

Application to Register Permanent Residence or Adjust Status

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-485OMB No. 1615-0023
Expires 02/28/2026

For USCIS Use Only						
Preference Category:			Recei	pt		Action Block
Country Chargeable:						
Priority Date:						
Date Form I-693 Received:						
Applicant Interview Interviewed Waived Date of Initial Interview: Lawful Permanent Resident as of:		☐ INA 209(a) ☐ INA 209(b) ☐ INA 245(a) ☐ INA 245(i) ☐ INA 245(m)	Section of Law INA 249 Sec. 13, Act of 9/11/57 Cuban Adjustment Act Other			
	To be c	ompleted by an a	attorney	or accred	ited represe	ntative (if any).
Select this box if Form G-28 is attached.	Volag Nu	mber	Attorno		ar Number	Attorney or Accredited Representative USCIS Online Account Number (if any)
NOTE TO ALL APPLICATIONS, U.S. Citizensh	ANTS: If y	ou do not comple) may deny	plication or f	
Part 1. Information for lawful permanent r			olying		Family Nar (Last Name Given Nam	9)
Your Current Legal Name (do not provide a nickname)		not provide a		3.c.	(First Name Middle Nar	,
1.a. Family Name				4.a.	Family Nar	
(Last Name) 1.b. Given Name (First Name)				4.b.	(Last Name Given Nam (First Name	e
1.c. Middle Name				4.c.	Middle Nar	me
Other Names You Have Used Since Birth (if			Oth	er Inform	ation About You	
applicable)		5.	Date of Bir	th (mm/dd/yyyy)		
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.			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 rovided in Part 14. Additional Information .		
2.a. Family Name (Last Name)				6.	Sex [Male Female
2.b. Given Name (First Name)				7.	City or Tov	vn of Birth
2.c. Middle Name						

			A-Number ► A-
Par	t 1. Information About You (Person applying	Soc	ial Security Card
for 8.	Country of Birth	14.	Has the Social Security Administration (SSA) ever officially issued a Social Security card to you? Yes No
9.	Country of Citizenship or Nationality		If you answered "Yes," provide the information requested in Item Number 15.
10.	Alien Registration Number (A-Number) (if any) A- NOTE: If you have EVER used other A-Numbers, include the additional A-Numbers in the space provided in Part 14. Additional Information.	15. 16.	Provide your U.S. Social Security Number (SSN). Do you want the SSA to issue you a Social Security card? (You must also answer "Yes" to Item Number 17. Consent for Disclosure, to receive a card).
11.	USCIS Online Account Number (if any)	17.	Consent for Disclosure: I authorize disclosure of information from this application to the SSA as required for the purpose of assigning me an SSN and issuing me a Social Security Card.
U.S	. Mailing Address		☐ Yes ☐ No
12.a.	In Care Of Name (if any)	Rec	ent Immigration History
12.b	Street Number and Name		ide the information for Item Numbers 18 24. if you last red the United States using a passport or travel document.
12.c.	☐ Apt. ☐ Ste. ☐ Flr. ☐	18.	Passport Number Used at Last Arrival
	State 12.f. ZIP Code	19.	Travel Document Number Used at Last Arrival
Alte	(USPS ZIP Code Lookup) ernate and/or Safe Mailing Address	20.	Expiration Date of this Passport or Travel Document (mm/dd/yyyy)
(VA	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	21.	Country that Issued this Passport or Travel Document
nonii abou	mmigrant) and you do not want USCIS to send notices this application to your home, you may provide an mative and/or safe mailing address.	22.	Nonimmigrant Visa Number from this Passport (if any)
13.a.	In Care Of Name (if any)		e of Last Arrival into the United States
13.b	Street Number	43.a.	City or Town
13 c	and Name	23.b.	. State

Form I-485 Edition 04/01/24 Page 2 of 20

13.d. City or Town

13.e. State

13.f. ZIP Code

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

A-Number ► A-			

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

When	I last arrived in the United States, I:
25.a.	Was inspected at a port of entry and admitted as (for example, exchange visitor; visitor, waived through; temporary worker; student):
25.b.	Was inspected at a port of entry and paroled as (for example, humanitarian parole, Cuban parole):
25.c.	Came into the United States without admission or parole.
25.d.	Other:
If you	were issued a Form I-94 Arrival-Departure Record Number:
26.a.	Form I-94 Arrival-Departure Record Number
	>
26.b.	Expiration Date of Authorized Stay Shown on Form I-94
	(mm/dd/yyyy)
26.c.	Status on Form I-94 (for example, class of admission, or paroled, if paroled)
27.	What is your current immigration status (if it has changed since your arrival)?
Provi any)	de your name exactly as it appears on your Form I-94 (if
28.a.	Family Name (Last Name)
28.b.	Given Name (First Name)
28.c.	Middle Name

Part 2. Application Type or Filing Category

NOTE: Attach a copy of the Form I-797 receipt or approval notice for the underlying petition or application, as appropriate.

