START HERE - Type or Print (Use black ink)	For USCIS Use Only
Part 1. Information About You	Returned Receipt
Family Name (Last Name)Given Name (First Name)Middle Name	
Address - Street Number and Name	Apt. No. Resubmitted
	Kesubilitied
C/O (in care of)	
City State ZIP 0	Code Reloc Sent
Date of Birth (mm/dd/yyyy) Country of Birth	
Country of Citizenship/Nationality U.S. Social Security No. (<i>if any</i>) A-Numb	er (<i>if any</i>) Reloc Rec'd
Date of Last Arrival (<i>mm/dd/yyyy</i>) I-94 Number	
Current USCIS Status Expires on (mm/dd/yyyy)	Applicant Interviewed
Part 2. Application Type (Check one)	Section of Law
I am applying for an adjustment to permanent resident status because:	\Box Sec. 209(a), INA
a. \Box An immigrant petition giving me an immediately available immigrant v	
that has been approved. (Attach a copy of the approval notice, or a relat immigrant juvenile, or special immigrant military visa petition filed wit	tive, special \Box Sec. 13, Act of 9/11/57 \Box Sec. 245, INA
application that will give you an immediately available visa number, if	
b. My spouse or parent applied for adjustment of status or was granted law	vful \Box Sec. 2 Act of 11/2/66
permanent residence in an immigrant visa category that allows derivative for spouses and children.	
c. I entered as a K-1 fiancé(e) of a U.S. citizen whom I married within 90	Country Chargeable
entry, or I am the K-2 child of such a fiancé(e). (Attach a copy of the fia	ancé(e)
petition approval notice and the marriage certificate.)	Eligibility Under Sec. 245
d. \square I was granted asylum or derivative asylum status as the spouse or child granted asylum and am eligible for adjustment.	of a person Approved Visa Petition Dependent of Principal Alien
e. I am a native or citizen of Cuba admitted or paroled into the United Stat	Special Immigrant
January 1, 1959, and thereafter have been physically present in the Unit	ted States
for at least 1 year.	Preference
f. \square I am the husband, wife, or minor unmarried child of a Cuban described (e), and I am residing with that person, and was admitted or paroled into	
States after January 1, 1959, and thereafter have been physically present	
United States for at least 1 year.	
g. \Box I have continuously resided in the United States since before January 1,	, 1972.
h. 🗌 Other basis of eligibility. Explain (for example, I was admitted as a refu	igee, my
status has not been terminated, and I have been physically present in the States for 1 year after admission). If additional space is needed, see Pag	ge 3 of the
instructions.	
I am already a permanent resident and am applying to have the date I wa	s granted To be Completed by
permanent residence adjusted to the date I originally arrived in the Unite a nonimmigrant or parolee, or as of May 2, 1964, whichever date is later,	d States as and: Attorney or Representative, if any Fill in box if Form G-28 is attached to
(Check one)	represent the applicant.
i. \Box I am a native or citizen of Cuba and meet the description in (e) above.	VOLAG No
j. I am the husband, wife, or minor unmarried child of a Cuban and meet t description in (f) above.	he ATTY State License No.

Pa	rt 3. Processing Information						
	City/Town/Village of Birth		Current Occupation				
	Your Mother's First Name		Your Father's First Name				
	Give your name exactly as it appears on yo	Give your name exactly as it appears on your Form I-94, Arrival-Departure Record					
	Place of Last Entry Into the United States (<i>City/State</i>)		In what status did you last enter? (<i>Visitor, student, exchange</i> visitor, crewman, temporary worker, without inspection, etc.)				
	Were you inspected by a U.S. Immigration	Officer? Yes	No 🗌				
	Nonimmigrant Visa Number		Consulate	Where V	Visa Was Issued	1	
	Date Visa Issued (mm/dd/yyyy) Gender Image: Image of the second s	lale 🗌 Female	Marital St		Single	Divorced	Widowed
	Have you ever applied for permanent reside	ent status in the U.S.?			ive date and pla disposition.)	ace of	🗌 No
В.	3. List your present spouse and all of your children (include adult sons and daughters). (If you have none, write "None." If space is needed, see Page 3 of the instructions.)				e." If additional		
	Family Name (Last Name)	Given Name (First Name)			Middle Initial	Date of Birt	h (<i>mm/dd/</i> yyyy)
	Country of Birth	Relationship A-Nu		A-Nun	hber (<i>if any</i>)	Applying w	ith you?
						Yes 🗌	No 🗌

vith you?
No 🗌
th (<i>mm/dd/yyyy</i>)
vith you?
No 🗌
th (<i>mm/dd/yyyy</i>)
vith you?
No 🗌
th (<i>mm/dd/yyyy</i>)
vith you?
No 🗌
rth (<i>mm/dd/yyyy</i>)
vith you?
No 🗌

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Part 3. Processing Information (Continued)

C. List your present and past membership in or affiliation with every organization, association, fund, foundation, party, club, society, or similar group in the United States or in other places since your 16th birthday. Include **any military service** in this part. If none, write "None." Include the name of each organization, location, nature, and dates of membership. If additional space is needed, attach a separate sheet of paper. Continuation pages must be submitted according to the guidelines provided on **Page 3** of the instructions under **General Instructions**.

