



## Instructions for Supplement A to Form I-539

Department of Homeland Security  
U.S. Citizenship and Immigration Services

USCIS  
Form I-539  
OMB No. 1615-0003  
Expires 04/30/2018

### What Is the Purpose of This Form?

Use Supplement A if you are physically in the United States and are applying to U.S. Citizenship and Immigration Services (USCIS) for V nonimmigrant status. Supplement A is part of Form I-539. Follow these instructions and the instructions in Form I-539, and complete Form I-539 and Supplement A. **If you are not applying for V nonimmigrant status, you do not need to use this Supplement.**

**NOTE:** If you are filing Supplement A with Form I-539, you do not necessarily have to be in valid nonimmigrant status to obtain V nonimmigrant status in the United States. See **Who Is Eligible for V Nonimmigrant Status** below.

#### Public Benefits

Form I-539 requires that information on the receipt of public benefits by each beneficiary be included in the answers provided in **Part 5** of Form I-539. Except where the nonimmigrant classification that the alien seeks to extend, or to which the alien seeks to change, is exempted by law from the public charge inadmissibility determination under the Immigration and Nationality Act (INA) section 212(a)(4), (that is, A1, A2, G1, G2, G3, G4, NATO1, NATO2, NATO3, NATO4, NATO5, NATO6, NATO7, T1, T2, T3, T4, T5, T6, U1, U2, U3, U4, U5).

If you are currently receiving or previously received any of the benefits listed, provide evidence in the form of a letter, notice, or other agency documents that indicate whether the benefit is being received. Documentation should contain the following:

1. Name and contact information for the public benefit granting agency;
2. Name of the person receiving (or who has received) the public benefits;
3. Type and amount of benefits received; and
4. Dates of receipt and how long the benefit was received or when it is expected to end.

If you need extra space to complete this section, use the space provided in **Part 9. Additional Information**.

In the table, indicate whether or not you have ever applied for, or used, any of the following benefits:

1. Any Federal, state, local, or tribal cash assistance for income maintenance, including:
  - A. Supplemental Security Income (SSI), 42 U.S.C. 1381 et seq.;
  - B. Temporary Assistance for Needy Families (TANF), 42 U.S.C. 601 et seq.; or
  - C. Federal, state, or local cash benefit programs for income maintenance (often called “General Assistance” in the state context, but which may exist under other names);
2. The following refundable tax credits, when the credit exceeds your tax liability:
  - A. The Earned Income Tax Credit (EITC);
  - B. The Additional Child Tax Credit (ACTC); or
  - C. Premium Tax Credit (PTC) insurance subsidy through the Health Insurance Marketplace under the Patient Protection and Affordable Care Act., 42 U.S.C. 18001 et seq.; and

**3. Any of the following public benefits:**

- A.** Nonemergency benefits paid for by Medicaid, 42 U.S.C. 1396 et seq., except for services or benefits funded by Medicaid but provided under the Individuals with Disabilities Education Act (IDEA) 20 U.S.C. 1400 et seq. and for school-based non-emergency benefits provided to children who are at or below the oldest age of children eligible for secondary education as determined under state law;
- B.** Premium and Cost Sharing Subsidies for Medicare Part D, 42 U.S.C. 1395w-114;
- C.** Supplemental Nutrition Assistance Program (SNAP, or formerly called “Food Stamps”), 7 U.S.C. 2011 to 2036c; and
- D.** Any benefit for institutionalization for long-term care at Government expense.

Institutionalization for Long-Term Cares may include: Intermediate Care Facilities for People with Intellectual disability (ICF/ID), Nursing Facility (NF), Preadmission Screening & Resident Review (PASRR), Inpatient Psychiatric Services for Individuals Under Age 21, and Services for individuals 65 years of age or older in an institution for mental diseases.

### Who Is Eligible for V Nonimmigrant Status?

To be eligible for V nonimmigrant status, you must be the spouse or child of a lawful permanent resident and be the beneficiary of a properly filed Form I-130, Petition for Alien Relative, filed on or before December 21, 2000. In addition, Form I-130 must have been filed 3 or more years prior to the date of filing Supplement A to Form I-539, and be:

- 1. Still pending; or
- 2. Approved, and your beneficiary must either:
  - A.** Wait for an immigrant visa number to become available; or
  - B.** If the visa number is immediately available, you must have pending an application for adjustment of status or an application for an immigrant visa.

In addition, you must be admissible to the United States, except where the grounds of inadmissibility do not apply or have been waived. The grounds of inadmissibility that do not apply are INA sections:

- 1. 212(a)(6)(A) -- Aliens present without admission or parole;
- 2. 212(a)(7) -- Aliens without valid passports, visas, or other entry documents; and
- 3. 212(a)(9)(B) -- Aliens who were unlawfully present for more than 180 days, then departed, and seek admission while barred from doing so.

