name)		Crime victim (U Nonimmigrant), Form I-918, derivative family member, Form I-918A, or qualifying family member, Form I-929
25 c	Middle Name	1.f.	Special Programs Based on Certain Public Laws
23.C.	Wildle Name		☐ The Cuban Adjustment Act
Par	t 2. Application Type or Filing Category		☐ The Cuban Adjustment Act for battered spouses and children
	<b>E:</b> Attach a copy of the Form I-797 receipt or approval e for the underlying petition or application, as appropriate.		Dependent status under the Haitian Refugee Immigrant Fairness Act
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 <b>only one</b> box). (See the Form I-485 Instructions for more information, including any <b>Additional Instructions</b> that relate to the immigrant category you select.):			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)
1.a.	Family-based  Immediate relative of a U.S. citizen, Form I-130		☐ Indochinese Parole Adjustment Act of 2000
	Other relative of a U.S. citizen or relative of a lawful	1.g.	Additional Options
	permanent resident under the family-based preference		Diversity Visa program
	categories, Form I-130		Continuous residence in the United States since
	Person admitted to the United States as a fiancé(e) or		before January 1, 1972 ("Registry")
	child of a fiancé(e) of a U.S. citizen, Form I-129F (K-1/K-2 Nonimmigrant)		Individual born in the United States under diplomatic status
	☐ Widow or widower of a U.S. citizen, Form I-360		Other eligibility
	☐ VAWA self-petitioner, Form I-360		Cities engionity
1.b.	<b>Employment-based</b>	2.	Are you applying for adjustment based on the
	Alien worker, Form I-140	4.	Immigration and Nationality Act (INA) section 245(i)?
	Alien entrepreneur, Form I-526		Yes No
1.c.	Special Immigrant		NOTE: If you answered "Yes" to Item Number 2., you
	Religious worker, Form I-360		must have selected a family-based, employment-based, special immigrant, or Diversity Visa immigrant category
	Special immigrant juvenile, Form I-360		listed above in <b>Item Numbers 1.a 1.g.</b> as the basis for
	Certain Afghan or Iraqi national, Form I-360		your application for adjustment of status. Fill out the rest of this application <b>and</b> Supplement A to Form I-485,
	Certain international broadcaster, Form I-360		Adjustment of Status Under Section 245(i) (Supplement A). For detailed filing instructions, read the Form I-485

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Certain G-4 international organization or family

Form I-360

member or NATO-6 employee or family member,

Instructions (including any Additional Instructions that

Numbers 1.a. - 1.g.) and Supplement A Instructions.

relate to the immigrant category that you selected in **Item** 

Part 2. Application Type or Filing Category (continued)			Decision (for example, approved, refused, denied, withdrawn)
Info	ormation About Your Immigrant Category	4.	Date of Decision (mm/dd/yyyy)
	are the <b>principal applicant</b> , provide the following		
	mation.	Add	ress History
<ol> <li>4.</li> </ol>	Receipt Number of Underlying Petition (if any)  Priority Date from Underlying Petition (if any)	durin States space	de physical addresses for everywhere you have lived g the last five years, whether inside or outside the United s. Provide your current address first. If you need extra to complete this section, use the space provided in
	(mm/dd/yyyy)	Part	14. Additional Information.
	a are a <b>derivative applicant</b> (the spouse or unmarried	Physi	cal Address 1 (current address)
	under 21 years of age of a principal applicant), provide the wing information for the <b>principal applicant</b> .	5.a.	Street Number and Name
Princ	ipal Applicant's Name	5.b.	Apt. Ste. Flr.
5.a.	Family Name (Last Name)	5.c.	City or Town
5.b.	Given Name (First Name)	5.d.	State 5.e. ZIP Code
5.c.	Middle Name	5.f.	Province
6.	Principal Applicant's A-Number (if any)  • A-	5.g.	Postal Code
7.		5.h.	Country
7.	Principal Applicant's Date of Birth (mm/dd/yyyy)		
8.	Receipt Number of Principal's Underlying Petition (if any)	Dates	of Residence
0.	Trincipal's Olderlying Tetition (if any)	6.a.	From (mm/dd/yyyy)
9.	Priority Date of Principal Applicant's Underlying Petition	6.b.	To (mm/dd/yyyy)
	(if any) (mm/dd/yyyy)		
		•	cal Address 2
Par	t 3. Additional Information About You	7.a.	Street Number and Name
1.	Have you ever applied for an immigrant visa to obtain permanent resident status at a U.S. Embassy or U.S.	7.b.	Apt. Ste. Flr.
	Consulate abroad?	7.c.	City or Town
	If you answered "Yes" to <b>Item Number 1.</b> , complete <b>Item Numbers 2.a 4.</b> below. If you need extra space to	7.d.	State 7.e. ZIP Code
	complete this section, use the space provided in <b>Part 14. Additional Information</b> .	7.f.	Province
Loca	tion of U.S. Embassy or U.S. Consulate	7.g.	Postal Code
2.a.	City	7.h.	Country
2.b.	Country		

