

**TABLE OF CHANGES – FORM**  
**Form I-918, Supplement A, Petition for Qualifying Family Member of U-1 Recipient**  
**OMB Number: 1615-0104**  
**06/09/2020**

**Reason for Revision: Final Fee Rule.**  
**Project Phase: Post G-1056.**

Legend for Proposed Text:

- Black font = Current text
- Red font = Changes

Please note – all instances of “if any” and “if applicable” have been removed from Form I-918 Supplement A.

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Edition Date 04/24/2019

Current Page Number and Section	Current Text	Proposed Text
<b>Page 1, For USCIS Use Only</b>	[Page 1] ... To be completed by an attorney or accredited representative (if any). Select this box if Form G-28 is attached. Attorney State Bar Number (if applicable) Attorney or Accredited Representative USCIS Online Account Number (if any) ...	[Page 1] ... To be completed by an attorney or accredited <b>representative</b> . Select this box if Form G-28 is attached. Attorney State Bar <b>Number</b> Attorney or Accredited Representative USCIS Online Account <b>Number</b> ...
<b>Page 1, Part 2. Information About You (Principal)</b>	[Page 1] ... 3. Alien Registration Number (A-Number) (if any) 4. USCIS Online Account Number (if any) ...	[Page 1] ... 3. Alien Registration Number ( <b>A-Number</b> ) 4. USCIS Online Account <b>Number</b> ...
<b>Pages 1-2, Part 3. Information About Your Qualifying Family Member (Derivative)</b>	[Page 1] ... Other Names Used (Include maiden name, nicknames, and aliases, if applicable) ... 5. A-Number (if any)	[Page 1] ... Other Names Used (Include maiden name, nicknames, and <b>aliases</b> ) ... 5. <b>A-Number</b>

	<p>6. U.S. Social Security Number (if any)</p> <p>7. USCIS Online Account Number (if any)</p> <p>...</p>	<p>6. U.S. Social Security <b>Number</b></p> <p>7. USCIS Online Account <b>Number</b></p> <p>...</p>
<p><b>Page 12, Part 11. Additional Information</b></p>	<p>[Page 12]</p> <p>...</p> <p>If you need extra space to provide any additional information within this supplement, 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 supplement or attach a separate sheet of paper. Include 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.</p> <p>...</p> <p>2. A-Number (if any)</p> <p>...</p>	<p>[Page 12]</p> <p>...</p> <p>If you need extra space to provide any additional information within this supplement, 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 supplement or attach a separate sheet of paper. Include your name and A-<b>Number</b> 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.</p> <p>...</p> <p>2. <b>A-Number</b></p> <p>...</p>