I am applying to register lawful permanent residence or adjust status to that of a lawful permanent resident based on the following immigrant category (select only one box). (See the Form I-485 Instructions for more information, including any Additional Instructions that relate to the immigrant category you select.):

4	-		
1.a.	Fami	uv-b	ased

		Immediate relative of a U.S. citizen, Form I-130
		Other relative of a U.S. citizen or relative of a lawful permanent resident under the family-based preference categories, Form I-130
		Person admitted to the United States as a fiancé(e) or child of a fiancé(e) of a U.S. citizen, Form I-129F (K-1/K-2 Nonimmigrant)
		Widow or widower of a U.S. citizen, Form I-360
		VAWA self-petitioner, Form I-360
1.b.	Em	ployment-based
		Alien worker, Form I-140
		Alien entrepreneur, Form I-526
1.c.	Spe	cial Immigrant
		Religious worker, Form I-360
		Special immigrant juvenile, Form I-360
		Certain Afghan or Iraqi National, Form I-360 or Form DS-157
		Certain international broadcaster, Form I-360
		Certain G-4 international organization or family member or NATO-6 employee or family member, Form I-360
1.d.	Asy	lee 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.

1.e. Human Trafficking Victim or Crime Victim

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

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

Form I-485 Edition 04/01/24 Page 3 of 20

A-Number ▶	A-				

Part 2. Application Type or Filing Category (continued)

1.f. Special Programs Based on Certain Public Laws The Cuban Adjustment Act The Cuban Adjustment Act for battered spouses and children Dependent status under the Haitian Refugee Immigrant Fairness Act Dependent status under the Haitian Refugee Immigrant Fairness Act for battered spouses and children Lautenberg Parolees Diplomats or high ranking officials unable to return home (Section 13 of the Act of September 11, 1957) Indochinese Parole Adjustment Act of 2000 1.g. Additional Options Diversity Visa program Continuous residence in the United States since before January 1, 1972 ("Registry") Individual born in the United States under diplomatic status Other eligibility 2. Are you applying for adjustment based on the Immigration and Nationality Act (INA) section 245(i)? Yes No NOTE: If you answered "Yes" to Item Number 2., you must have selected a family-based, employment-based, special immigrant, or Diversity Visa immigrant category listed above in **Item Numbers 1.a. - 1.g.** as the basis for your application for adjustment of status. Fill out the rest of this application and Supplement A to Form I-485, Adjustment of Status Under Section 245(i) (Supplement A). For detailed filing instructions, read the Form I-485

Instructions (including any **Additional Instructions** that relate to the immigrant category that you selected in **Item Numbers 1.a. - 1.g.**) and Supplement A Instructions.

Information About Your Immigrant Category

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

infor	mation.
3.	Receipt Number of Underlying Petition (if any)
4.	Priority Date from Underlying Petition (if any)
	(mm/dd/yyyy)
child	u are a derivative applicant (the spouse or unmarried under 21 years of age of a principal applicant), provide the wing information for the principal applicant .
Princ	cipal Applicant's Name
5.a.	Family Name (Last Name)
5.b.	Given Name (First Name)
5.c.	Middle Name
6.	Principal Applicant's A-Number (if any)
	► A-
7.	Principal Applicant's Date of Birth (mm/dd/yyyy)
8.	Receipt Number of Principal's Underlying Petition (if any)
•	►
9.	Priority Date of Principal Applicant's Underlying Petition
	(if any) (mm/dd/yyyy)
D.	4.2 A 1114 - 11 C 4 - A1 - 4 37
Par	t 3. Additional Information About You
1.	Have you ever applied for an immigrant visa to obtain permanent resident status at a U.S. Embassy or U.S. Consulate abroad? Yes No
	If you answered "Yes" to Item Number 1. , complete Item Numbers 2.a 4. below. If you need extra space to complete this section, use the space provided in Part 14. Additional Information .
Loca	tion of U.S. Embassy or U.S. Consulate
2.a.	City
2.b.	Country
3.	Decision (for example, approved, refused, denied, withdrawn)
4.	Date of Decision (mm/dd/yyyy)