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Part 3. Additional Information About You	Address of Employer or Company
(continued)	12.a. Street Number and Name
Dates of Residence	12.b.
8.a. From (mm/dd/yyyy)	<b>12.c.</b> City or Town
<b>8.b.</b> To (mm/dd/yyyy)	12.d. State 12.e. ZIP Code
Provide your most recent address outside the United States where you lived for more than one year (if not already listed above).	12.f. Province
9.a. Street Number	12.g. Postal Code
and Name	12.h. Country
9.c. City or Town	13. Your Occupation
9.d. State 9.e. ZIP Code	Dates of Employment
9.f. Province	14.a. From (mm/dd/yyyy)
9.g. Postal Code	<b>14.b.</b> To (mm/dd/yyyy)
9.h. Country	Employer 2
	15. Name of Employer or Company
Dates of Residence	Tunic of Employer of Company
<b>10.a.</b> From (mm/dd/yyyy)	Address of Employer or Company
<b>10.b.</b> To (mm/dd/yyyy)	16.a. Street Number and Name
Employment History	16.b.
Provide your employment history for the last five years, whether inside or outside the United States. Provide the most	16.c. City or Town
recent employment first. If you need extra space to complete	16.d. State 16.e. ZIP Code
this section, use the space provided in <b>Part 14. Additional Information</b> .	16.f. Province
Employer 1 (current or most recent)	
11. Name of Employer or Company	16.g. Postal Code
	16.h. Country
	17. Your Occupation
	17. Tour Occupation
	Dates of Employment
	18.a. From (mm/dd/yyyy)
	<b>18.b.</b> To (mm/dd/yyyy)

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	A-Number ► A-
Part 3. Additional Information About You (continued)	3. Date of Birth (mm/dd/yyyy)  4. Sex  Male Female
Provide your most recent employment outside of the United States (if not already listed above).	5. City or Town of Birth
19. Name of Employer or Company	6. Country of Birth
Address of Employer or Company  20.a. Street Number and Name	7. Current City or Town of Residence (if living)
20.b.	8. Current Country of Residence (if living)
20.c. City or Town         20.d. State       20.e. ZIP Code	Information About Your Parent 2
<b>20.f.</b> Province	Parent 2's Legal Name
	9.a. Family Name
20.g. Postal Code  20.h. Country	(Last Name)  9.b. Given Name (First Name)
	9.c. Middle Name
21. Your Occupation	Parent 2's Name at Birth (if different than above)
Dates of Employment	10.a. Family Name (Last Name)
22.a. From (mm/dd/yyyy)	10.b. Given Name (First Name)
<b>22.b.</b> To (mm/dd/yyyy)	10.c. Middle Name
	11. Date of Birth (mm/dd/yyyy)
Part 4. Information About Your Parents	12. Sex Male Female
Information About Your Parent 1	13. City or Town of Birth
Parent 1's Legal Name	
1.a. Family Name (Last Name)	14. Country of Birth
1.b. Given Name (First Name)	15. Current City or Town of Residence (if living)
1.c. Middle Name	
Parent 1's Name at Birth (if different than above)	16. Current Country of Residence (if living)
2.a. Family Name (Last Name)	
2.b. Given Name (First Name)	
2.c. Middle Name	

