U.S. Citizenship and Immigration Services

Do Not Write in This Block - For USCIS Use Only (Except G-28 Block Below)										
Classification	Action Block									
Priority Date						•				
					completed by A 2-28 is attached	·	or Represent	ative, if any		
					ney's State Lic).			
D										
Remarks:	n hlack ink									
START HERE - Type or print in black ink. Part 1. Information about you.										
Family		Given			Middle					
Name Address:		Name			Name					
In care of										
Number and Street							Apt. #			
	State or			C			Zip/Postal			
City Co	Province untry		Social Secu	Country []] A#	Code			
	Birth		(if any)			$\int_{0}^{\infty} d\pi$)			
If you are in the United States, provide the following information: Date of Arrival (mm/dd/yyyy) I-94 #										
Current Nonimmigrant Status Daytime Phone # Expires (mm/dd/yyyy) with Area Code										
Part 2. Application type. (Check one)										
a. This petition is based or				n a targeted	employment a	area for v	which the rec	quired		
amount of capital invested has been adjusted downward. b. This petition is based on an investment in a commercial enterprise in an area for which the required amount of capital invested has been adjusted upward.										
c. This petition is based on an investment in a commercial enterprise that is not in either a targeted area or in an upward adjustment area.										
Part 3. Information about your investment.										
Name of commercial enterprise in which funds are invested										
Street Address										
Phone # with Area Code			organized as tion, partnershi	ip, etc.)						
Kind of business (e.g. furniture manufacturer)		I	Date establishe (mm/dd/yyyy)	ed	I	RS Tax #	ŧ			
RECEIVED:	RESUBMITTED:		RELOC	ATED: SE			REC'D			

Part 3. Information about your investment. (Continued.)	
Date of your initial investment (mm/dd/yyyy)	Amount of your initial investment \$
Your total capital investment in the enterprise to date \$	Percentage of the enterprise you own
If you are not the sole investor in the new commercial enterprise, list on ser natural) who hold a percentage share of ownership of the new enterprise and classification as an alien entrepreneur. Include the name, percentage of own under section 203(b)(5). NOTE: A "natural" party would be an individual corporation, consortium, investment group, partnership, etc.	d indicate whether any of these parties is seeking nership and whether or not the person is seeking classification
If you indicated in Part 2 that the enterprise is in a targeted employment are or in an upward adjustment area, name the county and state:	ea County State
Part 4. Additional information about the enterprise.	
Type of Enterprise (check one):	
New commercial enterprise resulting from the creation of a new bus	siness.
New commercial enterprise resulting from the purchase of an existing	
New commercial enterprise resulting from a capital investment in an	
Composition of the Petitioner's Investment:	
Total amount in U.S. bank account	\$ <u></u>
Total value of all assets purchased for use in the enterprise	s
Total value of all property transferred from abroad to the new enterprise.	\$
Total of all debt financing	\$
Total stock purchases	\$
Other (explain on separate paper)	\$
Total	\$
Income:	
When you made the investment Gross \$	Net \$
Now Gross \$	Net \$
Net worth:	
When you made investment Gross \$	Now \$

Part 5. E	mploymen	t creation in	nformati	ion.								
Number of f	ull-time emp	loyees in the e	nterprise	in U.S. (excluding	you, your s	ouse, sor	s and daugl	nters)			
When you ma	ade your initia	al investment?			Now			Differen	ce [
How many of these new jobs were created by your investment?				How many additional new jobs will be created by your additional investment?								
What is your	position, offic	ce or title with	the new co	ommercia	ıl enterpri	se?			_			
					-							
Driafly dasari	ha waur dutia	s, activities and	d ragnangil	hilitias								
briefly descri	be your dutie	s, activities and	ı responsit	omues.								
What is your	salary? \$				What is	the cost of y	our benefi	ts? \$				
Part 6. P	rocessing i	nformation	•									
Check One:												
	person named s petition is a	l in Part 1 is no	ow in the l	United St	ates and a	n application	1 to adjust	t status to po	ermanent	resident v	vill be	filed
	•	pproved.	e person n	amed in	Part 1 wi	shes to apply	for an in	nmigrant vis	sa abroad,	complete	the	
	wing for that							<i>5</i>	,	r		
C		-1:4										
	ntry of nation	· <u> </u>										
		nt residence or, permanent res										
		United States a			rint the no	ercon's foreig	n address					
11 yo	u provided a	——————————————————————————————————————		1 ait 1 , p		2130113 101012	,ii addi css	•				
If th	ne person's na	tive alphabet is	s other tha	n Roman	letters, w	rite the forei	gn addres	s in the nati	ve alphab	et:		
La a Form I 4	95 Application	on for Adjustm	ant of Sta	ntua attac	had to thi	a natition?	Yes					No
	, 11	removal procee		itus, attac	inea to tin	s petition?		(Explain or	canarata	noner)		No
•	•	the United State	_	nermicci	on?		_	(Explain of	•	/		No
				-		1				paper)		110
		Read the infor		-							44 - 4	141. 14 1
all true and co	orrect. I auth	perjury under the orize the release the benefit I and the benefit I and the benefit I are the benefit	se of any in	nformatic								
Signature								Date				
		pletely fill out t igration benefit						its listed in	the instru	ctions, yo	и тау	not be
		of person pr	<u> </u>					helow)				
	9	is application a	1 0	<u> </u>			` U		tion of wl	hich I hav	e kno	wledge
	- propured in		- requi		int Your	- Ison und it is	- ousea on]		
Signature					ame					Date		
Firm Name]				
Address								Daytime with area				