# TABLE OF CHANGES – FORM Form I-864, Affidavit of Support Under Section 213A of the INA OMB Number: 1615-0075 10/10/2019

**Reason for Revision:** Edits to address previous sponsors, Notary requirements, Presidential Memo, Voluntary credit report/check

Legend for Proposed Text:

- Black font = Current text
- Red font = Changes

Expires 03/31/2020 Edition Date 03/06/2018

Current Page Number and Section	Current Text	Proposed Text
Page 1,	[Page 1]	[Page 1]
For USCIS Use Only	For USCIS Use Only	For USCIS Use Only
	Affidavit of Support Submitter Petitioner 1st Joint Sponsor 2nd Joint Sponsor Substitute Sponsor 5% Owner	Affidavit of Support Submitter Petitioner 1st Joint Sponsor 2nd Joint Sponsor Substitute Sponsor 5% Owner
		Adjusted Household Size
	Section 213A Review MEETS requirements DOES NOT MEET requirements Reviewed By: Office: Date (mm/dd/yyyy):	Section 213A Review MEETS requirements DOES NOT MEET requirements Reviewed By: Office: Date (mm/dd/yyyy):
	Number of Support Affidavits in File 1 2	Number of Support Affidavits in File 1 2
	Remarks	Remarks
	To be completed by an attorney or accredited representative (if any). Select this box if Form G-28 or Form G-28I is attached. Attorney State Bar Number (if applicable) Attorney or Accredited Representative USCIS Online Account Number (if any)	To be completed by an attorney or accredited representative (if any). Select this box if Form G - 28 or Form G - 28I is attached. Attorney State Bar Number (if applicable) Attorney or Accredited Representative USCIS Online Account Number (if any)
	► START HERE - Type or print in black ink.	► START HERE - Type or print in black ink.

Page 1,	[Page 1]	
Part 1. Basis For Filing Affidavit of Support	Part 1. Basis For Filing Affidavit of Support	[No change]
	I, am the sponsor submitting this affidavit of support because (Select <b>only one</b> box below).	
	<ul> <li>1.a. I am the petitioner. I filed or am filing for the immigration of my relative.</li> <li>1.b. I filed an alien worker petition on behalf of the intending immigrant, who is related to me as my</li> <li>1.c. I have an ownership interest of at least 5 percent in which filed an alien worker petition on behalf of the intending immigrant, who is related to me as my</li> <li>1.d. I am the only joint sponsor.</li> <li>1.e. I am the first second of two joint sponsors.</li> <li>1.f. The original petitioner is deceased. I am the substitute sponsor. I am the intending immigrant's</li> </ul>	
	NOTE: If you are filing this form as a sponsor, you must include proof of your U.S. citizenship, U.S. national status, or lawful permanent resident status.	
Page 1,	[Page 1]	[Page 1]
Part 2. Information About the Principal Immigrant	Part 2. Information About the Principal Immigrant	[No change]
	<ul><li>1.a. Family Name (Last Name)</li><li>1.b. Given Name (First Name)</li><li>1.c. Middle Name</li></ul>	
	Mailing Address  2.a. In Care Of Name  2.b. Street Number and Name  2.c. Apt./Ste./Flr. [Number]  2.d. City or Town  2.e. State  2.f. ZIP Code  2.g. Province  2.h. Postal Code  2.i. Country	
	<ul><li>Other Information</li><li>3. Country of Citizenship or Nationality</li><li>4. Date of Birth (mm/dd/yyyy)</li></ul>	<ul> <li>Other Information</li> <li>3. Country of Citizenship or Nationality</li> <li>4. Date of Birth (mm/dd/yyyy)</li> <li>5. Gender Male/Female</li> </ul>
	<ul><li>5. Alien Registration Number (A-Number) (if any)</li><li>6. USCIS Online Account Number (if any)</li><li>7. Daytime Telephone Number</li></ul>	<ul><li>6. Alien Registration Number (A-Number) (if any)</li><li>7. USCIS Online Account Number (if any)</li><li>8. Daytime Telephone Number</li></ul>
		9. Relationship to Sponsor
Page 2-3,	[Page 2]	
, , , , , , , , , , , , , , , , , , ,		[No change]

#### Part 3. Information About the Immigrants You Are Sponsoring

## Part 3. Information About the Immigrants You Are Sponsoring

**1.** I am sponsoring the principal immigrant named in **Part 2.** 

Yes No (Applicable only if you are sponsoring family members in **Part 3.** as the second joint sponsor or if you are sponsoring family members who are immigrating more than six months after the principal immigrant)

- 2. I am sponsoring the following family members immigrating at the same time or within six months of the principal immigrant named in **Part 2.** (Do not include any relative listed on a separate visa petition.)
- **3.** I am sponsoring the following family members who are immigrating more than six months after the principal immigrant.

#### Family Member 1

- 4.a. Family Name (Last Name)
- **4.b.** Given Name (First Name)
- 4.c. Middle Name
- 5. Relationship to Principal Immigrant
- 6. Date of Birth (mm/dd/yyyy)
- **7.** Alien Registration Number (A-Number) (if any)
- **8.** USCIS Online Account Number (if any)

#### Family Member 2

- 9.a. Family Name (Last Name)
- **9.b.** Given Name (First Name)
- 9.c. Middle Name
- 10. Relationship to Principal Immigrant
- 11. Date of Birth (mm/dd/yyyy)
- **12.** Alien Registration Number (A-Number) (if any)
- 13. USCIS Online Account Number (if any)

#### Family Member 3

- **14.a.** Family Name (Last Name)
- 14.b. Given Name (First Name)
- 14.c. Middle Name
- **15.** Relationship to Principal Immigrant
- **16.** Date of Birth (mm/dd/yyyy)
- **17.** Alien Registration Number (A-Number) (if any)
- 18. USCIS Online Account Number (if any)