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Par	t 5. Information About Your Marital History	Place of Marriage to Current Spouse
1.	What is your current marital status?	9.a. City or Town
	Single, Never Married Married Divorced	
	Widowed Marriage Annulled	9.b. State or Province
	Legally Separated	
2.	If you are married, is your spouse a current member of the U.S. armed forces or U.S. Coast Guard?	9.c. Country
	☐ N/A ☐ Yes ☐ No	<b>10.</b> Is your current spouse applying with you?
3.	How many times have you been married (including annulled marriages and marriages to the same person)?	☐ Yes ☐ No
		Information About Prior Marriages (if any)
•	ormation About Your Current Marriage luding if you are legally separated)	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 <b>Part 14. Additional</b>
•	u are currently married, provide the following information tyour current spouse.	<b>Information</b> to provide the information below.
Curre	ent Spouse's Legal Name	Prior Spouse's Legal Name (provide family name before marriage)
4.a.	Family Name (Last Name)	11.a. Family Name (Last Name)
4.b.	Given Name (First Name)	11.b. Given Name (First Name)
4.c.	Middle Name	11.c. Middle Name
5.	A-Number (if any)  ► A-	12. Prior Spouse's Date of Birth (mm/dd/yyyy)
6.	Current Spouse's Date of Birth (mm/dd/yyyy)	13. Date of Marriage to Prior Spouse (mm/dd/yyyy)
7.	Date of Marriage to Current Spouse (mm/dd/yyyy)	Place of Marriage to Prior Spouse
Curre	ent Spouse's Place of Birth	14.a. City or Town
	City or Town	141 0
		14.b. State or Province
8.b.	State or Province	14. C. 14
		14.c. Country
8.c.	Country	15. Date Marriage with Prior Spouse Legally Ended (mm/dd/yyyy)

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			71 Ivanioci P 11
	rt 5. Information About Your Marital History ntinued)	Chile Curr	1 2 ent Legal Name
Place	e Where Marriage with Prior Spouse Legally Ended	7.a.	Family Name (Last Name)
16.a.	. City or Town	7.b.	Given Name
		-	(First Name)
16.b.	State or Province	7.c.	Middle Name
		8.	A-Number (if any)
16.c.	Country		► A-
		9.	Date of Birth (mm/dd/yyyy)
		10.	Country of Birth
Par	rt 6. Information About Your Children		
1.	Indicate the total number of ALL living children (including adult sons and daughters) that you have.	11.	Is this child applying with you?
	NOTE: The term "children" includes all biological or	Chile	13
	legally adopted children, as well as current stepchildren, of any age, whether born in the United States or other	Curr	ent Legal Name
	countries, married or unmarried, living with you or	12.a	Family Name (Last Name)
	elsewhere and includes any missing children and those born to you outside of marriage.	12.b	Given Name
			(First Name)
	ide the following information for each of your children. u have more than three children, use the space provided in	12.c.	Middle Name
	14. Additional Information.	13.	A-Number (if any)
Chile	1 1		► A-
Curre	ent Legal Name	14.	Date of Birth (mm/dd/yyyy)
2.a.	Family Name	15.	Country of Birth
2.b.	(Last Name) Given Name		
	(First Name)	16.	Is this child applying with you? Yes No
2.c.	Middle Name		
3.	A-Number (if any)	Par	rt 7. Biographic Information
	► A-	1.	Ethnicity (Select <b>only one</b> box)
4.	Date of Birth (mm/dd/yyyy)		Hispanic or Latino
5.	Country of Birth		Not Hispanic or Latino
		2.	Race (Select all applicable boxes)
6.	Is this child applying with you? Yes No		White
			Asian
			Black or African American
			American Indian or Alaska Native
			Native Hawaiian or Other Pacific Islander

