

Application to Register Permanent Residence or Adjust Status

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-485OMB No. 1615-0023
Expires 03/31/2023

		F	or USC	CIS Use	Only	
Preference Category:			Recei	pt		Action Block
Country Chargeable:						
Priority Date:						
Date Form I-693 Received:						
Applicant Interview Interview Interview Using Interview			_	249 3, Act of 9/1 n Adjustment		
	To be c	ompleted by an	attorney	or accred	ited represe	ntative (if any).
Select this box if Form G-28 is attached.	Volag Nu			ey State B	ar Number	Attorney or Accredited Representative USCIS Online Account Number (if any)
NOTE TO ALL APPLICATION Instructions, U.S. Citizensh Part 1. Information of the for lawful permanent r Your Current Legal N	About Your esidence)	ou (Person app	s (USCIS) may deny	Family Nan (Last Name Given Nam (First Name	ne e e e e e e e e e e e e e e e e e e
nickname) 1.a. Family Name (Last Name) 1.b. Given Name (First Name)				4.a.	Family Nam (Last Name Given Nam (First Name	ne one one one one one one one one one o
1.c. Middle Name				4.c.	Middle Nan	,
Other Names You Have Used Since Birth (if					er Inform	ation About You
NOTE: Provide all other names you have ever used, including your family name at birth, other legal names, nicknames, aliases, and assumed names. If you need extra space to complete this section, use the space provided in Part 14. Additional Information .				5.	NOTE: In include any connection the space pr	addition to providing your actual date of birth, other dates of birth you have used in with any legal names or non-legal names in rovided in Part 14. Additional Information .
2.a. Family Name (Last Name)				6.	Sex [Male Female
2.b. Given Name (First Name)				7.	City or Tow	vn of Birth
2.c. Middle Name						

			A-Number ► A-
Par	et 1. Information About You (Person applying	Soc	ial Security Card
for 8.	Country of Birth	14.	Has the Social Security Administration (SSA) ever officially issued a Social Security card to you? Yes No
9.	Country of Citizenship or Nationality		If you answered "Yes," provide the information requested in Item Number 15.
10.	Alien Registration Number (A-Number) (if any) ► A-	15.	Provide your U.S. Social Security Number (SSN). •
	NOTE: If you have EVER used other A-Numbers, include the additional A-Numbers in the space provided in Part 14. Additional Information.	16.	Do you want the SSA to issue you a Social Security card? (You must also answer "Yes" to Item Number 17. Consent for Disclosure , to receive a card).
11.	USCIS Online Account Number (if any)	17.	Consent for Disclosure: I authorize disclosure of information from this application to the SSA as required for the purpose of assigning me an SSN and issuing me a
U.S	S. Mailing Address		Social Security Card.
12.a	In Care Of Name (if any)	Rec	ent Immigration History
12.b	Street Number and Name		ide the information for Item Numbers 18 24. if you last red the United States using a passport or travel document.
12.c.	Apt. Ste. Flr.	18.	Passport Number Used at Last Arrival
	City or Town 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
noni abou	mmigrant) and you do not want USCIS to send notices at this application to your home, you may provide an native and/or safe mailing address.	22.	Nonimmigrant Visa Number from this Passport (if any)
	In Care Of Name (if any)		e of Last Arrival into the United States City or Town
13.b	Street Number	20.4.	Chy of Town
13.c.	and Name Description: Apt. Ste. Flr.	23.b.	. State

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13.d. City or Town

13.f. ZIP Code

13.e. State

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

	_				
A-Number ► A-					

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

When	ı I la	st arrived	in th	e Un	iite	d St	ate	s, 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 inspe			-			-		-			s (fo	or
25.c.		Came into parole.	the	Uni	ted	Sta	ites	witl	hou	t ad	mis	sior	ı or	
25.d.		Other:												
If you	ı wer	e issued a	Forn	n I-9	4 A	rriv	al-I	Depa	artu	re R	eco	rd N	Jun	nber:
26.a.	For	m I-94 Arr	ival-	-Dep	artı	ure	Red	cord	Nu	mb	er			
			•											
26.b.	Exp	iration Da	te of	Aut	hoı	ize	d St	tay S	Sho	wn	on l	Forr	n I-	.94
	(mn	n/dd/yyyy))											
26.c.		us on Forr oled, if par			or e	xan	nple	e, cl	ass	of a	dm	issio	on,	or
27.	What is your current immigration status (if it has changed since your arrival)?						ged							
Provide your name exactly as it appears on your Form I-94 (if any)														
28.a.		nily Name st Name)												
28.b.	_	en Name st Name)												
28.c.	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.):