Name of Organization	Location and Nature	Date of Membership From	Date of Membership To

Answer the following questions. (If your answer is **"Yes"** to any question, explain on a separate piece of paper. Continuation pages must be submitted according to the guidelines provided on **Page 3** of the instructions under **General Instructions**. Information about documentation that must be include with your application is also provide in this section.) Answering **"Yes"** does not necessarily mean that you are not entitled to adjust status or register for permanent residence.

1. Have you EVER, in or outside the United States:

	a.	Knowingly committed any crime of moral turpitude or a drug-related offense for which you have not been arrested?	Yes	No
	b.	Been arrested, cited, charged, indicted, convicted, fined, or imprisoned for breaking or violating any law or ordinance, excluding traffic violations?	Yes	No
	c.	Been the beneficiary of a pardon, amnesty, rehabilitation decree, other act of clemency, or similar action?	Yes	No
	d.	Exercised diplomatic immunity to avoid prosecution for a criminal offense in the United States?	Yes	No
2.	an	ve you received public assistance in the United States from any source, including the U.S. Government or y State, county, city, or municipality (other than emergency medical treatment), or are you likely to receive blic assistance in the future?	Yes	No
3.	Ha	ve you EVER:		
	a.	Within the past 10 years been a prostitute or procured anyone for prostitution, or intend to engage in such activities in the future?	Yes	No
	b.	Engaged in any unlawful commercialized vice, including, but not limited to, illegal gambling?	Yes	No
	c.	Knowingly encouraged, induced, assisted, abetted, or aided any alien to try to enter the United States illegally?	Yes	No
	d.	Illicitly trafficked in any controlled substance, or knowingly assisted, abetted, or colluded in the illicit trafficking of any controlled substance?	Yes	No
4.	me suj	ve you EVER engaged in, conspired to engage in, or do you intend to engage in, or have you ever solicited embership or funds for, or have you through any means ever assisted or provided any type of material oport to any person or organization that has ever engaged or conspired to engage in sabotage, kidnapping, litical assassination, hijacking, or any other form of terrorist activity?	Yes	No

Part 3. Processing Information (<i>Continued</i>)
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5.	Do you intend to engage in the United States in:		
	a. Espionage?	Yes	No
	b. Any activity a purpose of which is opposition to, or the control or overthrow of, the Government of the United States, by force, violence, or other unlawful means?	Yes	No
	c. Any activity to violate or evade any law prohibiting the export from the United States of goods, technology, or sensitive information?	Yes	No
6.	Have you EVER been a member of, or in any way affiliated with, the Communist Party or any other totalitarian party?	Yes	No
7.	Did you, during the period from March 23, 1933 to May 8, 1945, in association with either the Nazi Government of Germany or any organization or government associated or allied with the Nazi Government of Germany, ever order, incite, assist, or otherwise participate in the persecution of any person because of race, religion, national origin, or political opinion?	Yes	No
8.	Have you EVER been deported from the United States, or removed from the United States at government expense, excluded within the past year, or are you now in exclusion, deportation, removal, or rescission proceedings?	Yes	No
9.	Are you under a final order of civil penalty for violating section 274C of the Immigration and Nationality Act (INA) for use of fraudulent documents or have you, by fraud or willful misrepresentation of a material fact, ever sought to procure, or procured, a visa, other documentation, entry into the United States, or any immigration benefit?	Yes	No 🗌
10.	Have you EVER left the United States to avoid being drafted into the U.S. Armed Forces?	Yes	No
11.	Have you EVER been a J nonimmigrant exchange visitor who was subject to the 2-year foreign residence requirement and have not yet complied with that requirement or obtained a waiver?	Yes	No
12.	Are you now withholding custody of a U.S. citizen child outside the United States from a person granted custody of the child?	Yes	No
13.	Do you plan to practice polygamy in the United States?	Yes	No
14.	Have you EVER ordered, incited, called for, committed, assisted, helped with, or otherwise participated in any of the following:		
	a. Acts involving torture or genocide?	Yes	No
	b. Killing any person?	Yes	No
	c. Intentionally and severely injuring any person?	Yes	No
	d. Engaging in any kind of sexual contact or relations with any person who was being forced or threatened?	Yes	No
	e. Limiting or denying any person's ability to exercise religious beliefs?	Yes	No
15.	Have you EVER:		
	a. Served in, been a member of, assisted in, or participated in any military unit, paramilitary unit, police unit, self-defense unit, vigilante unit, rebel group, guerrilla group, militia, or insurgent organization?	Yes	No
	b. Served in any prison, jail, prison camp, detention facility, labor camp, or any other situation that involved detaining persons?	Yes	No
16.	Have you EVER been a member of, assisted in, or participated in any group, unit, or organization of any kind in which you or other persons used any type of weapon against any person or threatened to do so?	Yes	No