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Par	t 7. Biographic Information	<b>n</b> (continued)	Date	s of Membership or Dates of Involve	ment
3.	Height Feet	Inches	5.a.	From (mm/dd/yyyy)	
4.	Weight	Pounds	5.b.	To (mm/dd/yyyy)	
5.	Eye Color (Select <b>only one</b> box)		Orga	nization 2	
	Black Blue	Brown	6.	Name of Organization	
	Gray Green	Hazel			
	Maroon Pink	Unknown/Other	7.a.	City or Town	
6.	Hair Color (Select <b>only one</b> box)				
	Bald (No hair) Black	Blond	7.b.	State or Province	
	☐ Brown ☐ Gray	Red			
	Sandy White	Unknown/Other	7.c.	Country	
Par	t 8. General Eligibility and	l Inadmissibility	8.	Nature of Group	
Gro	ounds				
1.	Have you <b>EVER</b> been a member		Date	s of Membership or Dates of Involver	ment
	any way associated with any organization, association, fund, foundation, party, club, society, or similar group in			From (mm/dd/yyyy)	
	the United States or in any other location in the world				
	including any military service?	Yes No	9.b.	To (mm/dd/yyyy)	
•	a answered "Yes" to Item Numbe	-	Orga	nization 3	
	<b>bers 2.</b> - <b>13.b.</b> below. If you need ection, use the space provided in <b>I</b>		10.	Name of Organization	
Info	mation. If you answered "No," b	ut are unsure of your			
	er, provide an explanation of the e e space provided in <b>Part 14. Addi</b> t		11.a.	City or Town	
	nization 1	aoimi inioimmuon.			
01ga <b>2.</b>	Name of Organization		11.b.	State or Province	
	Traine of Organization				
3.a.	City or Town		11.c.	Country	
J. <b>u.</b>	City of Town				
3.b.	State or Province		12.	Nature of Group	
J. 1.J.	Suite of Frontier				
3.c.	Country		Dates	s of Membership or Dates of Involver	ment
			13.a.	From (mm/dd/yyyy)	
4.	Nature of Group		13.h	To (mm/dd/yyyy)	
			10.00	(	

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A-Number	<b>•</b>	A-									
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### Part 8. General Eligibility and Inadmissibility Grounds (continued)

Answer Item Numbers 14. - 80.b. Choose the answer that you think is correct. If you answer "Yes" to any questions (or if you answer "No," but are unsure of your answer), provide an explanation of the events and circumstances in the space provided in Part 14. Additional Information.

provi	ued III Part 14. Additional Imormatio	)II.			
14.	Have you <b>EVER</b> been denied admissi States?	on to	the U	Jnite	d No
15.	Have you <b>EVER</b> been denied a visa to	the	Unite Yes		ites? No
16.	Have you <b>EVER</b> worked in the United authorization?	_	tes wi Yes		t No
17.	Have you <b>EVER</b> violated the terms or nonimmigrant status?		dition Yes	s of y	your No
18.	Are you presently or have you <b>EVER</b> exclusion, rescission, or deportation p				al, No
19.	Have you <b>EVER</b> been issued a final of deportation, or removal?	rder	of exc Yes	clusio	on, No
20.	Have you <b>EVER</b> had a prior final ordedeportation, or removal reinstated?	_	exclu Yes		No
21.	Have you <b>EVER</b> held lawful permane which was later rescinded?	ent re	sident Yes	t stat	us No
22.	Have you <b>EVER</b> been granted volunta immigration officer or an immigration depart within the allotted time?	•	-		
23.	Have you <b>EVER</b> applied for any kind protection from removal, exclusion, or				No
24.a.	Have you <b>EVER</b> been a J nonimmigra who was subject to the two-year foreign requirement?			_	sitor No
Num	n answered "Yes" to <b>Item Number 24.</b> bers <b>24.b 24.c.</b> If you answered "No skip to <b>Item Number 25.</b>				
24.b.	Have you complied with the foreign requirement?	eside	nce Yes		No
24.c.	Have you been granted a waiver or ha State issued a favorable waiver recom for you?			lette	

#### Criminal Acts and Violations

For Item Numbers 25. - 45., you must answer "Yes" to any question that applies to you, even if your records were sealed or otherwise cleared, or even if anyone, including a judge, law enforcement officer, or attorney, told you that you no longer have a record. You must also answer "Yes" to the following questions whether the action or offense occurred here in the United States or anywhere else in the world. If you answer "Yes" to Item Numbers 25. - 45., use the space provided in Part 14. Additional Information to provide an explanation that includes why you were arrested, cited, detained, or charged; where you were arrested, cited, detained, or charged; when (date) the event occurred; and the outcome or disposition (for example, no charges filed, charges dismissed, jail, probation, community service).

25.	Have you EVER been arrested, cited, charged, or				
	detained for any reason by any law e	enforcement official			
	(including but not limited to any U.S	5. immigration			
	official or any official of the U.S. arr	med forces or U.S.			
	Coast Guard)?	Yes No			

26.	Have you <b>EVER</b> committed a crime	of any kind (even if
	you were not arrested, cited, charged	with, or tried for that
	crime)?	□ Ves □ No

27.	Have you <b>EVER</b> pled guilty to or been convicted of a				
	crime or offense (even if the violati	on was subsequently			
	expunged or sealed by a court, or if you were granted a				
	pardon, amnesty, a rehabilitation de	ecree, or other act of			
	clemency)?	☐ 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.