Form I-485 Edition 04/01/24 Page 4 of 20

	A-Number ► A-
Part 3. Additional Information About You (continued)	Provide your most recent address outside the United States where you lived for more than one year (if not already listed above).
Address History	9.a. Street Number and Name
Provide physical addresses for everywhere you have lived during the last five years, whether inside or outside the United States. Provide your current address first. If you need extra space to complete this section, use the space provided in Part 14. Additional Information .	9.b.
Physical Address 1 (current address)	
5.a. Street Number and Name	9.f. Province9.g. Postal Code
5.b. Apt. Ste. Flr.	9.h. Country
5.c. City or Town	
5.d. State 5.e. ZIP Code	Dates of Residence
5.f. Province	10.a. From (mm/dd/yyyy)
5.g. Postal Code	10.b. To (mm/dd/yyyy)
5.h. Country	Employment History
Dates of Residence 6.a. From (mm/dd/yyyy)	Provide your employment history for the last five years, whether inside or outside the United States. Provide the most recent employment first. If you need extra space to complete this section, use the space provided in Part 14. Additional Information .
6.b. To (mm/dd/yyyy)	Employer 1 (current or most recent)
Physical Address 2	11. Name of Employer or Company
7.a. Street Number and Name	
7.b.	Address of Employer or Company
7.c. City or Town	12.a. Street Number and Name
7.d. State 7.e. ZIP Code	12.b.
7.f. Province	12.c. City or Town
7.g. Postal Code	12.d. State 12.e. ZIP Code
7.h. Country	12.f. Province
	12.g. Postal Code
Dates of Residence	12.h. Country
8.a. From (mm/dd/yyyy)	
8.b. To (mm/dd/yyyy)	13. Your Occupation

Form I-485 Edition 04/01/24 Page 5 of 20

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

Form I-485 Edition 04/01/24 Page 6 of 20

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

Form I-485 Edition 04/01/24 Page 7 of 20

A-Number ▶	A-					

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/	уууу)
13.	Date of Marria	ge to Prior Spouse (mn	n/dd/yyyy)
Place	of Marriage to	Prior Spouse	
14.a.	City or Town		
14.b.	State or Provin	nce	
14.c.	Country		
15.	•	with Prior Spouse Leg	ally Ended
	(mm/dd/yyyy)		
		ge with Prior Spouse Le	egally Ended
16.a.	City or Town		
16 k	State on Dunasin		
10.D.	State or Provin	ice	
16.c.	Country		
10.0			

Part 6. Information About Your Children

1. Indicate the total number of ALL living children (including adult sons and daughters) that you have.

NOTE: The term "children" includes all biological or legally adopted children, as well as current stepchildren, of any age, whether born in the United States or other countries, married or unmarried, living with you or elsewhere and includes any missing children and those born to you outside of marriage.

Provide the following information for each of your children. If you have more than three children, use the space provided in **Part 14. Additional Information**.

Child 1

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

► A-					

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

5.	Country of Birth

6. Is this child applying with you?

Yes	No
- 05	- 10

Child 2

10.

Current Legal Name

- 7.a. Family Name (Last Name)
- **7.b.** Given Name (First Name)
- (First Name)

 7.c. Middle Name
- **8.** A-Number (if any)

