



Immigrant Petition for the Gold Card Program

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

USCIS
Form I-140G
OMB No. 1615-0167
Expires 05/31/2026

To be completed by an Attorney or Accredited Representative (if any).

<input type="checkbox"/> Select this box if Form G-28 or Form G-28I is attached.	Attorney State Bar Number (if applicable) <input type="text"/>	Attorney or Accredited Representative USCIS Online Account Number (if any) <input type="text"/>
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NOTE: If you do not completely fill out this form or fail to submit required documents listed in the Instructions, your petition may be rejected or denied.

Do NOT submit this form in paper. Fill it out and upload it to your MyUSCIS account.

Part 1. Information About the Petitioner

This petition is being filed by (select **only one** box):

- An individual filing on his or her own behalf (self-petitioner). **The self-petitioner is also the principal beneficiary of this petition.** The required gift to the U.S. Department of Commerce is \$1 million for the principal beneficiary, and \$1 million **per person** for any accompanying spouse or children listed on this petition.
- A corporation or similar entity (corporate petitioner) filing on behalf of an individual (principal beneficiary). The required gift to the U.S. Department of Commerce is \$2 million for the principal beneficiary, and \$1 million **per person** for any accompanying spouse or children listed on this petition.
- Total number of aliens who are requesting a Gold Card based on this petition:

NOTE: The fee for Form I-140G is \$15,000 per person and must be paid to the Department of Commerce separately from the gift amount.

- Select this box if you are requesting a Commemorative plaque.

Information About the Self-Petitioner or the Corporate Petitioner's Authorized Official

- Full Legal Name

Family Name (Last Name) <input type="text"/>	Given Name (First Name) <input type="text"/>	Middle Name (if applicable) <input type="text"/>
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- U.S. Social Security Number (if any)
- USCIS Online Account Number (if any)

- Corporate Petitioner's Authorized Official's Alien Registration Number (A-Number) (if any)

Corporate Petitioner Information

If you are a self-petitioner, skip to **Part 2. Path of Funds.**

- Registered Name
- d/b/a Name (if any)
- Date Established (mm/dd/yyyy)

Part 1. Information About the Petitioner (continued)

12. State or Country where Established or Registered

13. Organizational Structure

NOTE: If "Other" is selected, provide an explanation in **Part 12. Additional Information.**

14. Gross Annual Income \$

15. Net Annual Income \$

16. IRS Employer Identification Number (EIN) (if any)

17. USCIS Online Account Number (if any)

18. Mailing Address

In Care Of Name

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

19. Name of Parent Company or Holding Company (if any)

20. Does any foreign government have any ownership interest in or substantial control of the petitioner, as defined in the Instructions?

 Yes No

If you answered "Yes" to **Item Number 20.**, identify the foreign government and ownership interest and/or control rights below.

Foreign Government 1

Name of Foreign Government

Description of the Ownership Interest or Substantial Control

Physical Address of Foreign Government

Street Number and Name

City or Town

Province

Postal Code

Country

Part 1. Information About the Petitioner (continued)

Foreign Government 2

Name of Foreign Government

Description of the Ownership Interest or Substantial Control

Physical Address of Foreign Government

Street Number and Name

City or Town

Province

Postal Code

Country

Foreign Government 3

Name of Foreign Government

Description of the Ownership Interest or Substantial Control

Physical Address of Foreign Government

Street Number and Name

City or Town

Province

Postal Code

Country

21. Identify all beneficial owners of the petitioner, as defined in the Instructions. For each beneficial owner, provide the following information, as applicable:

Name	EIN (if any)	Date of Birth (mm/dd/yyyy) (if applicable)	U.S. Immigration Status (if any)

Part 2. Path of Funds

The gift amount must be transmitted to the Department of Commerce in accordance with the wire instructions that you will be provided **upon the completion of visa processing**. The Department of Commerce will reject the gift if the wire instructions are not executed correctly.

Gift Amount. To verify all of the funds to be used for the gift, provide the following details for each account from which the funds will be transferred. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information**.