28. 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

29.	Have you <b>EVER</b> been a defendant or the accused in a				
	criminal proceeding (including pre-trial diversion,				
	deferred prosecution, deferred adjudication, or any				
	withheld adjudication)? Yes N	lо			

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?

	Yes		No
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	A-Number ► A-
42.	Have you <b>EVER</b> trafficked a person into involuntary servitude, peonage, debt bondage, or slavery? Traffickin includes recruiting, harboring, transporting, providing, or obtaining a person for labor or services through the use of force, fraud, or coercion.  Yes No
43.	Have you <b>EVER</b> knowingly aided, abetted, assisted, conspired, or colluded with others in trafficking persons for commercial sex acts or involuntary servitude, peonage, debt bondage, or slavery?   Yes  No
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 illic activity of your spouse or parent?  Yes  No
45.	Have you <b>EVER</b> engaged in money laundering or have you <b>EVER</b> 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
Sec	curity and Related
Do y	you intend to:
46.a	Engage in any activity that violates or evades any law relating to espionage (including spying) or sabotage in th United States?  Yes No
<b>46.</b> b	evades any law prohibiting the export from the United States of goods, technology, or sensitive information?  Yes No
46.c	Engage in any activity whose purpose includes opposing controlling, or overthrowing the U.S. Government by force, violence, or other unlawful means while in the United States?  Yes No
46.d	I. Engage in any activity that could endanger the welfare, safety, or security of the United States?  Yes No

**46.e.** Engage in any other unlawful activity? 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

Yes No

have potentially serious adverse foreign policy

consequences for the United States?

## Part 8. General Eligibility and Inadmissibility Grounds (continued)

31.	Have you <b>EVER</b> been convicted of two or more offenses (other than purely political offenses) for which the combined sentences to confinement were five years or
	more? Yes No
32.	Have you <b>EVER</b> illicitly (illegally) trafficked or benefited from the trafficking of any controlled substances, such as chemicals, illegal drugs, or narcotics? Yes No
33.	Have you <b>EVER</b> knowingly aided, abetted, assisted, conspired, or colluded in the illicit trafficking of any illegal narcotic or other controlled substances?
	Yes No
34.	Are you the spouse, son, or daughter of a foreign national who illicitly trafficked or aided (or otherwise abetted, assisted, conspired, or colluded) in the illicit trafficking of a controlled substance, such as chemicals, illegal drugs, or narcotics and you obtained, within the last five years, any financial or other benefit from the illegal activity of your spouse or parent, although you knew or reasonably should have known that the financial or other benefit resulted from the illicit activity of your spouse or parent?
35.	Have you <b>EVER</b> engaged in prostitution or are you coming to the United States to engage in prostitution?  Yes No
36.	Have you <b>EVER</b> directly or indirectly procured (or attempted to procure) or imported prostitutes or persons for the purpose of prostitution?   Yes No
37.	Have you <b>EVER</b> received any proceeds or money from prostitution? Yes No
38.	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
39.	Have you <b>EVER</b> exercised immunity (diplomatic or otherwise) to avoid being prosecuted for a criminal offense in the United States?  Yes No
40.	Have you <b>EVER</b> , while serving as a foreign government official, been responsible for or directly carried out violations of religious freedoms? Yes No
41.	Have you <b>EVER</b> induced by force, fraud, or coercion (or otherwise been involved in) the trafficking of persons for commercial sex acts?  Yes No