#### Family Member 4

- 19.a. Family Name (Last Name)
- 19.b. Given Name (First Name)
- 19.c. Middle Name
- 20. Relationship to Principal Immigrant
- 21. Date of Birth (mm/dd/yyyy)
- **22.** Alien Registration Number (A-Number) (if any)
- 23. USCIS Online Account Number (if any)

	Family Member 5 24.a. Family Name (Last Name) 24.b. Given Name (First Name) 24.c. Middle Name 25. Relationship to Principal Immigrant 26. Date of Birth (mm/dd/yyyy) 27. Alien Registration Number (A-Number) (if any) 28. USCIS Online Account Number (if any)	
	[Page 3]	
	29. Enter the total number of immigrants you are sponsoring on this affidavit which includes the principal immigrant listed in Part 2., any immigrants listed in Part 3., Item Numbers 1 28. and (if applicable), any immigrants listed for these questions in Part 11. Additional Information. Do not count the principal immigrant if you are only sponsoring family members entering more than 6 months after the principal immigrant.	29. Enter the total number of immigrants you are sponsoring on this affidavit which includes the principal immigrant listed in Part 2., any immigrants listed in Part 3., Item Numbers 1.  - 28. and (if applicable), any immigrants listed for these questions in Part 12. Additional Information. Do not count the principal immigrant if you are only sponsoring family members entering more than 6 months after the principal immigrant.
Page 3,	[Page 3]	[Page 3]
Part 4. Information About You (Sponsor)	Part 4. Information About You (Sponsor)	Part 4. Information About You (Sponsor)
	<ul><li>Sponsor's Full Name</li><li>1.a. Family Name (Last Name)</li><li>1.b. Given Name (First Name)</li><li>1.c. Middle Name</li></ul>	Sponsor's Full Name 1.a. Family Name (Last Name) 1.b. Given Name (First Name) 1.c. Middle Name
	Sponsor's Mailing Address  2.a. In Care Of Name  2.b. Street Number and Name  2.c. Apt./Ste./Flr. [Number]  2.d. City or Town  2.e. State  2.f. ZIP Code  2.g. Province  2.h. Postal Code  2.i. Country  3. Is your current mailing address the same as your physical address? Yes No  If you answered "No" to Item Number 3., provide your physical address in Item  Numbers 4.a 4.h.  Sponsor's Physical Address	Sponsor's Mailing Address  2.a. In Care Of Name  2.b. Street Number and Name  2.c. Apt./Ste./Flr. [Number]  2.d. City or Town  2.e. State  2.f. ZIP Code  2.g. Province  2.h. Postal Code  2.i. Country  3. Is your current mailing address the same as your physical address? Yes No If you answered "No" to Item Number 3., provide your physical address in Item Numbers 4.a 4.h.  Sponsor's Physical Address

- **4.a.** Street Number and Name
- **4.b.** Apt./Ste./Flr. [Number]
- **4.c.** City or Town
- **4.d.** State
- **4.e.** ZIP Code
- **4.f.** Province
- **4.g.** Postal Code
- **4.h.** Country

**4.b.** Apt./Ste./Flr. [Number]

**4.c.** City or Town

**4.d.** State

4.e. ZIP Code

**4.f.** Province

**4.h.** Country

**4.g.** Postal Code

	Other Information	Other Information
	5. Country of Domicile	5. Country of Domicile
	6. Date of Birth (mm/dd/yyyy)	6. Date of Birth (mm/dd/yyyy)
	7. City or Town of Birth	7. City or Town of Birth
	8. State or Province of Birth	8. State or Province of Birth
	9. Country of Birth	9. Country of Birth
	10. U.S. Social Security Number (Required)	10. U.S. Social Security Number (Required)
	Citizenship or Residency	Citizenship or Residency
	11.a. I am a U.S. citizen.	11.a. I am a U.S. citizen.
	11.b. I am a U.S. national.	11.b. I am a U.S. national.
	11.c. I am a lawful permanent resident.	11.c. I am a lawful permanent resident.
	<ul><li>12. Sponsor's A-Number (if any)</li><li>13. Sponsor's USCIS Online Account Number</li></ul>	12. Sponsor's A-Number (if any)
	(if any)	13. Sponsor's USCIS Online Account Number (if any)
	Military Service (To be completed by petitioner	Military Service (To be completed by petitioner
	sponsors only.)	sponsors only.)
	<b>14.</b> I am currently on <b>active duty</b> in the U.S. Armed Forces or U.S. Coast Guard. Yes No	<b>14.</b> I am currently on <b>active duty</b> in the U.S. Armed Forces or U.S. Coast Guard. Yes No
		Sponsor's Bank Account Information
		15.a. Account Type
		Checking
		Savings
		<b>15.b.</b> Account Holder's Name
		Family Name (Last Name)
		Given Name (First Name)
		Middle Name
		<b>15.c.</b> Name(s) of Joint Account Holders (if any)
		Family Name (Last Name)
		Given Name (First Name)
		Middle Name
		<b>15.d.</b> Institution Name
		15.e. Account Number 15.f. Routing Number
Page 4,	[Page 4]	[Page 4]
Part 5. Sponsor's Household Size	For USCIS Use Only	[Deleted]
	Part 5. Sponsor's Household Size	Part 5. Sponsor's Household Size
	NOTE: Do not count any member of your household more than once.	NOTE: Do not count any member of your household more than once.
	nouschold more than once.	nouschold more than once.
	Persons you are sponsoring in this affidavit:	Individuals you are sponsoring in this affidavit:
	1. Provide the number you entered in Part 3., Item Number 29.	1. Provide the number you entered in Part 3., Item Number 29.
	Persons NOT sponsored in this affidavit:	Persons NOT sponsored in this affidavit:
	2. Yourself. 1	2. Yourself. 1
	3. If you are currently married, enter "1" for	<b>3.</b> If you are currently married, enter "1" for
	your spouse.	your spouse.
	<b>4.</b> If you have dependent children, enter the	<b>4.</b> If you have dependent children, enter the
	number here.	total number of dependent children here.