1.a. Account 1

Legal Name of Account Owner

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Part 2. Path of Funds (continued)

Account Owner Nationality

Account Owner's Passport ID

Account Number

Country of Issuance

Total Gift Amount in Account

\$

Name of Financial Institution

Physical Location of Financial Institution

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

1.b. Account 2

Legal Name of Account Owner

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Account Owner Nationality

Account Owner's Passport ID

Account Number

Country of Issuance

Total Gift Amount in Account

\$

Name of Financial Institution

Physical Location of Financial Institution

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Part 2. Path of Funds (continued)

1.c. Account 3

Legal Name of Account Owner

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Account Owner Nationality

Account Owner's Passport ID

Account Number

Country of Issuance

Total Gift Amount in Account

Name of Financial Institution

\$

Physical Location of Financial Institution

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

2. Have you consulted with a money-service business, a third-party exchanger, or similar entity or individual Yes No to arrange the gift donation?

If you answered "No" to **Item Number 2.**, skip to **Part 3.**

If you answered "Yes" to **Item Number 2.**, identify that entity/individual in **Item Numbers 3. - 4.**

3. Name of Money-Service Business, Third-Party Exchanger, or Similar Entity or Individual

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Name of Entity (if applicable)

4. Address of Business, Entity or Individual Listed in **Item Number 3.**

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Part 3. Source of Funds

The funds listed in this section must be sufficient to pay the required gift amount (including the additional \$1 million per person for each accompanying spouse and child listed on this petition) and the already transmitted fee of \$15,000 per person.

1. Are you a corporate petitioner that is intending to rely on the original gift submitted for a previous petition in which the Gold Card Immigrant and accompanying spouse and children have abandoned their lawful permanent resident status? Yes No

If you answered "Yes" to **Item Number 1.**, provide the below information for each alien that the U.S. Citizenship and Immigration Services (USCIS) approved for the Gold Card Program and **proceed to Part 4.** If you need extra space to complete this section, use **Part 12. Additional Information.**

2.a. USCIS Receipt Number of Previous Form I-140G Petition

2.b. A-Number of the Previous Principal Beneficiary ▶ A-

2.c. Date the Previous Principal Beneficiary Abandoned U.S. Lawful Permanent Resident Status He or She Obtained Through the Gold Card Program (mm/dd/yyyy)

2.d. A-Number of the Accompanying Spouse (if applicable) ▶ A-

2.e. A-Number of the Accompanying Child (if applicable) ▶ A-

2.f. A-Number of the Accompanying Child (if applicable) ▶ A-

2.g. A-Number of the Accompanying Child (if applicable) ▶ A-

3. Net Worth of Self-Petitioner, or for Petitioning Corporations, Owner's Equity (Also Known as Shareholders' Equity) As Shown on its Most Recent Financial Statement \$

Identify each source of funding. (Select all that apply):

- 4.a. Income
- 4.b. Sale of Property
- 4.c. Proceeds from Ownership in a Business
- 4.d. Gift (including inheritance)
- 4.e. Loan
- 4.f. Legal Proceedings
- 4.g. Insurance Proceedings
- 4.h. Cryptocurrency
- 4.i. Other (Explain):

NOTE: Evidence must be submitted to verify that each chosen funding source was legally acquired and that each international wire transfer to the Department of Commerce will be conducted in accordance with U.S. law. Provide a list of the evidence submitted along with the page or exhibit numbers for each piece of evidence in **Part 12. Additional Information.** See Form I-140G Instructions for examples of acceptable evidence.

5. Do the source of funds contain a gift or loan? Yes No (go to **Item Number 7.**)

If you answered "Yes," provide the following information in **Item Numbers 6.a. - 6.g.** about the donor and/or lender.

