

**I-526, Immigrant Petition  
by Alien Entrepreneur**

Do Not Write in This Block - For USCIS Use Only (Except G-28 Block Below)		
Classification  _____	Action Block	Fee Receipt
Priority Date  _____		To be completed by Attorney or Representative, if any <input type="checkbox"/> G-28 is attached Attorney's State License No. _____
Remarks:		

**START HERE - Type or print in black ink.**

**Part 1. Information About You**

Family Name	Given Name	Middle Name
In care of Street Number and Name:		
Address:		Apt. Number
City	State or Province	Country
Date of Birth (mm/dd/yyyy)		Country of Birth
Social Security # (if any)		A # (if any)
If you are in the United States, provide the following information:		Date of Arrival (mm/dd/yyyy)
Current Nonimmigrant Status		I-94 #
Date Current Status Expires (mm/dd/yyyy)		Daytime Phone # with Area Code

**Part 2. Application Type (Check one)**

- a.  This 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.
- b.  This 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.
- c.  This petition is based on an investment in a commercial enterprise that is not in either a targeted area or in an upward adjustment area.

**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	
Phone # with Area Code	Business organized as (corporation, partnership, etc.)
Kind of business (e.g. furniture manufacturer)	Date established (mm/dd/yyyy)
IRS Tax #	

RECEIVED: \_\_\_\_\_ RESUBMITTED: \_\_\_\_\_ RELOCATED: SENT \_\_\_\_\_ REC'D \_\_\_\_\_

**Part 3. Information About Your Investment (Continued)**

Date of your initial investment (mm/dd/yyyy)	<input type="text"/>	Amount of your initial investment	\$ <input type="text"/>
Your total capital investment in the enterprise to date	\$ <input type="text"/>	Percentage of the enterprise you own	<input type="text"/>

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.

If you indicated in **Part 2** that the enterprise is in a targeted employment area or in an upward adjustment area, name the county and state: County  State

**Part 4. Additional Information About the Enterprise**

**Type of Enterprise (check one):**

- 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.....	\$	<input type="text"/>
Total value of all assets purchased for use in the enterprise.....	\$	<input type="text"/>
Total value of all property transferred from abroad to the new enterprise.....	\$	<input type="text"/>
Total of all debt financing.....	\$	<input type="text"/>
Total stock purchases.....	\$	<input type="text"/>
Other (explain on separate paper).....	\$	<input type="text"/>
<b>Total</b>	\$	<input type="text"/>

**Income:**

When you made the investment.....	Gross	\$ <input type="text"/>	Net	\$ <input type="text"/>
Now.....	Gross	\$ <input type="text"/>	Net	\$ <input type="text"/>

**Net worth:**

When you made investment.....	Gross	\$ <input type="text"/>	Now	\$ <input type="text"/>
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**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 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

**Part 7. 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 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.

Signature [ ] Date [ ]

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.

**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 knowledge.

Signature [ ] Print Your Name [ Test 6.5 ] Date [ ]

Firm Name [ Test 6.5 ] Daytime phone # with area code [ ]

Address [ ]