	<b>5.</b> If you have any other dependents, enter the number here.	<b>5.</b> If you have any other dependents, enter the total number of other dependents here.
	<b>6.</b> If you have sponsored any other persons on Form I-864 or Form I-864EZ who are now lawful permanent residents, enter the number here.	[Deleted]
	7. OPTIONAL: If you have siblings, parents, or adult children with the same principal residence who are combining their income with yours by submitting Form I-864A, enter the number here.	<b>6.</b> Optional: If you have siblings, parents, or adult children with the same principal residence who are combining their income with yours by submitting Form I-864A, enter the total number of people here:
	8. Add together Part 5., Item Numbers 1 7. and enter the number here.  Household Size:	[Deleted]
Page 4, Part 6. Previously Submitted	[New]	Part 6. Previously Submitted Affidavits of Support
Affidavits of Support		1. Have you submitted Form I-864 or Form I-864EZ for any individuals other than those named on this form? Yes No
		<b>2.</b> If you answered "Yes" to <b>Item Number 1.</b> , enter the total number of individuals for whom you previously submitted Form I-864 or Form I-864EZ.
		[fillable field]
Page 4.5	[Page 4]	3. Provide the following information about each individual for whom you previously submitted Form I-864 or Form I-864EZ. If you need more space to provide the information, use Part 12. Additional Information. You do not need to include any individual for whom your sponsorship obligation has ended, that is, if you know that: 1) the individual became a United States citizen, 2) the individual is currently a lawful permanent resident that has worked or can be credited with 40 qualifying quarters of coverage, 3) the individual abandoned or lost his or her lawful permanent resident status, 4) the individual is deceased, or 5) the individual is obtaining a new grant of adjustment of status while in removal proceedings based on a new affidavit of support, if one is required.  a. Sponsored Individual's Name b. Date of Birth c. Alien Registration Number
Page 4-5, Part 6. Sponsor's	[Page 4]	
Employment and Income	Part 6. Sponsor's Employment and Income	Part 7. Sponsor's Employment and Income
	<ol> <li>Employed as a/an</li> <li>Name of Employer 1</li> <li>Name of Employer 2 (if applicable)</li> <li>Self-Employed as a/an (Occupation)</li> <li>Retired Since (mm/dd/yyyy)</li> <li>Unemployed Since (mm/dd/yyyy)</li> </ol>	<ol> <li>Employed as a/an</li> <li>Name of Employer 1</li> <li>Name of Employer 2 (if applicable)</li> <li>Self-Employed as a/an (Occupation)</li> <li>Retired Since (mm/dd/yyyy)</li> <li>Unemployed Since (mm/dd/yyyy)</li> </ol>

7. My current individual annual income is: \$

Income you are using from any other person who was counted in your household size, including, in certain conditions, the intending immigrant. (See Form I-864 Instructions.)

Please indicate name, relationship, and income.

#### Person 1

- 8. Name
- **9.** Relationship
- 10. Current Income \$

#### Person 2

- **11.** Name
- 12. Relationship
- 13. Current Income \$

#### Person 3

- **14.** Name
- **15.** Relationship
- 16. Current Income \$

#### Person 4

- **17.** Name
- 18. Relationship
- 19. Current Income \$

#### [Page 5]

For USCIS Use Only

#### Household Size

1 2 3 4 5 6 7 8 9 Other

#### **Poverty Guideline**

Year: 20 Poverty Line: \$

#### Remarks

- **20.** My Current Annual Household Income (Total all lines from Part 6. Item Numbers 7., **10.**, **13.**, **16.**, and **19.**; the total will be compared to Federal Poverty Guidelines on Form I-864P.) \$
- **21.** The people listed in **Item Numbers 8.**, **11.**, **14.**, and **17.** have completed Form I-864A. I am filing along with this affidavit all necessary Form I-864As completed by these people.
- **22.** One or more of the people listed in **Item Numbers 8.**, **11.**, **14.**, and **17.** do not need to complete Form I-864A because he or she is the intending immigrant and has no accompanying dependents.

#### Name

#### **Federal Income Tax Return Information**

7. My current individual annual income is: \$

## Income you are using from any other individual who was counted in your

**household size,** including, in certain conditions, the intending immigrant. (See Form I-864 Instructions.) Please indicate name, relationship, and income.

#### Person 1

- 8. Name
- 9. Relationship
- 10. Current Income \$

#### Person 2

- **11.** Name
- 12. Relationship
- 13. Current Income \$

#### Person 3

- **14.** Name
- **15.** Relationship
- 16. Current Income \$

#### Person 4

- **17.** Name
- 18. Relationship
- 19. Current Income \$

#### [Page 5]

For USCIS Use Only

#### **Household Size**

1 2 3 4 5 6 7 8 9 Other

#### **Poverty Guideline**

Year: 20 Poverty Line: \$

#### Remarks

- **20.** My Current Annual Household Income (Total all lines from Part 7. Item Numbers 7., **10.**, **13.**, **16.**, and **19.**; the total will be compared to Federal Poverty Guidelines on Form I-864P.) \$
- **21.** The people listed in **Item Numbers 8.**, **11.**, **14.**, and **17.** have completed Form I-864A. I am filing along with this affidavit all necessary Form I-864As completed by these people.
- **22.** One or more of the people listed in **Item Numbers 8.**, **11.**, **14.**, and **17.** do not need to complete Form I-864A because he or she is the intending immigrant and has no accompanying dependents.