#### Additional Instructions

- 1. Select **Item Number 2.a.** in **Part 2, Application Type** of Form I-539, and indicate “V” in **Item Number 2.b.**
- 2. Use information from the qualifying Form I-130 for your response to **Part 3, Item Number 3.a.** of Form I-539.

#### Additional Evidence Requirements

In addition to the General Filing Instructions and Initial Evidence required by the Form I-539 instructions, you **must** submit:

- 1. Form I-693, Report of Medical Examination and Vaccination Record, without the vaccination supplement; and
- 2. Proof of filing of the immigrant petition that qualifies you for V nonimmigrant status, and if necessary, proof of filing of Form I-485, Application to Register Permanent Residence or Adjust Status. Proof of filing may be in the form of Form I-797, Notice of Action, that serves as a receipt or as a notice of approval, or a receipt for a filed Form I-130 or Form I-485, or notice of approval issued by a local district/field office.

If you do not have such proof, USCIS will review other forms of evidence, such as correspondence to or from USCIS regarding a pending petition.

If you do not have any of the above items, but believe you are eligible for V nonimmigrant status, you must state where and when the petition was filed, the name and alien registration number of the petitioner, and the names of all beneficiaries.

### What Is the Filing Fee?

In addition to the required application fee of **\$370** for Form I-539, you must remit the biometrics services fee of **\$85** as required by 8 CFR 103.17. If necessary, USCIS may also take your photograph and signature as part of the biometrics services requirements.

**NOTE:** The filing fee and biometric services fee are not refundable, regardless of any action USCIS takes on this application. **DO NOT MAIL CASH.** You must submit all fees in the exact amounts.

**Use the following guidelines when you prepare your checks or money orders for the Form I-539 filing fee and biometric services fee:**

1. The check or money order must be drawn on a bank or other financial institution located in the United States and must be payable in U.S. currency; **and**
2. Make the checks or money orders payable to **U.S. Department of Homeland Security.**

**NOTE:** Spell out U.S. Department of Homeland Security; do not use the initials “USDHS” or “DHS.”

**Notice to Those Making Payment by Check.** If you send us a check, USCIS will convert it into an electronic funds transfer (EFT). This means we will copy your check and use the account information on it to electronically debit your account for the amount of the check. The debit from your account will usually take 24 hours and your bank will show it on your regular account statement.

You will not receive your original check back. We will destroy your original check, but will keep a copy of it. If USCIS cannot process the EFT for technical reasons, you authorize us to process the copy in place of your original check. If your check is returned as unpayable, USCIS will re-submit the payment to the financial institution one time. If the check is returned as unpayable a second time, we will reject your application and charge you a returned check fee.

### How To Check If the Fees Are Correct

Form I-539’s filing fee is current as of the edition date in the lower left corner of this page. However, because USCIS fees change periodically, you can verify that the fees are correct by following one of the steps below.

1. Visit the USCIS website at [www.uscis.gov](http://www.uscis.gov), select “FORMS” and check the appropriate fee; or
2. Call the USCIS National Customer Service Center at **1-800-375-5283** and ask for the fee information. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.

### Fee Waiver

You may be eligible for a fee waiver under 8 CFR 103.7(c). If you believe you are eligible for a fee waiver, complete Form I-912, Request for Fee Waiver (or a written request), and submit it and any required evidence of your inability to pay the filing fee with this application. You can review the fee waiver guidance at [www.uscis.gov/feewaiver](http://www.uscis.gov/feewaiver).

### Where to File?

Please see our website at [www.uscis.gov/i-539](http://www.uscis.gov/i-539) or call our National Customer Service Center at **1-800-375-5283** for the most current information about where to file this benefit request. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.

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## Penalties

If you knowingly and willfully falsify or conceal a material fact or submit a false document with this request, we will deny the benefit you are filing for, and may deny any other immigration benefit.

In addition, you will face severe penalties provided by law, and may be subject to criminal prosecution.

## USCIS Privacy Act Statement

**AUTHORITIES:** The information requested on this form, and the associated evidence, is collected under the Immigration and Nationality Act, section 101, *et seq.*

**PURPOSE:** The primary purpose for providing the requested information on this form is to determine if you have established eligibility for the immigration benefit for which you are filing. The information you provide will be used to grant or deny the benefit sought.

**DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may delay a final decision or result in denial of your form.

**ROUTINE USES:** The information you provide on this form may be shared with other Federal, State, local, and foreign government agencies and authorized organizations following approved routine uses described in the associated published system of records notices [DHS/USCIS-007 - Benefits Information System and DHS/USCIS-ICE-CBP-001 - Alien File, Index, and National File Tracking System of Records, which can be found at [www.dhs.gov/privacy](http://www.dhs.gov/privacy)]. The information may also be made available, as appropriate, for law enforcement purposes or in the interest of national security.

## Paperwork Reduction Act

An agency may not conduct or sponsor an information collection and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 30 minutes per response, including the time for reviewing instructions and completing and submitting the form. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140; OMB No. 1615-0004.

**Do not mail your completed Form I-539 to this address.**