1.a. Family-based	l
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		Immediate relative of a U.S. citizen, Form I-130
		Other relative of a U.S. citizen or relative of a lawful permanent resident under the family-based preference categories, Form I-130
		Person admitted to the United States as a fiancé(e) or child of a fiancé(e) of a U.S. citizen, Form I-129F (K-1/K-2 Nonimmigrant)
		Widow or widower of a U.S. citizen, Form I-360
		VAWA self-petitioner, Form I-360
1.b.	Em	ployment-based
		Alien worker, Form I-140
		Alien entrepreneur, Form I-526
1.c.	Spe	ecial Immigrant
		Religious worker, Form I-360
		Special immigrant juvenile, Form I-360
		Certain Afghan or Iraqi National, Form I-360 or Form DS-157
		Certain international broadcaster, Form I-360
		Certain G-4 international organization or family member or NATO-6 employee or family member, Form I-360
1.d.	Asy	vlee or Refugee
		Asylum status (INA section 208), Form I-589 or Form I-730

1.

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

1.e. Human Trafficking Victim or Crime Victim

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

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

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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	rmation.								
3.	Receipt Number of Underlying Petition (if any)								
4.	Priority Date from Underlying Petition (if any)								
(mm/dd/yyyy)									
child	ou are a derivative applicant (the spouse or unmarried I 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)								
Par	rt 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	ation of U.S. Embassy or U.S. Consulate								
2.a.	City								
2.b.	Country								
3.	Decision (for example, approved, refused, denied, withdrawn)								
4.	Date of Decision (mm/dd/yyyy)								

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

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

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

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	t 4. Information About Your Parents ntinued)	3.	How many times have you been married (including annulled marriages and marriages to the same person)?
7.	Current City or Town of Residence (if living)		
8.	Current Country of Residence (if living)	•	ormation About Your Current Marriage cluding if you are legally separated)
		-	u are currently married, provide the following information it your current spouse.
Info	ormation About Your Parent 2	Curr	ent Spouse's Legal Name
Paren	at 2's Legal Name	4.a.	Family Name (Last Name)
	Family Name (Last Name)	4.b.	Given Name (First Name)
9.b.	Given Name (First Name)	4.c.	Middle Name
9.c.	Middle Name	5.	A-Number (if any)
Paren	at 2's Name at Birth (if different than above)		► A-
10.a.	Family Name (Last Name)	6.	Current Spouse's Date of Birth (mm/dd/yyyy)
10.b.	Given Name (First Name)	7.	Date of Marriage to Current Spouse (mm/dd/yyyy)
10.c.	Middle Name		
11.	Date of Birth (mm/dd/yyyy)	Curr	ent Spouse's Place of Birth
	Date of Bitti (illin/dd/yyyy)	8.a.	City or Town
12.	Sex Male Female		
13.	City or Town of Birth	8.b.	State or Province
14.	Country of Birth	8.c.	Country
15.	Current City or Town of Residence (if living)	Place	e of Marriage to Current Spouse
		9.a.	City or Town
16.	Current Country of Residence (if living)		
		9.b.	State or Province
D	4.5. T. C 41 41 4 V N/ 4.1 TV: 4		
Par	t 5. Information About Your Marital History	9.c.	Country
1.	What is your current marital status?		
	Single, Never Married Married Divorced	10.	Is your current spouse applying with you?
	Widowed Marriage Annulled		Yes No
	Legally Separated		
2.	If you are married, is your spouse a current member of the U.S. armed forces or U.S. Coast Guard?		
	N/A Yes No		

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Part 5. Information About Your Marital History (continued)

Information About Prior Marriages (if any)

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

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

11.a.	Family Name (Last Name)		
11.b.	Given Name (First Name)		
11.c.	Middle Name		
12.	Prior Spouse's	Date of Birth (mm/dd/	уууу)
13.	Date of Marria	ge to Prior Spouse (mr	n/dd/yyyy)
Place	of Marriage to	Prior Spouse	
14.a.	City or Town		
14.b.	State or Provin	ice	
14 c	Country		
14.0	Country		
15.	•	with Prior Spouse Leg	ally Ended
	(mm/dd/yyyy)		
Place	Where Marriag	ge with Prior Spouse Le	egally Ended
16.a.	City or Town		
16.b.	State or Provin	ice	
16.c.	Country		
	,		