Name

#### Federal Income Tax Return Information

**23.a.** Have you filed a Federal income tax **23.a.** Have you filed a Federal income tax return for each of the three most recent tax return for each of the three most recent tax years? Yes No years? Yes No **NOTE:** You **MUST** attach a photocopy or **NOTE:** You **MUST** attach a photocopy or transcript of your Federal income tax return for transcript of your Federal income tax return for only the most recent tax year. only the most recent tax year. **23.b.** (Optional) I have attached photocopies or **23.b.** (Optional) I have attached photocopies or transcripts of my Federal income tax returns for transcripts of my Federal income tax returns for my second and third most recent tax years. my second and third most recent tax years. My total income (adjusted gross income on My total income (adjusted gross income on Internal Revenue Service (IRS) Form 1040EZ) Internal Revenue Service (IRS) Form 1040EZ) as reported on my Federal income tax returns as reported on my Federal income tax returns for the most recent three years was: for the most recent three years was: 24.a. Most Recent Tax Year Total Income \$ 24.a. Most Recent Tax Year Total Income \$ **24.b.** 2nd Most Recent 24.b. 2nd Most Recent **24.c.** 3rd Most Recent **24.c.** 3rd Most Recent **25.** I was not required to file a Federal income **25.** I was not required to file a Federal income tax return as my income was below the IRS tax return as my income was below the IRS required level and I have attached evidence to required level and I have attached evidence to support this. support this. [New] Credit Report Information (Optional) **26.** I have attached a copy of a recent credit report. [Page 5] Page 5-6, Part 7. Use of Assets to Part 7. Use of Assets to Supplement Income Part 8. Use of Assets to Supplement Income **Supplement Income** (Optional) (Optional) (Optional) If your income, or the total income for you and If your income, or the total income for you and your household, from Part 6., Item Numbers your household, from Part 7., Item Numbers 20. or 24.a. - 24.c., exceeds the Federal Poverty 20. or 24.a. - 24.c., exceeds the Federal Poverty Guidelines for your household size, YOU ARE Guidelines for your household size, YOU ARE **NOT REQUIRED** to complete this **Part 7**. NOT REQUIRED to complete this Part 8. Skip to Part 8. Skip to Part 9. Your Assets (Optional) Your Assets (Optional) 1. Enter the balance of all savings and checking 1. Enter the balance of all savings and checking accounts. \$ accounts. \$ **2.** Enter the net cash value of real-estate **2.** Enter the net cash value of real-estate holdings. (Net value means current assessed holdings. (Net value means current assessed value minus mortgage debt.) \$ value minus mortgage debt.) \$ 3. Enter the net cash value of all stocks, bonds, 3. Enter the net cash value of all stocks, bonds, certificates of deposit, and any other assets not certificates of deposit, and any other assets not already included in **Item Number 1.** or **Item** already included in **Item Number 1.** or **Item** Number 2. \$ Number 2. \$ **4.** Add together **Item Numbers 1. - 3.** and **4.** Add together **Item Numbers 1. - 3.** and enter the number here. TOTAL: \$ enter the number here. TOTAL: \$

> Assets from Form I-864A, Part 4., Item Number 3.d., for:

**5.a.** Name of Relative

Assets from Form I-864A (Optional)

If you need to provide information about more than one Form I-864A, use the space provided in **Part 12. Additional Information**.

**5.a.** Name of household member

	<b>5.b.</b> Your household member's assets from	<b>5.b.</b> Your household member's total assets from
	Form I-864A (optional). \$	Form I-864A, Part 4., Item Number 4. \$
	Assets of the principal sponsored immigrant (optional).	Assets of the principal sponsored immigrant (Optional)
	The principal sponsored immigrant is the person listed in <b>Part 2.</b> , <b>Item Numbers 1.a.</b> - <b>1.c.</b> Only include the assets if the principal immigrant is being sponsored by this affidavit of support.  6. Enter the balance of the sponsored immigrant's savings and checking accounts. \$ 7. Enter the net cash value of all the principal immigrant's real estate holdings. (Net value means investment value minus mortgage debt.) \$ 8. Enter the current cash value of the principal immigrant's stocks, bonds, certificates of deposit, and other assets not included in <b>Item Number 6.</b> or <b>Item Number 7.</b> \$  [Page 6]	The principal sponsored immigrant is the individual listed in Part 2., Item Numbers 1.a 1.c. Only include the assets if the principal immigrant is being sponsored by this affidavit of support.  6. Enter the balance of the sponsored immigrant's savings and checking accounts. \$  7. Enter the net cash value of all the principal immigrant's real estate holdings. (Net value means investment value minus mortgage debt.) \$  8. Enter the current cash value of the principal immigrant's stocks, bonds, certificates of deposit, and other assets not included in Item Number 6. or Item Number 7. \$
	For USCIS Use Only	[Page 6] [Deleted]
	Household Size	Household Size
	1 2 3 4 5 6 7 8 9 Other	1 2 3 4 5 6 7 8 9 Other
	Poverty Guideline Year: 20 Poverty Line: \$	Poverty Guideline Year: 20 Poverty Line: \$
	Sponsor's Household Income (Page 5, Line 10) \$ The total value of all assets, line 10, must equal 5 times (3 times for spouses and children of USC's, or 1 time for orphans to be formally adopted in the U.S.) the difference between the poverty guidelines and the sponsor's household income, line 10.	Sponsor's Household Income (Page 5, Line 10) \$ The total value of all assets, line 10, must equal 5 times (3 times for spouses and children of USC's, or 1 time for orphans to be formally adopted in the U.S.) the difference between the poverty guidelines and the sponsor's household income, line 10.
	Remarks	Remarks
	9. Add together <b>Item Numbers 6 8.</b> and enter the number here. \$	9. Add together <b>Item Numbers 6 8.</b> and enter the number here. \$
	Total Value of Assets 10. Add together Item Numbers 4., 5.b., and 9. and enter the number here. TOTAL: \$	Total Value of Assets 10. Add together Item Numbers 4., 5.b., and 9. and enter the number here. TOTAL: \$
Page 6-8,	[Page 6]	
Part 8. Sponsor's Contract, Statement, Contact Information, Declaration,	Part 8. Sponsor's Contract, Statement, Contact Information, Declaration, Certification, and Signature	Part 9. Sponsor's Contract, Statement, Contact Information, Certification, and Signature
Certification, and	<b>NOTE:</b> Read the <b>Penalties</b> section of the Form I-864 Instructions before completing this part.	<b>NOTE:</b> Read the <b>Penalties</b> section of the Form I-864 Instructions before completing this part.
Signature	Sponsor's Contract	Sponsor's Contract
	· -	• -

Please note that, by signing this Form I-864, you agree to assume certain specific obligations under the Immigration and Nationality Act (INA) and other Federal laws. The following paragraphs describe those obligations. Please read the following information carefully before you sign Form I-864. If you do not understand the obligations, you may wish to consult an attorney or accredited representative.