•	A-					

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

Country of Birth

11. Is this child applying with you?

Yes	No

A-Number	>	A-					

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

Form I-485 Edition 04/01/24 Page 9 of 20

Part 8. General Eligibility and Inadmissibility Grounds (continued)				Have you EVER had a prior final order of exclusion, deportation, or removal reinstated? Yes No				
Dates	s of Membership or Dates of Involvem	nent	21.	Have you EVER held lawful permanent resident status which was later rescinded? Yes No				
	From (mm/dd/yyyy) To (mm/dd/yyyy)		22.	Have you EVER been granted voluntary departure by an immigration officer or an immigration judge but failed to depart within the allotted time? Yes No				
Orga	nization 3		••	TY				
10.	Name of Organization		23.	Have you EVER applied for any kind of relief or protection from removal, exclusion, or deportation? Yes No				
11.a.	.a. City or Town		24.a	Have you EVER been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement?				
11.b.	State or Province			Yes No				
11.c.	.c. Country			If you answered "Yes" to Item Number 24.a. , complete Item Numbers 24.b 24.c. If you answered "No" to Item Number 24.a. , skip to Item Number 25.				
			24.b	Have you complied with the foreign residence				
12.	Nature of Group			requirement?				
Dates of Membership or Dates of Involvement				Have you been granted a waiver or has Department of State issued a favorable waiver recommendation letter for you? Yes No				
13.a.	From (mm/dd/yyyy)							
13.b.	To (mm/dd/yyyy)		Cri	minal Acts and Violations				
Answer Item Numbers 14 86.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. 14. Have you EVER been denied admission to the United States? Yes No No				Item Numbers 25 45., you must answer "Yes" to any tion that applies to you, even if your records were sealed or rwise cleared, or even if anyone, including a judge, law reement officer, or attorney, told you that you no longer a record. You must also answer "Yes" to the following tions whether the action or offense occurred here in the ed States or anywhere else in the world. If you answer s" to Item Numbers 25 45., use the space provided in a 14. Additional Information to provide an explanation includes why you were arrested, cited, detained, or charged; re you were arrested, cited, detained, or charged; when the event occurred; and the outcome or disposition (for apple, no charges filed, charges dismissed, jail, probation, munity service).				
17.	authorization? Have you EVER violated the terms of	Yes No	25.	Have you EVER been arrested, cited, charged, or detained for any reason by any law enforcement official				
	nonimmigrant status?	Yes No		(including but not limited to any U.S. immigration official or any official of the U.S. armed forces or U.S.				
18.	Are you presently or have you EVER exclusion, rescission, or deportation p			Coast Guard)? Yes No				
19.	Have you EVER been issued a final deportation, or removal?	Yes No	26.	Have you EVER committed a crime of any kind (even if you were not arrested, cited, charged with, or tried for that crime)? Yes No				
	asportation, or removal:	Yes No						

Form I-485 Edition 04/01/24 Page 10 of 20

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

Form I-485 Edition 04/01/24 Page 11 of 20

Yes No

		A-Number ► A-				
Part 8. General Eligibility and Inadmissil Grounds (continued)	vility 48.e	18.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. ? Yes No				
Security and Related	49.	Have you EVER received any type of military,				
Do you intend to:	43.	paramilitary, or weapons training? Yes No				
46.a. Engage in any activity that violates or evades ar relating to espionage (including spying) or sabounited States? Yes		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 evades any law prohibiting the export from the States of goods, technology, or sensitive inform. Yes	United 46.a local	TE: If you answered "Yes" to any part of Item Numbers 50. , explain what you did, including the dates and tion of the circumstances, or what you intend to do in the provided in Part 14. Additional Information .				
46.c. Engage in any activity whose purpose includes of	opposing, Are	you the spouse or child of an individual who EVER:				
controlling, or overthrowing the U.S. Governme force, violence, or other unlawful means while i United States?	nt by 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 v safety, or security of the United States?		weapon or explosive to harm another individual or cause substantial damage to property? Yes No				
∠ Yes	∐ No 51.b	Participated in, or been a member or a representative of a				
46.e. Engage in any other unlawful activity? \square Yes	☐ No	group or organization that did any of the activities described in Item Number 51.a. ? Yes No				
47. Are you engaged in or, upon your entry into the States, do you intend to engage in any activity the have potentially serious adverse foreign policy consequences for the United States? Yes		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 conspired to commit, incited, endorsed, advocated to commit and the construction of the construction of the construction of the committed o	ed,	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: hijac sabotage, kidnapping, political assassination, or weapon or explosive to harm another individual substantial damage to property? Yes	use of a	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 Item Number 48.a. ? Yes	51.f. No	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 thing		Yes No				
for a group or organization that did any of the addescribed in Item Number 48.a. ? Yes	□ No 51.,	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.				
48.d. Provided money, a thing of value, services or la	oor, or					
any other assistance or support for any of the ac 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?				