Part 3. Source of Funds (continued)

Information about Gift Donor or Individual Lender

6.a. Biographical information about gift donor or individual lender contained in **Part 4., Item Numbers 1. - 2. and 4. - 63.**

6.b. Identify each source of the funds gifted or loaned by the gift donor or individual lender (Select all that apply):

- Income
- Sale of Property
- Proceeds from Ownership in a Business
- Gift (including inheritance)
- Loan
- Legal Proceedings
- Insurance Proceedings
- Cryptocurrency
- Other (Explain):

6.c. Explanation of the Self-Petitioner or Corporate Petitioner's Relationship to the Donor or Individual Lender. If you need extra space, use **Part 12. Additional Information.**

6.d. Was a gift donation letter or loan agreement with an individual submitted with this petition? Yes No

Information about Lending Institution

6.e. Name of Lender

6.f. Explanation of the Self-Petitioner or Corporate Petitioner's Relationship to the Lender

6.g. Was a loan agreement with a lending institution submitted with this petition? Yes No

NOTE: Evidence must be submitted to verify that the Donor and/or Lender acquired the funding amount in accordance with U.S. law. If additional space is needed, use **Part 12. Additional Information.**

Corporate Petitioner's Financial Information

If you are a self-petitioner, skip to **Part 4.**

7. If you are a corporate petitioner, provide evidence from the last 3 years on behalf of the entity, with at least one selected item from the below list (select all that were included as evidence with this petition).

- U.S. Federal Tax Returns
- Annual Reports
- Audited Financial Statements

Part 4. Information About the Principal Beneficiary Who is Requesting a Gold Card

Provide the following information about the principal beneficiary.

1. Full Legal Name

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

2. Other Names Used

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Other Information

3. Principal Beneficiary's Receipt Number

4. Date of Birth (mm/dd/yyyy)

5. Sex Male Female

Place of Birth

6.a. City/Town/Village of Birth

6.b. State or Province of Birth

6.c. Country of Birth

7.a. Country/Countries of Citizenship or Nationality

7.b. All Prior Countries of Citizenship or Nationality (if any)

7.c. Relinquished Countries of Citizenship or Nationality (if any)

8. A-Number (if any)

▶ A-

9. U.S. Social Security Number (if any)

▶

10.a. Current Passport Number/Travel Document/National ID Number

10.b. Country of Issuance

10.c. Expiration Date (mm/dd/yyyy)

Part 4. Information About the Principal Beneficiary Who is Requesting a Gold Card (continued)

11. Mailing Address

In Care Of Name (if any)

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

12. Is your current mailing address the same as your physical address?

Yes No

If you answered "No" to **Item Number 12.**, provide information on your physical address in **Item Number 13.**

13. Physical Address (if different from the address above)

In Care Of Name (if any)

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Last Arrival in the United States

14. Has the principal beneficiary ever been granted admission as a nonimmigrant, immigrant, or paroled into the United States?

Yes No

If you answered "Yes" to **Item Number 14.**, provide the following information.

15. Place and Date of Last Arrival into the United States

City or Town

State

Date of Last Arrival (mm/dd/yyyy)

16.a. Form I-94 Arrival/Departure Record Number

16.b. Expiration Date of Authorized Stay Shown on Form I-94 (mm/dd/yyyy) or Type or Print "D/S" for Duration of Status

16.c. Immigration Status on Form I-94 (for example, class of admission, or paroled, if paroled)

17.a. Passport/Travel Document/National ID Number Used at Last Arrival

17.b. Country of Issuance

17.c. Expiration Date (mm/dd/yyyy)

Part 4. Information About the Principal Beneficiary Who is Requesting a Gold Card (continued)

18. Requested U.S. Consulate or Department of State facility for visa processing

City or Town

Country

Employment History

19. Has the principal beneficiary ever been employed?

Yes No

If you answered "Yes" to **Item Number 19.**, provide the last 20 years of the principal beneficiary's employment history. Also provide any government or military positions held at any time (even if older than 20 years). List present employment first. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information.**

20. Employer Name 1

Employer Name

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Job Title

From (mm/dd/yyyy)

To (mm/dd/yyyy)

21. Employer Name 2

Employer Name

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Job Title

From (mm/dd/yyyy)

To (mm/dd/yyyy)

Part 4. Information About the Principal Beneficiary Who is Requesting a Gold Card (continued)

22. Employer Name 3

Employer Name

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Job Title

From (mm/dd/yyyy)

To (mm/dd/yyyy)

Education History

- 23. Has the principal beneficiary ever attended or received any education after completing high school (secondary school)?** Yes No

If you answered "Yes" to **Item Number 23.**, provide the principal beneficiary's education history after high school (secondary school) to present. Include schools, area of concentration, and dates attended (whether a degree was obtained or not); also include instructional or training academies, including military academies or government sponsored training. List most recent education first. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information.**

24. Education 1

Name of Institution

Type of Institution (University, Academy, Military Branch, etc.)