Part 6. Information About Your Children

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

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

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

Child 1

Curre	ent Legal Name	
2.a.	Family Name (Last Name)	
2.b.	Given Name (First Name)	

2.c. Middle Name

).	A-Number (if any)							
		•	A -					

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

5.	Country of Birth						

6. Is this child applying with you? Yes No

Child 2

Current Legal Name

7.a. Family Name (Last Name)

7.b. Given Name (First Name)

7.c. Middle Name

8. A-Number (if any)

► A-				

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

10. Country of Birth

11. Is this child applying with you? Yes No

A-Number ► A-

	t 6. Information About You atinued)	r Children		t 8. General Eligibility and In ounds	admissibility
12.a. 12.b.	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, any way associated with any organization, foundation, party, club, society the United States or in any other local including any military service? It answered "Yes" to Item Number 1. It bers 2 13.b. below. If you need extention, use the space provided in Part mation . If you answered "No," but arer, provide an explanation of the event espace provided in Part 14. Addition	ation, association, or similar group in tion in the world Yes No complete Item ra space to complete 14. Additional re unsure of your ts and circumstances
14.	Date of Birth (mm/dd/yyyy)			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		Dates	s of Membership or Dates of Involvem	nent
	Black or African American		5.a.	From (mm/dd/yyyy)	
	American Indian or Alaska Nati		5.b.	To (mm/dd/yyyy)	
	Native Hawaiian or Other Pacif	ic Islander			
3.	Height Feet	Inches		nization 2 Name of Organization	
4.	Weight	Pounds	6.	Name of Organization	
5.	Eye Color (Select only one box)		7.a.	City or Town	
	Black Blue	Brown	7 .a.	City of Town	
	Gray Green	Hazel	7.b.	State or Province	
	Maroon Pink	Unknown/Other			
6.	Hair Color (Select only one box)		7.c.	Country	
	Bald (No hair) Black	Blond		-	
	☐ Brown ☐ Gray	Red	8.	Nature of Group	
	Sandy White	Unknown/Other			

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Par	t 8. General Eligibility and In	admissibility	20.	Have you EVER had a prior final order of exclusion,
	ounds (continued)	adding sibility		deportation, or removal reinstated? Yes No
	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		23.	Have you EVER applied for any kind of relief or
10.	Name of Organization			protection from removal, exclusion, or deportation? Yes No
11.a.	City or Town		24.a	Have you EVER been a J nonimmigrant exchange visitor who was subject to the two-year foreign residence requirement?
11.b.	State or Province		***	
11.c.	Country		Nun	nu answered "Yes" to Item Number 24.a. , complete Item nbers 24.b 24.c. If you answered "No" to Item Number , skip to Item Number 25.
			24.b	Have you complied with the foreign residence
12.	Nature of Group			requirement?
Dates	s of Membership or Dates of Involvem	nent	24.c.	Have you been granted a waiver or has Department of State issued a favorable waiver recommendation letter for you? Yes No
13.a.	From (mm/dd/yyyy)			
13.b.	To (mm/dd/yyyy)		Cri	minal Acts and Violations
think you a an ex	ver Item Numbers 14 80.b. Choose is correct. If you answer "Yes" to any answer "No," but are unsure of your planation of the events and circumstarded in Part 14. Additional Information Have you EVER been denied admissional States? Have you EVER been denied a visa to the correct of the property of the correct of the	y questions (or if r answer), provide nces in the space ion. ion to the United Yes No	ques other enfo have ques Unit "Yes Part that	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 "to Item Numbers 25 45., use the space provided in 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
16.	Have you EVER worked in the Unite authorization?	ed States without Yes No	exan	nple, no charges filed, charges dismissed, jail, probation, munity service).
17. 18.	Have you EVER violated the terms of nonimmigrant status? Are you presently or have you EVER	or conditions of your Yes No	25.	Have you EVER been arrested, cited, charged, or detained for any reason by any law enforcement official (including but not limited to any U.S. immigration official or any official of the U.S. armed forces or U.S. Coast Guard)?
10.	exclusion, rescission, or deportation p		• -	les live
19.	Have you EVER been issued a final deportation, or removal?	Yes No order of exclusion, 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