## What is the Legal Effect of My Signing Form I-864?

If you sign Form I-864 on behalf of any person (called the intending immigrant) who is applying for an immigrant visa or for adjustment of status to a lawful permanent resident, and that intending immigrant submits Form I-864 to the U.S. Government with his or her application for an immigrant visa or adjustment of status, under INA section 213A, these actions create a contract between you and the U.S. Government. The intending immigrant becoming a lawful permanent resident is the consideration for the contract.

Under this contract, you agree that, in deciding whether the intending immigrant can establish that he or she is not inadmissible to the United States as a person likely to become a public charge, the U.S. Government can consider your income and assets as available for the support of the intending immigrant.

#### What If I Choose Not to Sign Form I-864?

The U.S. Government cannot make you sign Form 1-864 if you do not want to do so. But if you do not sign Form I-864, the intending immigrant may not become a lawful permanent resident in the United States.

## What Does Signing Form I-864 Require Me To Do?

If an intending immigrant becomes a lawful permanent resident in the United States based on a Form I-864 that you have signed, then, until your obligations under Form I-864 terminate, you must:

A. Provide the intending immigrant any support necessary to maintain him or her at an income that is at least 125 percent of the Federal Poverty Guidelines for his or her household size (100 percent if you are the petitioning sponsor and are on active duty in the U.S. Armed Forces or U.S. Coast Guard, and the person is your husband, wife, or unmarried child under 21 years of age); and

Please note that, by signing this Form I-864, you agree to assume certain specific obligations under the Immigration and Nationality Act (INA) and other Federal laws. The following paragraphs describe those obligations. Please read the following information carefully before you sign Form I-864. If you do not understand the obligations, you may wish to consult an attorney or accredited representative.

## What is the Legal Effect of My Signing Form I-864?

If you sign Form I-864 on behalf of any individual (called the intending immigrant) who is applying for an immigrant visa or for adjustment of status to that of a lawful permanent resident, and that intending immigrant submits Form I-864 to the U.S. Government with his or her application for an immigrant visa or adjustment of status, under INA section 213A, these actions create a contract between you and the U.S. Government. The intending immigrant becoming a lawful permanent resident is the consideration for the contract.

[deleted]

#### What If I Choose Not to Sign Form I-864?

The U.S. Government cannot make you sign Form 1-864 if you do not want to do so. But if you do not sign Form I-864, the intending immigrant may not become a lawful permanent resident in the United States.

## What Does Signing Form I-864 Require Me To Do?

If an intending immigrant becomes a lawful permanent resident in the United States based on a Form I-864 that you have signed, then you must do all of the following until your obligations under this Form I-864 terminate:

A. Provide the intending immigrant any support necessary to maintain him or her at an income that is at least 125 percent of the Federal Poverty Guidelines for your household size (100 percent if you are the petitioning sponsor and are on active duty in the U.S. Armed Forces or U.S. Coast Guard, and the intending immigrant is your husband, wife, or unmarried child under 21 years of age); and

**B.** Notify U.S. Citizenship and Immigration Services (USCIS) of any change in your address, within 30 days of the change, by filing Form I-865.

#### What Other Consequences Are There?

If an intending immigrant becomes a lawful permanent resident in the United States based on a Form I-864 that you have signed, then, until your obligations under Form I-864 terminate, the U.S. Government may consider (deem) your income and assets as available to that person, in determining whether he or she is eligible for certain Federal means-tested public benefits and also for state or local means-tested public benefits, if the state or local government's rules provide for consideration (deeming) of your income and assets as available to the person.

This provision does **not** apply to public benefits specified in section 403(c) of the Welfare Reform Act such as emergency Medicaid, short-term, non-cash emergency relief; services provided under the National School Lunch and Child Nutrition Acts; immunizations and testing and treatment for communicable diseases; and means-tested programs under the Elementary and Secondary Education Act.

#### What If I Do Not Fulfill My Obligations?

If you do not provide sufficient support to the person who becomes a lawful permanent resident based on a Form I-864 that you signed, that person may sue you for this support.

#### [Page 7]

If a Federal, state, local, or private agency provided any covered means-tested public benefit to the person who becomes a lawful permanent resident based on a Form I-864 that you signed, the agency may ask you to reimburse them for the amount of the benefits they provided. If you do not make the reimbursement, the agency may sue you for the amount that the agency believes you owe.

If you are sued, and the court enters a judgment against you, the person or agency that sued you may use any legally permitted procedures for enforcing or collecting the judgment. You may also be required to pay the costs of collection, including attorney fees.

If you do not file a properly completed Form I-865 within 30 days of any change of address,

**B.** Notify U.S. Citizenship and Immigration Services (USCIS) of any change in your address, within 30 days of the change, by filing Form I-865.

#### What Other Consequences Are There?

If an intending immigrant becomes a lawful permanent resident in the United States based on a Form I-864 that you have signed, then, until your obligations under Form I-864 terminate, the U.S. Government may consider (deem) your income and assets as available to that individual, in determining whether he or she is eligible for certain Federal means-tested public benefits and also for state or local meanstested public benefits, if the state or local government's rules provide for consideration (deeming) of your income and assets as available to the individual.

This provision does **not** apply to public benefits specified in section 403(c) of the Welfare Reform Act such as emergency Medicaid, short-term, non-cash emergency relief; services provided under the National School Lunch and Child Nutrition Acts; immunizations and testing and treatment for communicable diseases; and means-tested public benefits under the Elementary and Secondary Education Act.

#### What If I Do Not Fulfill My Obligations?

If you do not provide sufficient support to the individual who becomes a lawful permanent resident based on a Form I-864 that you signed, that individual may sue you for this support.