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	A-Number A-
Part 8. General Eligibility and Inadmissibility Grounds (continued)	<b>51.d.</b> Provided money, a thing of value, services or labor, or any other assistance or support for any of the activities described in <b>Item Number 51.a.</b> ? Yes No
Have you EVER:	
<b>48.a.</b> 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 weapon or explosive to harm another individual or cause substantial damage to property?  Yes No	<ul> <li>51.e. Provided money, a thing of value, services or labor, or any other assistance or support to an individual, group, or organization who did any of the activities described in Item Number 51.a.? Yes No</li> <li>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.?</li> </ul>
<b>48.b.</b> Participated in, or been a member of, a group or	☐ Yes ☐ No
organization that did any of the activities described in Item Number 48.a.?  Yes No  No  48.c. Recruited members or asked for money or things of value for a group or organization that did any of the activities	<b>NOTE:</b> If you answered "Yes" to any part of <b>Item Number 51.</b> , explain the relationship and what occurred, including the dates and location of the circumstances, in the space provided in <b>Part 14. Additional Information.</b>
described in <b>Item Number 48.a.</b> ? Yes No	<b>52.</b> Have you <b>EVER</b> assisted or participated in selling,
<b>48.d.</b> Provided money, a thing of value, services or labor, or any other assistance or support for any of the activities	providing, or transporting weapons to any person who, to your knowledge, used them against another person?
described in <b>Item Number 48.a.</b> ? Yes No	Ŭ Yes Ŭ No
<b>48.e.</b> Provided money, a thing of value, services or labor, or any other assistance or support for an individual, group, or organization who did any of the activities described in <b>Item Number 48.a.</b> ?  Yes No	53. Have you <b>EVER</b> worked, volunteered, or otherwise served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?  Yes No
<b>49.</b> Have you <b>EVER</b> received any type of military, paramilitary, or weapons training? Yes No	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?
<b>50.</b> Do you intend to engage in any of the activities listed in any part of <b>Item Numbers 48.a 49.</b> ? Yes No	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.	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?
Are you the spouse or child of an individual who <b>EVER</b> :	
<b>51.a.</b> Committed, threatened to commit, attempted to commit, conspired to commit, incited, endorsed, advocated, planned, or prepared any of the following: hijacking,	affiliated with, the Communist Party or any other totalitarian party (in the United States or abroad)?
sabotage, kidnapping, political assassination, or use of a weapon or explosive to harm another individual or cause substantial damage to property?  Yes No	Yes No  No  No  No  The period from March 23, 1933 to May 8, 1945, did you ever order, incite, assist, or otherwise participate
<b>51.b.</b> Participated in, or been a member or a representative of a group or organization that did any of the activities described in <b>Item Number 51.a.</b> ? Yes No	either the Nazi government of Germany or any organization or government associated or allied with the
<b>51.c.</b> Recruited members, or asked for money or things of value	e, Nazi government of Germany? Yes No

for a group or organization that did any of the activities

described in Item Number 51.a.?

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Yes No

	t 8. General Eligibility and Inadmissibility ounds (continued)	63.c.	If your answer to <b>Item Number 63.b.</b> is "Yes," attach a written statement explaining why you had reasonable cause
Have	e you <b>EVER</b> ordered, incited, called for, committed, assisted, ed with, or otherwise participated in any of the following:	64.	Have you <b>EVER</b> submitted fraudulent or counterfeit documentation to any U.S. Government official to obtain or attempt to obtain any immigration benefit, including a visa or entry into the United States?  Yes No
58.b.	Acts involving torture or genocide? Yes No  Killing any person? Yes No  Intentionally and severely injuring any person?  Yes No	65.	Have you <b>EVER</b> lied about, concealed, or misrepresented any information on an application or petition to obtain a visa, other documentation required for entry into the United States, admission to the United States, or any other kind of immigration benefit?
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	66.	Have you <b>EVER</b> falsely claimed to be a U.S. citizen (in writing or any other way)?  Yes No  Yes No
58.e.	Limiting or denying any person's ability to exercise religious beliefs?  Yes No	67.	Have you <b>EVER</b> been a stowaway on a vessel or aircraft arriving in the United States? Yes No
59.	Have you <b>EVER</b> recruited, enlisted, conscripted, or used any person under 15 years of age to serve in or help an armed force or group?  Yes No	68.	Have you <b>EVER</b> knowingly encouraged, induced, assisted, abetted, or aided any foreign national to enter or to try to enter the United States illegally (alien smuggling)?  Yes No
60.	Have you <b>EVER</b> used any person under 15 years of age to take part in hostilities, or to help or provide services to people in combat?  Yes No	69.	Are you under a final order of civil penalty for violating INA section 274C for use of fraudulent documents?  Yes No
<b>52.</b> - locat	<b>E:</b> If you answered "Yes" to any part of <b>Item Numbers 60.</b> , explain what occurred, including the dates and ion of the circumstances, in the space provided in <b>Part 14. itional Information.</b>	Afte	noval, Unlawful Presence, or Illegal Reentry er Previous Immigration Violations
Pul	olic Assistance	70.	Have you <b>EVER</b> been excluded, deported, or removed from the United States or have you ever departed the
61.	Have you received public assistance in the United States from any source, including the U.S. Government or any state, county, city, or municipality (other than emergency medical treatment)?  Yes No	71.	United States on your own after having been ordered excluded, deported, or removed from the United States?  Yes No  Have you EVER entered the United States without being
62.	Are you likely to receive public assistance in the future in the United States from any source, including the U.S. Government or any state, county, city, or municipality		inspected and admitted or paroled? Yes No e April 1, 1997, have you been unlawfully present in the ed States:
	(other than emergency medical treatment)?  Yes No	72.a.	For more than 180 days but less than a year, and then departed the United States? Yes No
Ille	gal Entries and Other Immigration Violations	72.b.	For one year or more and then departed the United States?
	Have you <b>EVER</b> failed or refused to attend or to remain in attendance at any removal proceeding filed against you on or after April 1, 1997?  Yes No	you e admi	Yes No  No  TE: You were unlawfully present in the United States if entered the United States without being inspected and atted or inspected and paroled, or if you legally entered the
63.b.	If your answer to <b>Item Number 63.a.</b> is "Yes," do you believe you had reasonable cause?  Yes No		ed States but you stayed longer than permitted.