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	rt 8. General Eligibility and Inadmissibility ounds (continued)	35.	Have you EVER engaged in prostitution or are you coming to the United States to engage in prostitution? Yes No
27.	Have you EVER pled guilty to or been convicted of a crime or offense (even if the violation was subsequently expunged or sealed by a court, or if you were granted a pardon, amnesty, a rehabilitation decree, or other act of	36.	Have you EVER directly or indirectly procured (or attempted to procure) or imported prostitutes or persons for the purpose of prostitution? Yes No
	clemency)?	37.	Have you EVER received any proceeds or money from prostitution?
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	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
	arrest, parole, alternative sentencing, drug or alcohol treatment, rehabilitative programs or classes, probation, or community service)? Yes No	39.	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.	Have you EVER been convicted of two or more offenses (other than purely political offenses) for which the combined sentences to confinement were five years or more?	42.	Have you EVER trafficked a person into involuntary servitude, peonage, debt bondage, or slavery? Trafficking includes recruiting, harboring, transporting, providing, or obtaining a person for labor or services through the use of force, fraud, or coercion. Yes No
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 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	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
	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?		you EVER knowingly aided, assisted, conspired, or colluded with others in money laundering or do you seek to enter the United States to engage in such activity? Yes No

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Yes No

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

48.d. Provided money, a thing of value, services or labor, or

described in Item Number 48.a.?

any other assistance or support for any of the activities

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Yes No

dates and location of the circumstances, in the space provided

in Part 14. Additional Information.

	et 8. General Eligibility and Inadmissibility ounds (continued)	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
52.	Have you EVER assisted or participated in selling, providing, or transporting weapons to any person who, to your knowledge, used them against another person? Yes No	60.	Have you EVER used any person under 15 years of age to take part in hostilities, or to help or provide services to people in combat? Yes No
53.	Have you EVER worked, volunteered, or otherwise served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons? Yes No	52. - locat	FE: If you answered "Yes" to any part of Item Numbers 60. , explain what occurred, including the dates and tion of the circumstances, in the space provided in Part 14. itional Information.
54.	Have you EVER been a member of, assisted, or	Pul	blic Assistance
	participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so? Yes No	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
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	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 (other than emergency medical treatment)?
56.	Have you EVER been a member of, or in any way		∐ Yes ∐ No
	affiliated with, the Communist Party or any other	Ille	gal Entries and Other Immigration Violations
	totalitarian party (in the United States or abroad)? Yes No	63.a	. Have you EVER failed or refused to attend or to remain
57.	During the period from March 23, 1933 to May 8, 1945, did you ever order, incite, assist, or otherwise participate		in attendance at any removal proceeding filed against you on or after April 1, 1997? Yes No
	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	63.b	. If your answer to Item Number 63.a. is "Yes," do you believe you had reasonable cause? Yes No
	organization or government associated or allied with the Nazi government of Germany? Yes No	63.c	. If your answer to Item Number 63.b. is "Yes," attach a written statement explaining why you had reasonable cause.
	e you EVER ordered, incited, called for, committed, assisted and with, or otherwise participated in any of the following:	64.	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
58.a.	Acts involving torture or genocide?		visa or entry into the United States? Yes No
58.b.	Killing any person? Yes No	65.	Have you EVER lied about, concealed, or misrepresented any information on an application or petition to obtain a
	Intentionally and severely injuring any person? Yes No Engaging in any kind of sayual contest or relations with		visa, other documentation required for entry into the United States, admission to the United States, or any other kind of immigration benefit? Yes No
3 0. 0.	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 EVER falsely claimed to be a U.S. citizen (in writing or any other way)? Yes No
58.e.	Limiting or denying any person's ability to exercise religious beliefs? Yes No	67.	Have you EVER been a stowaway on a vessel or aircraft arriving in the United States? Yes No

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			A-Number ► A-
	General Eligibility and Inadmissibility ls (continued)	<i>Mis</i> 74.	Scellaneous Conduct Do you plan to practice polygamy in the United States?
abet ente	re you EVER knowingly encouraged, induced, assisted, ted, or aided any foreign national to enter or to try to er the United States illegally (alien smuggling)? Yes No you under a final order of civil penalty for violating a section 274C for use of fraudulent documents? Yes No	75.	Yes No 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
	al, Unlawful Presence, or Illegal Reentry revious Immigration Violations	76.	Have you EVER assisted in detaining, retaining, or withholding custody of a U.S. citizen child outside the United States from a U.S. citizen who has been granted custody of the child? Yes No
fron Unit	e you EVER been excluded, deported, or removed in the United States or have you ever departed the ted States on your own after having been ordered uded, deported, or removed from the United States?	77.	Have you EVER voted in violation of any Federal, state, or local constitutional provision, statute, ordinance, or regulation in the United States? Yes No
	Yes No re you EVER entered the United States without being sected and admitted or paroled? Yes No	78.	Have you EVER renounced U.S. citizenship to avoid being taxed by the United States? Yes No
United Sta	ril 1, 1997, have you been unlawfully present in the ates: more than 180 days but less than a year, and then		Applied for exemption or discharge from training or service in the U.S. armed forces or in the U.S. National
	arted the United States? Yes No		Security Training Corps on the ground that you are a foreign national? Yes No
72.b. For	one year or more and then departed the United States? Yes No	79.b	Been relieved or discharged from such training or service on the ground that you are a foreign national? Yes No
you entere admitted o	You were unlawfully present in the United States if ed the United States without being inspected and or inspected and paroled, or if you legally entered the ates but you stayed longer than permitted.	79.c.	Been convicted of desertion from the U.S. armed forces? Yes No
Since Apr	ril 1, 1997, have you EVER reentered or attempted to e United States without being inspected and admitted	80.a	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
more 73.b. Hav	ing been unlawfully present in the United States for the than one year in the aggregate? Yes No ring been deported, excluded, or removed from the ted States? 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)?

