TABLE OF CHANGES – FORM Form I-526, Immigrant Petition by Alien Entrepreneur OMB Number: 1615-0026 12/14/2016

Reason for Revision: EB-5 Notice of Proposed Rulemaking

Current Page Number and Section	Current Text	Proposed Text
Page 1, Part 1. Information About You	START HERE- Type or print in black ink.	[Page 1] [No Change]
	Part 1. Information About You	
	Family Name	
	Given Name	
	Middle Name	
	Address- In Care of Name, if applicable	
	Street Number and Name	
	Apt. Number	
	City	
	State or Province	
	Country	
	Zip/Postal Code	
	Date of Birth (mm/dd/yyyy)	
	Country of Birth	
	Social Security Number (if any)	
	A-Number (if any)	
	If you are in the United States, provide the following information:	
	Date of Arrival (mm/dd/yyyy)	
	I-94 Number	

	Passport Number	
	Travel Document Number	
	Expiration Date for Passport or Travel Document	
	Country of Issuance for Passport or Travel Document	
	Current Nonimmigrant Status	
	Date Current Status Expires (mm/dd/yyyy)	
	Daytime Telephone Number (with Area Code)	
Page 1,		[Page 1]
Part 2. Application Type (Check one)	 aThis petition is based on an investment in a commercial enterprise in a targeted employment area for which the required amount of capital invested has been adjusted downward bThis 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. cThis petition is based on an investment in a commercial enterprise that is not in either a targeted area or in an upward adjustment area. 	[No Change]
Pages 1-2,	[Page 1]	[Page 1]
Part 3., Information About Your Investment	Name of commercial enterprise in which funds are invested (<i>Required Field - Do Not Leave Blank</i>) Street Address	[No Change]
	Phone Number with Area Code	
	Business organized as (corporation, partnership, etc.)	
	[Page 2] Kind of business (e.g. furniture manufacturer)	Kind of business (e.g., furniture manufacturer)

		[No Change]
	Date established (mm/dd/yyyy)	[
	IRS Tax #	
	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 separate paper the names of all other parties (natural and non- natural) who hold a percentage share of ownership of the new enterprise and indicate whether any of these parties is seeking classification as an alien entrepreneur. Include the name, percentage of ownership, and whether or not the person is seeking classification under section 203(b)(5). NOTE: A "natural" party would be an individual person, and a "non-natural" party would be an entity such as a corporation, consortium, investment group, partnership, etc.	
	enterprise is in a targeted employment area or in an upward adjustment area, name the county and State.	
	County	
	State	
Page 2,		[Page 2]
Part 4., Additional Information About the	Type of Enterprise (check one)	[No Change]
Enterprise	New commercial enterprise resulting from the creation of a new business.	
	New commercial enterprise resulting from the purchase of an existing business.	

	New commercial enterprise resulting from a capital investment in an existing business.	
	Composition of the Petitioner's Investment	
	Total amount in U.S. bank account	
	Total value of all assets purchased for use in the enterprise	
	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 the investment	
	Gross	
	Now	
Page 3,		[Page 3]
Part 5. Employment Creation Information	Number of full-time employees in the enterprise in U.S. (excluding you, your spouse, sons, and daughters)	Number of full-time employees in the enterprise in the United States (excluding you, your spouse, sons, and daughters)

	When you made your initial investment?	[No Change]
	Now	[No Change]
	Difference	
	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, office, or title with the new commercial enterprise?	
	Briefly describe your duties, activities, and responsibilities.	
	What is your salary? \$	
	What is the cost of your benefits? \$	
Page 3,		[Page 3]
Part 6. Processing Information	Check One:	[No Change]
	The person named in Part 1 is now in the United States, and an application to adjust status to permanent resident will be filed if this petition is approved.	
	If the petition is approved and the person named in Part 1 wishes to apply for an immigrant visa abroad, complete the following for that person:	
	Country of nationality	
	Country of current residence or, if now in the United States, last permanent residence abroad:	
	If you provided a United States address in Part 1 , print the person's foreign address:	
	If the person's native alphabet is other than Roman letters, write the foreign address in the native alphabet:	
	Are you in deportation or removal proceedings?	
	Yes (Explain on separate paper)	

	No	
	Have you ever worked in the United States without permission?	
	Yes (Explain on separate paper)	
	No	
Page 3, Part 7. Signature Read		[Page_3]
the information on penalties in the instructions before completing this section.	I certify, under penalty of perjury under the laws of the United States of America, that this petition and the evidence submitted with it, is all true and correct. I authorize the release of any information from my records that U.S. Citizenship and Immigration Services needs to determine eligibility for the benefit I am seeking.	[No Change]
	Signature	
	Date	
	Mobile Phone Number	
	E-Mail Address	
	NOTE: If you do not completely fill out this form or fail to submit the required documents listed in the instructions, you may not be found eligible for the immigration benefit you are seeking and this petition may be denied.	
Page 3, Part 8. Signature of the		[Page 3]
Person Preparing Form, If Other Than Above (Sign below)	I declare that I prepared this application at the request of the above person, and it is based on all information of which I have knowledge.	[No Change]
	Signature	
	Print Your Name	
	Date	

Firm Name	
Daytime phone # with area code	
Address	