From (mm/dd/yyyy)

To (mm/dd/yyyy)

Degree or Certification **Obtained or Worked Toward, If No Degree Obtained**

Field or **Subject Studied** or **Majored**

List of **Honors** or **Awards**

Part 4. Information About the Principal Beneficiary Who is Requesting a Gold Card (continued)

25. Education 2

Name of Institution

Type of Institution (University, Academy, Military Branch, etc.)

From (mm/dd/yyyy)

To (mm/dd/yyyy)

Degree or Certification **Obtained or Worked Toward, If No Degree Obtained**

Field or **Subject Studied** or **Majored**

List of **Honors** or **Awards**

26. Education 3

Name of Institution

Type of Institution (University, Academy, Military Branch, etc.)

From (mm/dd/yyyy)

To (mm/dd/yyyy)

Degree or Certification **Obtained or Worked Toward, If No Degree Obtained**

Field or **Subject Studied** or **Majored**

List of **Honors** or **Awards**

Part 4. Information About the Principal Beneficiary Who is Requesting a Gold Card (continued)

Marital History

27. What is the principal beneficiary's current marital status?

- Single (Never Married) Married Divorced Widowed Separated Marriage Annulled

If the principal beneficiary is single and has never married, skip to **Item Number 33.**

28. How many times has this person been married?

29. Date of Current Marriage (if currently married) (mm/dd/yyyy)

30. Current Spouse (if current spouse is not requesting a Gold Card)

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

Date of Birth (mm/dd/yyyy) Country of Birth

31. Former Spouse 1

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

Date of Birth (mm/dd/yyyy) Country of Birth Date Marriage Ended (mm/dd/yyyy)

32. Former Spouse 2

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

Date of Birth (mm/dd/yyyy) Country of Birth Date Marriage Ended (mm/dd/yyyy)

Information About Children Who Are Not requesting a Gold Card

33. Does the principal beneficiary have any children who are not requesting a Gold Card? Yes No

If you answered "Yes" to **Item Number 33.**, provide the following information for each child that is not requesting a Gold Card.

Child 1

34. Full Legal Name

Family Name (Last Name) Given Name (First Name) Middle Name (if any)

35. Other Names Used

Family Name (Last Name) Given Name (First Name) Middle Name (if any)

36. Date of Birth (mm/dd/yyyy)

37. Sex Male Female

Part 4. Information About the Principal Beneficiary Who is Requesting a Gold Card (continued)

38. Country of Birth 39. Country of Citizenship or Nationality

40. A-Number (if any) 41. U.S. Social Security Number (if any)

42. Passport Number/Travel Document/National ID Number Used at Last Arrival

43. Country of Issuance for Passport or Travel Document

Child 2

44. Full Legal Name
Family Name (Last Name) Given Name (First Name) Middle Name (if any)

45. Other Names Used
Family Name (Last Name) Given Name (First Name) Middle Name (if any)

46. Date of Birth (mm/dd/yyyy)

47. Sex Male Female

48. Country of Birth 49. Country of Citizenship or Nationality

50. A-Number (if any) 51. U.S. Social Security Number (if any)

52. Passport Number/Travel Document/National ID Number Used at Last Arrival

53. Country of Issuance for Passport or Travel Document

Child 3

54. Full Legal Name
Family Name (Last Name) Given Name (First Name) Middle Name (if any)

55. Other Names Used
Family Name (Last Name) Given Name (First Name) Middle Name (if any)

56. Date of Birth (mm/dd/yyyy)

57. Sex Male Female

58. Country of Birth 59. Country of Citizenship or Nationality

60. A-Number (if any) 61. U.S. Social Security Number (if any)

Part 4. Information About the Principal Beneficiary Who is Requesting a Gold Card (continued)

62. Passport Number/Travel Document/National ID Number Used at Last Arrival

63. Country of Issuance for Passport or Travel Document

If you have additional children who are not requesting a Gold Card and need extra space to complete this section, use the space provided in **Part 12. Additional Information**.