Form I-485 Edition 04/01/24 Page 12 of 20

Yes No

		A-Number ► A-
	et 8. General Eligibility and Inadmissibility bunds (continued)	60. Have you EVER used any person under 15 years of age to take part in hostilities, or to help or provide services to people in combat?
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	Public Charge
	kind in which you or other persons used any type of weapon against any person or threatened to do so? Yes No	61. Are you subject to the public charge ground of inadmissibility under INA section 212(a)(4)?
55.	Have you EVER served in, been a member of, assisted, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerilla group, militia, insurgent organization, or any other armed group? Yes No	Yes No If you answered "Yes" to Item Number 61. , complete Item Numbers 62 68.d. below. If you answered "No" to Item Number 61., go to Item Number 69.a. If you need extra space to complete this section, use the space provided in Part 14. Additional Information.
56.	Have you EVER been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party (in the United States or abroad)?	62. What is the size of your household?
	Yes No	63. Indicate your annual household income.
57.	During the period from March 23, 1933 to May 8, 1945, did you ever order, incite, assist, or otherwise participate in the persecution of any person because of race, religion, national origin, or political opinion, in association with either the Nazi government of Germany or any organization or government associated or allied with the Nazi government of Germany? Yes No	\$0-27,000 \$27,001-52,000 \$52,001-85,000 \$85,001-141,000 Over \$141,000
	e you EVER ordered, incited, called for, committed, assisted, and with, or otherwise participated in any of the following:	64. Identify the total value of your household assets.
58.a.	Acts involving torture or genocide?	\$18,401-136,000
58.b.	Killing any person? Yes No	\$136,001-321,400
58.c.	Intentionally and severely injuring any person? Yes No	\$321,401-707,100 Over \$707,100
58.d.	Engaging in any kind of sexual contact or relations with any person who did not consent or was unable to consent, or was being forced or threatened? Yes No	
58.e.	Limiting or denying any person's ability to exercise religious beliefs? Yes No	
59.	Have you EVER recruited, enlisted, conscripted, or used any person under 15 years of age to serve in or help an armed force or group? Yes No	

Page 13 of 20 Form I-485 Edition 04/01/24

Yes No

00.00	t 9 Cananal Eligibility and Inc	dmissib	sility Chauna	la (cont	imuad)		
	t 8. General Eligibility and Ina				· · · · · · · · · · · · · · · · · · ·		
5.	Identify the total value of your househo			oth secu	red and unsecu	red liabili	ties).
	\$0 \$1-10,100 \$10,10)1-57,700	\$	557,701-1	86,800	Over \$	186,800
ó.	What is the highest degree or level of s	chool you	u have complete	ed?			
	Grades 1 through 11 12 th gr	ade - no	diploma H	High scho	ol diploma, GI	ED, or alt	ernative credential
	1 or more years of college credit, n	o degree		Associate	's degree	Bachel	or's degree
		_	gree (JD, MD, l	DMD, etc	z.)	Doctor	ate degree
						-	-
7.	List your certifications, licenses, skills	obtained	unrough work e	хрепепсе	e, and education	iai certiii	cates.
8.a.	Have you ever received Supplemental S (TANF), or State, Tribal, territorial, or "General Assistance" in the State conte	local, cas	h benefit progra	ıms for ii	ncome mainten		
3.b.	Have you ever received long-term insti						☐ Yes ☐ No
	If your answer to Item Number 68.a. i receipt, and the dollar amount of benefit			benefit(s) you received,	the start	and end dates of each period of
	Benefit Received	its receive	Start Da	ite	End Da	ite	Dollar Amount
	Benefit Received		Start De		Ena Da		Donar ramount
3.d.	If your answer to Item Number 68.b. is period of institutionalization, and the re				tate for each ins	stitution,	the start and end dates of each
	Institution Name/City/State		te From		ate To		Reason
	-						