If a Federal, state, local, or private agency provided any covered means-tested public benefit to the person who becomes a lawful permanent resident based on this Form I-864 that you signed, you are responsible for reimbursing the agency for the amount of the benefits they provided. If you do not make the reimbursement, the agency may sue you for the amount that the agency believes you owe. If you fail to reimburse the benefit granting agency, you may become ineligible to sponsor anyone in the future.

If you are sued, and the court enters a judgment against you, the individual or agency that sued you may use any legally permitted procedures for enforcing or collecting the judgment. You may also be required to pay the costs of collection, including attorney fees.

If you do not file a properly completed Form I-865 within 30 days of any change of address,

USCIS may impose a civil fine for your failing to do so.

#### When Will These Obligations End?

Your obligations under a Form I-864 that you signed will end if the person who becomes a lawful permanent resident based on that affidavit:

- **A.** Becomes a U.S. citizen:
- **B.** Has worked, or can receive credit for, 40 quarters of coverage under the Social Security Act:
- **C.** No longer has lawful permanent resident status and has departed the United States;
- **D.** Is subject to removal, but applies for and obtains, in removal proceedings, a new grant of adjustment of status, based on a new affidavit of support, if one is required; or **E.** Dies.

**NOTE:** Divorce **does not** terminate your obligations under Form I-864.

Your obligations under a Form I-864 that you signed also end if you die. Therefore, if you die, your estate is not required to take responsibility for the person's support after your death. However, your estate may owe any support that you accumulated before you died.

#### Sponsor's Statement

**NOTE:** Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.** 

- **1.a.** I can read and understand English, and I have read and understand every question and instruction on this affidavit and my answer to every question.
- **1.b.** The interpreter named in **Part 9.** read to me every question and instruction on this affidavit and my answer to every question in [Language], a language in which I am fluent, and I understood everything.
- 2. At my request, the preparer named in **Part 10.**, [Name], prepared this affidavit for me based only upon information I provided or authorized.

#### Sponsor's Contact Information

**3.** Sponsor's Daytime Telephone Number

USCIS may impose a civil fine for your failing to do so.

#### When Will These Obligations End?

Your obligations under this Form I-864 will end if the individual you are sponsoring who becomes a lawful permanent resident based on the application for which this affidavit was required:

- **A.** Becomes a U.S. citizen:
- **B.** Has worked, or can receive credit for, 40 quarters of coverage under the Social Security Act:
- C. Has abandoned or lost lawful permanent resident status and has departed the United States:
- **D.** Is subject to removal, but applies for and obtains, in removal proceedings, a new grant of adjustment of status, based on a new affidavit of support, if one is required; or
- E. Dies.

#### [deleted]

Your obligations under this Form I-864 also end if you die. Therefore, if you die, your estate is not required to take responsibility for the individual's support after your death. However, your estate may be required to reimburse a benefit granting agency for any means-tested public benefits that the intending immigrant received before you died.

**NOTE:** Divorce **does not** terminate your obligations under Form I-864.

#### Sponsor's Statement

**NOTE:** Select the box for either **Item Number 1.a.** or **1.b.** If applicable, select the box for **Item Number 2.** 

- **1.a.** I can read and understand English, and I have read and understand every question and instruction on this affidavit and my answer to every question.
- **1.b.** The interpreter named in **Part 10.** read to me every question and instruction on this affidavit and my answer to every question in [Language], a language in which I am fluent, and I understood everything.
- 2. At my request, the preparer named in **Part 11.**, [Name], prepared this affidavit for me based only upon information I provided or authorized.

#### Sponsor's Contact Information

**3.** Sponsor's Daytime Telephone Number

- **4.** Sponsor's Mobile Telephone Number (if any)
- **5.** Sponsor's Email Address (if any)

#### Sponsor's Declaration and Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS or the U.S. Department of State (DOS) may require that I submit original documents to USCIS or DOS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS or DOS may need to determine my eligibility for the benefit that I seek.

I furthermore authorize release of information contained in this affidavit, in supporting documents, and in my USCIS or DOS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I certify, under penalty of perjury, that: all of the information in my affidavit and any document submitted with it were provided or authorized by me, that I reviewed and understand all of the information contained in, and submitted with, my affidavit and that all of this information is complete, true, and correct.

- **A.** I know the contents of this affidavit of support that I signed;
- **B.** I have read and I understand each of the obligations described in **Part 8.**, and I agree, freely and without any mental reservation or purpose of evasion, to accept each of those obligations in order to make it possible for the immigrants indicated in **Part 3.** to become lawful permanent residents of the United States;
- C. I agree to submit to the personal jurisdiction of any Federal or state court that has subject matter jurisdiction of a lawsuit against me to enforce my obligations under this Form I-864;

#### [Page 8]

**D.** Each of the Federal income tax returns submitted in support of this affidavit are true copies, or are unaltered tax transcripts, of the tax returns I filed with the IRS;

[New]

- **4.** Sponsor's Mobile Telephone Number (if any)
- 5. Sponsor's Email Address (if any)

#### Sponsor's Certification

Copies of any documents I have submitted are exact photocopies of unaltered, original documents, and I understand that USCIS or the U.S. Department of State (DOS) may require that I submit original documents to USCIS or DOS at a later date. Furthermore, I authorize the release of any information from any and all of my records that USCIS or DOS may need to determine my eligibility for the benefit that I seek.