Part 5. Information About the Principal Beneficiary's Spouse Who is Requesting a Gold Card

This section must be filled out for the spouse of the principal beneficiary who is also requesting a Gold Card.

1. Full Legal Name

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

2. Other Names Used

Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

Other Information

3. Date of Birth (mm/dd/yyyy)

4. Sex Male Female

Place of Birth

5.a. City/Town/Village of Birth 5.b. State or Province of Birth

5.c. Country of Birth

6.a. Country of Citizenship or Nationality

6.b. All Prior Countries of Citizenship or Nationality (if any)

6.c. Relinquished Countries of Citizenship or Nationality (if any)

7. A-Number (if any)

8. U.S. Social Security Number (if any)

9.a. Current Passport Number/Travel Document/National ID Number

9.b. Country of Issuance

9.c. Expiration Date (mm/dd/yyyy)

Part 5. Information About the Principal Beneficiary's Spouse Who is Requesting a Gold Card
(continued)

10. Mailing Address

In Care Of Name

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Last Arrival in the United States

11. Is this person in the United States?

Yes No

If you answered "Yes" to Item Number 11., provide the following information:

12. Place and Date of Last Arrival into the United States

City or Town

State

Date of Last Arrival (mm/dd/yyyy)

13.a. Form I-94 Arrival/Departure Record Number

13.b. Expiration Date of Authorized Stay Shown on Form I-94 (mm/dd/yyyy)
or Type or Print "D/S" for Duration of Status

13.c. Immigration Status on Form I-94 (for example, class of admission, or paroled, if paroled)

14. Passport/Travel Document/National ID Number Used at Last Arrival

15. Country of Issuance for Passport or Travel Document

16. Expiration Date for Passport or Travel Document (mm/dd/yyyy)

Employment History

17. Has this person ever been employed?

Yes No

If you answered "Yes" to **Item Number 17.**, provide the last 20 years of this person's employment history. Also provide any government or military positions held at any time (even if older than 20 years). List present employment first. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information.**

Part 5. Information About the Principal Beneficiary's Spouse Who is Requesting a Gold Card
(continued)

18. Employer Name 1

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Job Title

From (mm/dd/yyyy)

To (mm/dd/yyyy)

19. Employer Name 2

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Job Title

From (mm/dd/yyyy)

To (mm/dd/yyyy)

20. Employer Name 3

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Job Title

From (mm/dd/yyyy)

To (mm/dd/yyyy)

Part 5. Information About the Principal Beneficiary's Spouse Who is Requesting a Gold Card
(continued)

Education History

21. Has this person ever attended or received any education after completing high school (secondary school)? Yes No

If you answered "Yes" to **Item Number 21.**, provide this person's education history after high school (secondary school) to present. Include schools, area of concentration, and dates attended (whether a degree was obtained or not); also include instructional or training academies, including military academies or government sponsored training. List most recent education first. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information.**

22. Education 1

Name of Institution

Type of Institution (University, Academy, Military Branch, etc.)

From (mm/dd/yyyy)

To (mm/dd/yyyy)

Degree or Certification Obtained or Worked Toward, If No Degree Obtained

Field or Subject Studied or Majored

List of Honors or Awards

23. Education 2

Name of Institution

Type of Institution (University, Academy, Military Branch, etc.)

From (mm/dd/yyyy)

To (mm/dd/yyyy)

Degree or Certification Obtained or Worked Toward, If No Degree Obtained

Field or Subject Studied or Majored

List of Honors or Awards

Part 5. Information About the Principal Beneficiary's Spouse Who is Requesting a Gold Card
(continued)

24. Education 3

Name of Institution

Type of Institution (University, Academy, Military Branch, etc.)