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Part 8. General Eligibility and Inadmissibility Grounds (continued)  Since April 1, 1997, have you EVER reentered or attempted to reenter the United States without being inspected and admitted or paroled after:  73.a. Having been unlawfully present in the United States for more than one year in the aggregate? ☐ Yes ☐ No  73.b. Having been deported, excluded, or removed from the United States? ☐ Yes ☐ No			80.a. Have you EVER left or remained outside the United States to avoid or evade training or service in the U.S. armed forces in time of war or a period declared by the President to be a national emergency? Yes No  80.b. If your answer to Item Number 80.a. is "Yes," what was your nationality or immigration status immediately before you left (for example, U.S. citizen or national, lawful permanent resident, nonimmigrant, parolee, present without admission or parole, or any other status)?			
Mis	cellaneous Conduct			Accommodations for Individuals With		
74.	Do you plan to practice polygamy in the United States?			ties and/or Impairments		
75	Yes No			lead the information in the Form I-485 Instructions appleting this part.		
75.	Are you accompanying another foreign national who requires your protection or guardianship but who is inadmissible after being certified by a medical officer as being helpless from sickness, physical or mental disability, or infancy, as described in INA section 232(c)?  Yes No	1.	Are disab	you requesting an accommodation because of your polities and/or impairments? Yes No ou answered "Yes" to <b>Item Number 1.</b> , select any icable box in <b>Item Numbers 2.a 2.c.</b> and provide inswer.		
76.	Have you <b>EVER</b> assisted in detaining, retaining, or withholding custody of a U.S. citizen child outside the United States from a U.S. citizen who has been granted custody of the child?  Yes No	2.a.		I am deaf or hard of hearing and request the following accommodation. (If you are requesting a sign-language interpreter, indicate for which language (for example, American Sign Language).):		
77.	Have you <b>EVER</b> voted in violation of any Federal, state,					
	or local constitutional provision, statute, ordinance, or regulation in the United States? Yes No					
78.	Have you <b>EVER</b> renounced U.S. citizenship to avoid being taxed by the United States? Yes No	2.b.		I am blind or have low vision and request the following accommodation:		
Have	e you <b>EVER</b> :					
79.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 foreign national?  Yes No	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.)		
79.b.	Been relieved or discharged from such training or service on the ground that you are a foreign national?  Yes No					
79.c.	Been convicted of desertion from the U.S. armed forces?  Yes No					

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#### Part 10. Applicant's Statement, Contact Information, Declaration, Certification, and Signature

**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.

Ap	plic	ant	's i	Stat	eme	ent

	Select the box for either <b>Item Number 1.a.</b> or <b>1.b.</b> If e, select the box for <b>Item Number 2.</b>
1.a.	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.
1.b.	The interpreter named in <b>Part 11.</b> read to me every question and instruction on this application and my answer to every question in
2.	a language in which I am fluent, and I understood everything.  At my request, the preparer named in Part 12.,  prepared this application for me based only upon information I provided or authorized.