I furthermore authorize release of information contained in this affidavit, in supporting documents, and in my USCIS or DOS records, to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

I certify, under penalty of perjury, that:

**A.** I provided or authorized all of the information in my affidavit, I understand all of the information contained in, and submitted with, my affidavit, and that all of this information is complete, true, and correct;

#### [Deleted]

- **B.** That I am willing and able to receive, maintain, and provide support to the individual named in **Part 3.** at the applicable threshold set forth in the Poverty Guidelines and by statute.
- **C.** I understand that during the duration of my obligation as a sponsor, I may be sued if the

- individuals named in **Part 3.** receive meanstested benefits after admission to the United States as immigrants or after being granted adjustment of status;
- **D.** I understand that Form I-864 may be made available to any Federal, State, or local agency that may receive an application from the individuals named in **Part 3.** for Supplemental Nutrition Assistance Program (SNAP) benefits (formerly called Food Stamps), Medicaid (other than Emergency Medicaid), Supplemental Security Income, Temporary Assistance to Needy Families, or other means-tested benefits;
- E. I understand that if the individual named in Part 3. does apply for SNAP/Food Stamps, Supplemental Security Income, Medicaid (other than Emergency Medicaid) or Temporary Assistance for Needy Families or other meanstested benefits, my own income and assets may be considered in deciding the individual's application. How long my income and assets may be attributed to the individuals named in Part 3. is determined under the statutes and rules governing each specific program;
- **F.** I have read the section entitled **Sponsor and Beneficiary Liability** in the Instructions for this affidavit, and am aware of my responsibilities as a sponsor under the Social Security Act, as amended, and the Food Stamp Act, as amended;
- **G.** I agree to submit to the personal jurisdiction of any Federal state, or local court that has subject matter jurisdiction of a lawsuit against me to enforce my obligations under this Form I-864;
- **H.** Each of the Federal income tax returns submitted in support of this affidavit are true copies, or are unaltered tax transcripts, of the tax returns I filed with the IRS:
- I. I understand that, if I am related to the sponsored immigrant by marriage, the termination of the marriage (by divorce, dissolution, annulment, or other legal process) will not relieve me of my obligations under this Form I-864;
- **J.** I understand that if I fail to respond within 45 days to a request for reimbursement from a public benefit-granting agency or an appropriate government entity because the individual named in **Part 3.** received a means-tested benefit, an action may be brought against me pursuant to the affidavit of support;
- **K.** I understand that I may be subject to a civil penalty if I fail to notify U.S. Citizenship and

**E.** I understand that, if I am related to the sponsored immigrant by marriage, the termination of the marriage (by divorce, dissolution, annulment, or other legal process) will not relieve me of my obligations under this Form I-864; and

	F. I authorize the Social Security Administration to release information about me in its records to USCIS and DOS.  Sponsor's Signature 6.a. Sponsor's Signature 6.b. Date of Signature (mm/dd/yyyy)	Immigration Services (USCIS) of any change in my address, within 30 days of the change, by filing Form I-865, Sponsor's Notice of Change of Address; and  L. I authorize the Social Security Administration to release information about me in its records to USCIS and DOS.  M. I acknowledge that if I fail to meet the obligations of sponsorship, I may become ineligible to sponsor anyone in the future.  Sponsor's Signature 6.a. Sponsor's Signature 6.b. Date of Signature (mm/dd/yyyy)  Subscribed and sworn to (or affirmed) before me this [fillable field] day of [fillable field] (Month), [fillable field] (Year) at [fillable field].  My commission expires on (mm/dd/yyyy)  Signature of Notary Public  Notary Public Stamp
	NOTE TO ALL SPONSORS: If you do not completely fill out this affidavit or fail to submit required documents listed in the Instructions, USCIS or DOS may deny your affidavit.	[space for stamp]  NOTE TO ALL SPONSORS: If you do not completely fill out this affidavit or fail to submit required documents listed in the Instructions, USCIS or DOS may deny your affidavit.
Page 8, Part 9. Interpreter's Contact Information, Certification, and Signature	Part 9. Interpreter's Contact Information, Certification, and Signature Provide the following information about the interpreter.  Interpreter's Full Name 1.a. Interpreter's Family Name (Last Name) 1.b. Interpreter's Given Name (First Name) 2. Interpreter's Business or Organization Name (if any)  Interpreter's Mailing Address 3.a. Street Number and Name 3.b. Apt./Ste./Flr. [Number] 3.c. City or Town	Part 10. Interpreter's Contact Information, Certification, and Signature Provide the following information about the interpreter.  Interpreter's Full Name 1.a. Interpreter's Family Name (Last Name) 1.b. Interpreter's Given Name (First Name) 2. Interpreter's Business or Organization Name (if any)  Interpreter's Mailing Address 3.a. Street Number and Name 3.b. Apt./Ste./Flr. [Number] 3.c. City or Town
	<ul> <li>3.d. State</li> <li>3.e. ZIP Code</li> <li>3.f. Province</li> <li>3.g. Postal Code</li> <li>3.h. Country</li> </ul> Interpreter's Contact Information <ul> <li>4. Interpreter's Daytime Telephone Number</li> <li>5. Interpreter's Mobile Telephone Number (if any)</li> </ul>	<ul> <li>3.d. State</li> <li>3.e. ZIP Code</li> <li>3.f. Province</li> <li>3.g. Postal Code</li> <li>3.h. Country</li> <li>Interpreter's Contact Information</li> <li>4. Interpreter's Daytime Telephone Number</li> <li>5. Interpreter's Mobile Telephone Number (if any)</li> </ul>

#### **6.** Interpreter's Email Address (if any)

#### Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and [Language], which is the same language specified in Part 8., Item Number 1.b., and

I have read to this sponsor in the identified language every question and instruction on this affidavit and his or her answer to every question. The sponsor informed me that he or she understands every instruction, question, and answer on the affidavit, including the Sponsor's **Declaration and Certification**, and has verified the accuracy of every answer.

#### Interpreter's Signature

- **7.a.** Interpreter's Signature
- **7.b.** Date of Signature (mm/dd/yyyy)

#### **6.** Interpreter's Email Address (if any)

#### Interpreter's Certification

I certify, under penalty of perjury, that:

I am fluent in English and [Language], which is the same language specified in Part 8., Item Number 1.b., and

I have read to this sponsor in the identified language every question and instruction on this affidavit and his or her answer to every question. The sponsor informed me that he or she understands every instruction, question, and answer on the affidavit, including the Sponsor's **Certification**, and has verified the accuracy of every answer.