From (mm/dd/yyyy)

To (mm/dd/yyyy)

Degree or Certification Obtained or Worked Toward, If No Degree Obtained

Field or Subject Studied or Majored

List of Honors or Awards

Marital History

25. How many times has this person been married?

26. Former Spouse 1

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Date of Birth (mm/dd/yyyy)

Country of Birth

Date Marriage Ended (mm/dd/yyyy)

27. Former Spouse 2

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Date of Birth (mm/dd/yyyy)

Country of Birth

Date Marriage Ended (mm/dd/yyyy)

Part 6. Information About the Principal Beneficiary's Children Who are Requesting a Gold Card

This section must be filled out for each child of the principal beneficiary who is also requesting a Gold Card.

1. Full Legal Name

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

2. Other Names Used

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Part 6. Information About the Principal Beneficiary's Children Who are Requesting a Gold Card
(continued)

Other Information

3. Date of Birth (mm/dd/yyyy)

4. Sex Male Female

Place of Birth

5.a. City/Town/Village of Birth

5.b. State or Province of Birth

5.c. Country of Birth

6.a. Country of Citizenship or Nationality

6.b. All Prior Countries of Citizenship or Nationality (if any)

6.c. Relinquished Countries of Citizenship or Nationality (if any)

7. A-Number (if any)

▶ A-

8. U.S. Social Security Number (if any)

▶

9.a. Passport/Travel Document/National ID Number Used at Last Arrival

9.b. Country of Issuance

9.c. Expiration Date (mm/dd/yyyy)

10. Mailing Address

In Care Of Name

Street Number and Name

Apt. Ste. Fl. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Part 6. Information About the Principal Beneficiary's Children Who are Requesting a Gold Card
(continued)

Last Arrival in the United States

11. Is this person in the United States? Yes No

If you answered "Yes" to Item Number **11.**, provide the following information:

12. Place and Date of Last Arrival into the United States

City or Town State Date of Last Arrival (mm/dd/yyyy)

13.a. Form I-94 Arrival/Departure Record Number

13.b. Expiration Date of Authorized Stay Shown on Form I-94 (mm/dd/yyyy)
or Type or Print "D/S" for Duration of Status

13.c. Immigration Status on Form I-94 (for example, class of admission, or paroled, if paroled)

14. Passport/Travel Document/National ID Number Used at Last Arrival

15. Country of Issuance for Passport or Travel Document

16. Expiration Date for Passport or Travel Document (mm/dd/yyyy)

Employment History

17. Has this person ever been employed? Yes No

If you answered "Yes" to **Item Number 17.**, provide the last 20 years of this person's employment history. Also provide any government or military positions held at any time (even if older than 20 years). List present employment first. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information.**

18. Employer Name 1

Street Number and Name Apt. Ste. Flr. Number

City or Town State ZIP Code

Province Postal Code Country

Job Title

From (mm/dd/yyyy) To (mm/dd/yyyy)

Part 6. Information About the Principal Beneficiary's Children Who are Requesting a Gold Card
(continued)

19. Employer Name 2

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Job Title

From (mm/dd/yyyy)

To (mm/dd/yyyy)

20. Employer Name 3

Street Number and Name

Apt. Ste. Flr. Number

City or Town

State

ZIP Code

Province

Postal Code

Country

Job Title

From (mm/dd/yyyy)

To (mm/dd/yyyy)

Education History

- 21.** Has this person ever attended or received any education after completing high school (secondary school)? Yes No

If you answered "Yes" to **Item Number 21.**, provide this person's education history after high school (secondary school) to present. Include schools, area of concentration, and dates attended (whether a degree was obtained or not); also include instructional or training academies, including military academies or government sponsored training. List most recent education first. If you need extra space to complete this section, use the space provided in **Part 12. Additional Information.**

22. Education 1

Name of Institution

Type of Institution (University, Academy, Military Branch, etc.)

From (mm/dd/yyyy)

To (mm/dd/yyyy)

Part 6. Information About the Principal Beneficiary's Children Who are Requesting a Gold Card
(continued)

Degree or Certification Obtained or Worked Toward, If No Degree Obtained

Field or Subject Studied or Majored

List of Honors or Awards

23. Education 2

Name of Institution

Type of Institution (University, Academy, Military Branch, etc.)