Form I-485 Edition 04/01/24 Page 14 of 20

		A-Number ► A-					
Part 8. General Eligibility and Inadmissibility Grounds (continued)		Since April 1, 1997, have you been unlawfully present in the United States:					
Illegal Entries and Other Immigration Violations		78.a. For more than 180 days but less than a year, and then departed the United States? Yes No					
	Have you EVER failed or refused to attend or to remain in attendance at any removal proceeding filed against you	78.b. For one year or more and then departed the United States? Yes No					
69.b.	on or after April 1, 1997?	NOTE: You were unlawfully present in the United States if you entered the United States without being inspected and admitted or inspected and paroled, or if you legally entered the United States but you stayed longer than permitted.					
69.c.	If your answer to Item Number 69.b. is "Yes," attach a written statement explaining why you had reasonable cause.	Since April 1, 1997, have you EVER reentered or attempted to reenter the United States without being inspected and admitted or paroled after:					
70.	Have you EVER submitted fraudulent or counterfeit documentation to any U.S. Government official to obtain or attempt to obtain any immigration benefit, including a visa or entry into the United States?	 79.a. Having been unlawfully present in the United States for more than one year in the aggregate? Yes No 70.b. Having been deported evaluated or removed from the 					
71.	Have you EVER lied about, concealed, or misrepresented	79.b. Having been deported, excluded, or removed from the United States? Yes No					
	any information on an application or petition to obtain a visa, other documentation required for entry into the	Miscellaneous Conduct					
	United States, admission to the United States, or any other kind of immigration benefit? Yes No	80. Do you plan to practice polygamy in the United States? Yes No					
72.	Have you EVER falsely claimed to be a U.S. citizen (in writing or any other way)? Yes No	81. Are you accompanying another foreign national who requires your protection or guardianship but who is					
73.	Have you EVER been a stowaway on a vessel or aircraft arriving in the United States? Yes No	inadmissible after being certified by a medical officer as being helpless from sickness, physical or mental disability, or infancy, as described in INA section 232(c)?					
74.	Have you EVER knowingly encouraged, induced, assisted, abetted, or aided any foreign national to enter or	Yes No					
	to try to enter the United States illegally (alien smuggling)? Yes No	82. Have you EVER assisted in detaining, retaining, or withholding custody of a U.S. citizen child outside the United States from a U.S. citizen who has been granted					
75.	Are you under a final order of civil penalty for violating INA section 274C for use of fraudulent documents?	custody of the child?					
D	Yes No	83. Have you EVER voted in violation of any Federal, state, or local constitutional provision, statute, ordinance, or regulation in the United States? Yes No					
	noval, Unlawful Presence, or Illegal Reentry er Previous Immigration Violations	84. Have you EVER renounced U.S. citizenship to avoid					
76.	Have you EVER been excluded, deported, or removed	being taxed by the United States? Yes No					
	from the United States or have you ever departed the United States on your own after having been ordered						
	excluded, deported, or removed from the United States?	Have you EVER: 85.a. Applied for exemption or discharge from training or					
77	Yes No	service in the U.S. armed forces or in the U.S. National Security Training Corps on the ground that you are a					

Form I-485 Edition 04/01/24 Page 15 of 20

Yes No

foreign national?

Yes No

Have you EVER entered the United States without being

inspected and admitted or paroled?

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

Form I-485 Edition 04/01/24 Page 16 of 20

			_	_	_	 	_	
A-Number	▶	Α-						
	-							

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)							
Interpreter'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)							

Form I-485 Edition 04/01/24 Page 17 of 20

Part 11. Interpreter's Contact Information	Preparer's Mailing Address						
Certification, and Signature (continued)	3.a. Street Number and Name						
Interpreter's Certification	3.b.						
I certify, under penalty of perjury, that:	3.c. City or Town						
I am fluent in English and which is the same language specified in Part 10. , Item Num	ber 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 have a superior and his order and his	her 3.f. Province						
answer to every question. The applicant informed me that he she understands every instruction, question, and answer on the							
application, including the Applicant's Declaration and Certification , and has verified the accuracy of every answer.	3.h. Country						
T							
Interpreter's Signature 7.a. Interpreter's Signature (sign in ink)	Preparer's Contact Information						
, and interpreted a signature (sign in this)	4. Preparer's Daytime Telephone Number						
7.b. Date of Signature (mm/dd/yyyy)	<u> </u>						
	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	7.a. I am not an attorney or accredited representative but have prepared this application on behalf of the applicant and with the applicant's consent.						
1.a. Preparer's Family Name (Last Name)	7.b. I am an attorney or accredited representative and 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.						

Form I-485 Edition 04/01/24 Page 18 of 20

A-Number ►	A-								
------------	-----------	--	--	--	--	--	--	--	--

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

Preparer's Certification

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

Preparer's Signature (sign in ink)		
Date of Signature (mm/dd/yyyy)		
	Date of Signature (mm/dd/yyyy)	Date of Signature (mm/dd/yyyy)

instructs you to do so at the interview.

Part 13. Signature at Interview

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

Form I-485 Edition 04/01/24 Page 19 of 20

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 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.					5.d.						
	Family Name (Last Name)										
1.b.	Given Name (First Name)										
1.c.	Middle Name					6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
2.	A-Number (if	any) 🕨	A-			6.d.					
3.a.	Page Number	3.b.	Part Numbe	3.c.	Item Number	0.u.					
3.d.											
4.a. 4.d.	Page Number	4.b.	Part Numbe	r 4.c.	Item Number	7.a. 7.d.	Page Number	7.b.	Part Number	7.c.	Item Number

Form I-485 Edition 04/01/24 Page 20 of 20