#### Interpreter's Signature

- **7.a.** Interpreter's Signature
- **7.b.** Date of Signature (mm/dd/yyyy)

### Page 9, Part 10. Contact Information, Declaration, and **Signature of the Person** Preparing this Affidavit, if Other Than the **Sponsor**

#### [Page 9]

Part 10. Contact Information, Declaration, and Signature of the Person Preparing this Affidavit, if Other Than the Sponsor Provide the following information about the preparer.

#### Preparer's Full Name

- **1.a.** Preparer's Family Name (Last Name)
- **1.b.** Preparer's Given Name (First Name)
- 2. Preparer's Business or Organization Name (if any)

#### Preparer's Mailing Address

- **3.a.** Street Number and Name
- **3.b.** Apt./Ste./Flr. [Number]
- **3.c.** City or Town
- **3.e.** ZIP Code
- **3.f.** Province
- **3.g.** Postal Code
- **3.h.** Country

- **3.d.** State

#### Preparer's Contact Information

- **4.** Preparer's Daytime Telephone Number
- **5.** Preparer's Mobile Telephone Number (if any)
- **6.** Preparer's Email Address (if any)

#### Preparer's Statement

- **7.a.** I am not an attorney or accredited representative but have prepared this affidavit on behalf of the sponsor and with the sponsor's consent.
- 7.b. I am an attorney or accredited representative and my representation of the sponsor in this case extends/does not extend beyond the preparation of this affidavit.

#### Part 11. Contact Information, Declaration, and Signature of the Person Preparing this Affidavit, if Other Than the Sponsor

Provide the following information about the preparer.

#### Preparer's Full Name

- **1.a.** Preparer's Family Name (Last Name)
- **1.b.** Preparer's Given Name (First Name)
- 2. Preparer's Business or Organization Name (if any)

#### Preparer's Mailing Address

- **3.a.** Street Number and Name
- **3.b.** Apt./Ste./Flr. [Number]
- **3.c.** City or Town
- 3.d. State
- **3.e.** ZIP Code
- **3.f.** Province
- **3.g.** Postal Code
- **3.h.** Country

#### Preparer's Contact Information

- **4.** Preparer's Daytime Telephone Number
- **5.** Preparer's Mobile Telephone Number (if any)
- **6.** Preparer's Email Address (if any)

#### Preparer's Statement

- **7.a.** I am not an attorney or accredited representative but have prepared this affidavit on behalf of the sponsor and with the sponsor's consent.
- **7.b.** I am an attorney or accredited representative and my representation of the sponsor in this case extends/does not extend beyond the preparation of this affidavit.

**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, or G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States, with this affidavit.

#### Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this affidavit at the request of the sponsor. The sponsor then reviewed this completed affidavit and informed me that he or she understands all of the information contained in, and submitted with, his or her affidavit, including the **Sponsor's**Declaration and Certification, and that all of this information is complete, true, and correct. I completed this affidavit based only on information that the sponsor provided to me or authorized me to obtain or use.

#### Preparer's Signature

- **8.a.** Preparer's Signature
- **8.b.** Date of Signature (mm/dd/yyyy)

**NOTE:** If you are an attorney or accredited representative, you may need to submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, or G-28I, Notice of Entry of Appearance as Attorney In Matters Outside the Geographical Confines of the United States, with this affidavit.

#### Preparer's Certification

By my signature, I certify, under penalty of perjury, that I prepared this affidavit at the request of the sponsor. The sponsor then reviewed this completed affidavit and informed me that he or she understands all of the information contained in, and submitted with, his or her affidavit, including the **Sponsor's Certification**, and that all of this information is complete, true, and correct. I completed this affidavit based only on information that the sponsor provided to me or authorized me to obtain or use.

#### Preparer's Signature

- **8.a.** Preparer's Signature
- **8.b.** Date of Signature (mm/dd/yyyy)

#### Page 10, Part 11. Additional Information

#### [Page 10]

#### Part 11. Additional Information

If you need extra space to provide any additional information within this affidavit, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this affidavit or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

- **1.a.** Family Name (Last Name)
- **1.b.** Given Name (First Name)
- 1.c. Middle Name
- **2.** A-Number (if any)
- **3.a.** Page Number
- **3.b.** Part Number
- **3.c.** Item Number
- **3.d.** [Fillable field]
- **4.a.** Page Number
- **4.b.** Part Number
- **4.c.** Item Number
- **4.d.** [Fillable field]
- **5.a.** Page Number
- **5.b.** Part Number
- **5.c.** Item Number

#### Part 12. Additional Information

If you need extra space to provide any additional information within this affidavit, use the space below. If you need more space than what is provided, you may make copies of this page to complete and file with this affidavit or attach a separate sheet of paper. Type or print your name and A-Number (if any) at the top of each sheet; indicate the **Page Number**, **Part Number**, and **Item Number** to which your answer refers; and sign and date each sheet.

- **1.a.** Family Name (Last Name)
- **1.b.** Given Name (First Name)
- **1.c.** Middle Name
- **2.** A-Number (if any)
- **3.a.** Page Number
- **3.b.** Part Number
- **3.c.** Item Number
- **3.d.** [Fillable field]
- **4.a.** Page Number
- **4.b.** Part Number
- **4.c.** Item Number
- **4.d.** [Fillable field]
- **5.a.** Page Number
- **5.b.** Part Number
- **5.c.** Item Number

<b>5.d.</b> [Fillable field]	<b>5.d.</b> [Fillable field]
<ul><li>6.a. Page Number</li><li>6.b. Part Number</li><li>6.c. Item Number</li><li>6.d. [Fillable field]</li></ul>	<ul><li>6.a. Page Number</li><li>6.b. Part Number</li><li>6.c. Item Number</li><li>6.d. [Fillable field]</li></ul>
<ul><li>7.a. Page Number</li><li>7.b. Part Number</li><li>7.c. Item Number</li><li>7.d. [Fillable field]</li></ul>	<ul><li>7.a. Page Number</li><li>7.b. Part Number</li><li>7.c. Item Number</li><li>7.d. [Fillable field]</li></ul>