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	t 9. Accommodations for Individuals With abilities and/or Impairments	2. At my request, the preparer named in Part 12.,
	E: Read the information in the Form I-485 Instructions re completing this part.	prepared this application for me based only upon information I provided or authorized.
1.	Are you requesting an accommodation because of your	Applicant's Contact Information
	disabilities and/or impairments? Yes No	3. Applicant's Daytime Telephone Number
	If you answered "Yes" to Item Number 1. , select any applicable box in Item Numbers 2.a 2.c. and provide an answer.	4. Applicant's Mobile Telephone Number (if any)
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	5. Applicant's Email Address (if any)
	language (for example, American Sign Language).):	Applicant's Declaration and Certification
2.b.	☐ I am blind or have low vision and request the following accommodation:	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.
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.)	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.
Info	et 10. Applicant's Statement, Contact ormation, Declaration, Certification, and nature	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:
Instr	E: Read the Penalties section of the Form I-485 uctions before completing this part. You must file Form 5 while in the United States.	I reviewed and understood all of the information contained in, and submitted with, my application; and
	olicant's Statement	2) All of this information was complete, true, and correct at the time of filing.
	TE: Select the box for either Item Number 1.a. or 1.b. If cable, select the box for Item Number 2.	I certify, under penalty of perjury, that all of the information in my application and any document submitted with it were
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.	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.
1.b.	The interpreter named in Part 11. read to me every question and instruction on this application and my answer to every question in	
	a language in which I am fluent, and I understood everything.	

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 Interpreter's Contact Information Interpreter's Daytime Telephone Number Interpreter's Mobile Telephone Number (if any) 						
umber (if any)						
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Part 10., Item Number the identified language opplication and his or her						
t informed me that he or ion, and answer on the Declaration and						
racy of every answer.						
Interpreter's Signature7.a. Interpreter's Signature (sign in ink)						
Declaration, and						
ring this Applicant						
t the preparer.						
me)						
ne)						
on Name (if any)						

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A-Number	>	A-					

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

Pre	parer'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
Pre	parer's Contact Information
4.	Preparer's Daytime Telephone Number
٠.	Treparer's Baytime Telephone (value)
5.	Preparer's Mobile Telephone Number (if any)
6.	Preparer's Email Address (if any)
Pre	parer'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.
	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.

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.

Prep	oarer's Sig	nature				
8.a.	Preparer's S	ignature	(sign in ink)			
8.b.	Date of Sign	nature (m	m/dd/yyyy)			
instr	TE: Do not cucts you to	do so at	the intervie	w.	USCIS OI	licer
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Pa	rt 14. Additi	ional I	nformatio	n		5.a.	Page Number	5.b.	Part Number	5.c.	Item Number
within space to co sheet at the Num sign	u need extra spa in this application than what is promplete and file that of paper. Type the top of each shall ber, and Item Item Item Item Item Item Item Item	on, use to covided, with thite or printed eet; indi Number	the space belt, you may make application at your name cate the Pag	ow. If you ake copie a or attach and A-Nu e Numbe	ou need more s of this page a separate umber (if any) r, Part	5.d.					
	Family Name (Last Name)										
1.b.	Given Name (First Name)										
1.c.	Middle Name					6.a.	Page Number	6.b.	Part Number	6.c.	Item Number
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4.a. 4.d.	Page Number	4.b.	Part Numbe	r 4.c.	Item Number	7.a. 7.d.	Page Number	7.b.	Part Number	7.c.	Item Number

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