Do Not Write in This Block - For USCIS Use Only (Except G-28 Block Below)								
Classification		Action Block			Fee Receipt			
Priority Data								
Priority Date	onty Date			To be completed by Attorney or Representative, if any				
		G-28 is attached						
					Attorney's State License No.			
Remarks:								
START HERE - Type or p	rint in black	x ink.						
Part 1. Information	About You							
Family Name		Given Name			Middle Name			
Address - In Care of Name, if a	applicable							
Street Number and Name						Apt. ]	Number	
City	State or Pro	ovince	Country				Zip/Postal Code	
Date of Birth ( <i>mm/dd/yyyy</i> )	Country of	ry of Birth Social Se		urity Number (if any)		A-Num	ber (if any)	
If you are in the United Stat		~ ~ ~	1:	Decenor	Number			
Date of Arrival ( <i>mm/dd/yyyy</i> )	/ <i>dd/yyyy</i> ) I-94 Number			rasspor	Passport Number			
Travel Document Number	Expiratio	piration Date for Passport or Travel Document		Country of Issuance for Passport or Travel Document				
Current Nonimmigrant Status	5 Date Cu	te Current Status Expires (mm/dd/yyyy)		Daytime Telephone Number (with Area Code)				
Part 2. Application T	ype (Check	zone)						
		vestment in a commercial e been adjusted downward.	nterprise in a	targeted	employment are	ea for which	ch the required	
<b>b.</b> This petition is bahas been adjusted	sed on an inv upward.	vestment in a commercial e	nterprise in a	in area foi	which the requ	ired amou	int of capital invested	
<b>c.</b> $\square$ This petition is base adjustment area.	sed on an inv	vestment in a commercial e	nterprise that	t is not in	either a targeted	l area or ii	n an upward	
Part 3. Information A	bout You	r Investment						
Name of commercial enterpri	se in which	funds are invested (Required	l Field - Do N	ot Leave H	Blank)			
Street Address								
	1 5	• • • /		1	<u></u>			
Phone Number with Area Coo	de Bu	siness organized as (corpor	ation, partnei	rship, etc.	)			
RECEIVED:	RESU	BMITTED:	_ RELOCATED: SENT REC'D			REC'D		

Part 3. Information About Your Invest	ment (Continued)
Kind of business (e.g. furniture manufacturer)	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
natural) who hold a percentage share of ownership of as an alien entrepreneur. Include the name, percentage	al enterprise, list on separate paper the names of all other parties (natural and non- of the new enterprise and indicate whether any of these parties is seeking classification ge of ownership, and whether or not the person is seeking classification under section adividual person, and a "non-natural" party would be an entity such as a corporation,
If you indicated in <b>Part 2</b> that the enterprise is in a ta area or in an upward adjustment area, name the coun	
Part 4. Additional Information About t	he Enterprise
Type of Enterprise (check one):  New commercial enterprise resulting from the New commercial enterprise resulting from the New commercial enterprise resulting from a c	e purchase of 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 abroa	ad 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 \$

Form I-526 (09/24/13) N Page 2

## Part 5. Employment Creation Information

Number of full-time employees in the enterprise in U.S. (excluding you, your spouse, sons, and daughters)	
When you made your initial investment? Now 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?       \$	
Part 6. Processing Information	
Check One:	
The person named in <b>Part 1</b> is now in the United States, and an application to adjust status to permanent resident will be filed if petition is approved.	this
If the petition is approved and the person named in <b>Part 1</b> wishes to apply for an immigrant visa abroad, complete the following that person:	for
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 <b>Part 1</b> , 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?	)
Have you ever worked in the United States without permission?	)
<b>Part 7.</b> Signature Read 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 in all true and correct. I authorize the release of any information from my records that U.S. Citizenship and Immigration Services needs determine eligibility for the benefit I am seeking.	
Signature Date	
Mobile Phone Number ( ) - E-Mail Address	
<b>NOTE:</b> If you do not completely fill out this form or fail to the submit the required documents listed in the instructions, you may not found eligible for the immigration benefit you are seeking and this petition may be denied.	be
Part 8. Signature of 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 knowle	dge.
Signature Print Your Date Date	
Firm Name with area code	
Address	