#### Applicant's Contact Information

PI	processor a constant and a constant
3.	Applicant's Daytime Telephone Number
4.	Applicant's Mobile Telephone Number (if any)
5.	Applicant's Email Address (if any)

#### 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:

- 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)								
$\Rightarrow$									
<i>(</i> ).	D. (a. a. C. C.) and an (a. a. (11))								

**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.

Interpreter	, c	F.,11	Namo
Interpreter	2	<i>r</i> ии	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)

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Part 12. Contact Information, Declaration, and

## Part 11. Interpreter's Contact Information, Certification, and Signature (continued)

Inte		/ A mr	10 41 10 0 41 41 4 11 4					
11000	erpreter's Mailing Address		olication, if Other Than the Applicant					
3.a.	Street Number and Name	Provi	de the following information about the preparer.					
3.b.	Apt. Ste. Flr.	Preparer's Full Name						
3.c.	City or Town	1.a.	Preparer's Family Name (Last Name)					
3.d.	State 3.e. ZIP Code	1.b.	Preparer's Given Name (First Name)					
3.f.	Province							
3.g.	Postal Code	2.	Preparer's Business or Organization Name (if any)					
3.h.	Country							
		Pre	parer's Mailing Address					
Inte	erpreter's Contact Information	3.a.	Street Number and Name					
4.	Interpreter's Daytime Telephone Number	3.b.	Apt. Ste. Flr.					
		3.c.	City or Town					
5.	Interpreter's Mobile Telephone Number (if any)	3.d.	State 3.e. ZIP Code					
6.	Interpreter's Email Address (if any)	3.f.	Province					
		3.g.	Postal Code					
Inte	erpreter's Certification	3.h.	Country					
I cer	tify, under penalty of perjury, that:							
	fluent in English and,	Pre	parer's Contact Information					
<b>1.b.</b> , every	h is the same language specified in <b>Part 10., Item Number</b> and I have read to this applicant in the identified language y question and instruction on this application and his or her	4.	Preparer's Daytime Telephone Number					
	ver to every question. The applicant informed me that he or understands every instruction, question, and answer on the	5.	Preparer's Mobile Telephone Number (if any)					
	cation, including the <b>Applicant's Declaration and ification</b> , and has verified the accuracy of every answer.							
		6.	Preparer's Email Address (if any)					
Inte	erpreter's Signature							
7.a.	Interpreter's Signature (sign in ink)							
7.b.	Date of Signature (mm/dd/yyyy)							

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

(co	ntinı	ued)
Pre	pare	er's Statement
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.
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.
		<b>NOTE:</b> 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.
Pre	pare	er's Certification
prepared application of the contraction of the contraction of the complex of the	ared ficant med ained ained all of all of pletecone	gnature, I certify, under penalty of perjury, that I this application at the request of the applicant. The then reviewed this completed application and me that he or she understands all of the information in, and submitted with, his or her application, the <b>Applicant's Declaration and Certification</b> , and this information is complete, true, and correct. I d this application based only on information that the provided to me or authorized me to obtain or use.
Pre	pare	er's Signature
8.a.	Prej	parer's Signature (sign in ink)
8.b.	 Dat	e of Signature (mm/dd/yyyy)

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

#### Part 13. Signature at Interview

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

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								_			
Pa	rt 14. Additi	ional I	nformation	l		5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
with space to co shee at the Nun	u need extra spain this application this application than what is promplete and file to f paper. Types top of each should ber, and Item I and date each should be and be	on, use to rovided with this e or prince; individuals.	the space below, you may make application of the your name at cate the <b>Page</b>	v. If yo e copies or attach nd A-Nu <b>Numbe</b>	u need more s of this page a separate umber (if any) r, Part	5.d.					
1.a.	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) 🕨	<b>A-</b>			6.d.					
3.a.	Page Number	3.b.	Part Number	3.c.	Item Number	v.u.					
3.d.											
						7.a.	Page Number	7.b.	Part Number	7.c.	Item Number
						7.d.					
4.a. 4.d.	Page Number	4.b.	Part Number	4.c.	Item Number						

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