Part 3. Processing Information (Continued)	
17. Have you EVER assisted or participated in selling or providing weapons to any person who to your knowledge used them against another person, or in transporting weapons to any person who to your knowledge used them against another person?	Yes No
18. Have you EVER received any type of military, paramilitary, or weapons training?	Yes No
Part 4. Accommodations for Individuals With Disabilities and/or Impairments (See Page 7 of the before completing this section.)	e instructions
Are you requesting an accommodation because of your disability(ies) and/or impairment(s)?	Yes No
If you answered "Yes," check any applicable box:	
a. I am deaf or hard of hearing and request the following accommodation(s) (if requesting a sign-langu indicate which language (e.g., American Sign Language)):	age interpreter,
b. I am blind or sight-impaired and request the following accommodation(s):	
c. I have another type of disability and/or impairment (describe the nature of your disability(ies) and/o accommodation(s) you are requesting):	r impairment(s) and
Part 5 Signature (Read the information on penalties on Page 8 of the instructions before completin	a this saction Vou

t 5. Signature (*Read the information on penalties on* **Page 8** *of the instructions before completing this section. You must file this application while in the United States.*)

Your Registration With U.S. Citizenship and Immigration Services

"I understand and acknowledge that, under section 262 of the Immigration and Nationality Act (INA), as an alien who has been or will be in the United States for more than 30 days, I am required to register with U.S. Citizenship and Immigration Services (USCIS). I understand and acknowledge that, under section 265 of the INA, I am required to provide USCIS with my current address and written notice of any change of address within **10** days of the change. I understand and acknowledge that USCIS will use the most recent address that I provide to USCIS, on any form containing these acknowledgements, for all purposes, including the service of a Notice to Appear should it be necessary for USCIS to initiate removal proceedings against me. I understand and acknowledge that if I change my address that I provided to USCIS. I further understand and acknowledge that, if removal proceedings are initiated against me and I fail to attend any hearing, including an initial hearing based on service of the Notice to Appear at the most recent address that I provided to USCIS or as otherwise provided by law, I may be ordered removed in my absence, arrested, and removed from the United States."

Selective Service Registration

The following applies to you if you are a male at least 18 years of age, but not yet 26 years of age, who is required to register with the Selective Service System: "I understand that my filing Form I-485 with U.S. Citizenship and Immigration Services (USCIS) authorizes USCIS to provide certain registration information to the Selective Service System in accordance with the Military Selective Service Act. Upon USCIS acceptance of my application, I authorize USCIS to transmit to the Selective Service System my name, current address, Social Security Number, date of birth, and the date I filed the application for the purpose of recording my Selective Service registration as of the filing date. If, however, USCIS does not accept my application, I further understand that, if so required, I am responsible for registering with the Selective Service by other means, provided I have not yet reached 26 years of age."

Part 5. Signature (Continued)

Applicant's Statement (Check one)

I can read and understand English, and I have read and understand each and every question and instruction on this form, as well as my answer to each question.

Each and every question and instruction on this form, as well as my answer to each question, has been read to me in the language, a language in which I am fluent, by the person named in **Interpreter's Statement and Signature**. I understand each and every question and instruction on this form, as well as my answer to each question.

I certify, under penalty of perjury under the laws of the United States of America, that the information provided with this application is all true and correct. I certify also that I have not withheld any information that would affect the outcome of this application.

I authorize the release of any information from my records that U.S. Citizenship and Immigration Services (USCIS) needs to determine eligibility for the benefit I am seeking.

		Date	Daytime Phone Number
Signature (Applicant)	Print Your Full Name	(mm/dd/yyyy)	(include area code)

NOTE: If you do not completely fill out this form or fail to submit required documents listed in the instructions, you may not be found eligible for the requested benefit, and this application may be denied.

Interpreter's Statement and Signature

I certify that I am fluent in English and the below-mentioned language.

Language Used (language in which applicant is fluent)

I further certify that I have read each and every question and instruction on this form, as well as the answer to each question, to this applicant in the above-mentioned language, and the applicant has understood each and every instruction and question on the form, as well as the answer to each question.

		Date	Phone Number
Signature (Interpreter)	Print Your Full Name	(mm/dd/yyyy)	(include area code)

Part 6. Signature of Person Preparing Form, If Other Than Above

I declare that I prepared this application at the request of the above applicant, and it is based on all information of which I have knowledge.
Date Phone Number

Signature	Print Your Full Name		(mm/dd/yyyy)	(include area code)
Firm Name and Address		E-Mail A	ddress (if any)	