From (mm/dd/yyyy)

To (mm/dd/yyyy)

Degree or Certification Obtained or Worked Toward, If No Degree Obtained

Field or Subject Studied or Majored

List of Honors or Awards

24. Education 3

Name of Institution

Type of Institution (University, Academy, Military Branch, etc.)

From (mm/dd/yyyy)

To (mm/dd/yyyy)

Part 6. Information About the Principal Beneficiary's Children Who are Requesting a Gold Card
(continued)

Degree or Certification Obtained or Worked Toward, If No Degree Obtained

Field or Subject Studied or Majored

List of Honors or Awards

Marital History

25. What is this person's current marital status?

Single (Never Married) Married Divorced Widowed Separated Marriage Annulled

If this person is single and has never married, go to **Part 7.** for self-petitioner or **Part 8.** for corporate petitioner.

26. How many times has this person been married?

27. Date of Current Marriage (if currently married) (mm/dd/yyyy)

28. Current Spouse

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Date of Birth (mm/dd/yyyy)

Country of Birth

29. Former Spouse 1

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Date of Birth (mm/dd/yyyy)

Country of Birth

Date Marriage Ended (mm/dd/yyyy)

30. Former Spouse 2

Family Name (Last Name)

Given Name (First Name)

Middle Name (if applicable)

Date of Birth (mm/dd/yyyy)

Country of Birth

Date Marriage Ended (mm/dd/yyyy)

Part 7. Attestation of Self-Petitioner

For **Item Numbers 1. - 14.**, you should answer “Yes” to any question that applies, even if the records were sealed or otherwise cleared, or if anyone, including a judge, law enforcement officer, or attorney, told you that you no longer have a record. You should also answer “Yes” to the following questions whether it occurred here in the United States or anywhere else in the world. If you answer “Yes” to any of the questions in **Item Numbers 1. - 14.**, use the space provided in **Part 12. Additional Information** to provide an explanation and include all relevant documentation that includes why you were arrested, cited, detained, or charged; and the outcome or disposition (for example no charges filed, charges dismissed, jail, probation, community service).

1. Have the assets, associated directly or indirectly with any of your Gold Card funds, been subject to a foreign or domestic freeze order or injunction from a court or regulatory agency in the past 10 years for an offense involving financial fraud or deceit? Yes No
2. Have you, any of the entities you have legal ownership in, or the sources (direct or indirect) of your Gold Card funds ever committed, been charged with, arrested for, or convicted of a criminal or civil offense? Yes No
3. Are you, any of the entities you have legal ownership in, or the sources of your Gold Card funds engaged in, ever been engaged in, or sought to engage in any illicit trafficking in any controlled substance or in any listed chemical (as defined in section 102 of the Controlled Substances Act)? Yes No
4. Have you, any of the entities you have legal ownership in, entities you are employed by, or the sources of your Gold Card funds engaged in, ever been engaged in, or sought to engage in any activity relating to espionage, sabotage, or theft of intellectual property? Yes No
5. Are you, any of the entities you have legal ownership in, or the sources of your Gold Card funds engaged in, ever been engaged in, or sought to engage in any activity related to money laundering (as described in section 1956 or 1957 of Title 18, United States Code)? Yes No
6. Are you, any of the entities you have legal ownership in, or the sources of your Gold Card funds engaged in, ever been engaged in, or sought to engage in any terrorist activity (as defined in INA section 212(a)(3)(B))? If a company, has your company, or any of its principals ever financed or otherwise supported any terrorist activity (as defined in the Immigration and Nationality Act (INA) section 212(a)(3)(B))? Yes No
7. Are you, any of the entities you have legal ownership in, or the sources of your Gold Card funds engaged in, ever been engaged in, or sought to engage in any activity constituting or facilitating human trafficking or a human rights offense? Yes No
8. Are you engaged in, or have you ever been engaged in, or do you seek to engage in any activity described in INA section 212(a)(3)(E) (such as participating in Nazi persecutions or genocide)? Has any entity you have legal ownership in, or the sources of your Gold Card funds, financed or otherwise supported any person or organization that has participated in, or is participating in genocide? Yes No
9. Have you ever been a member of, or in any way affiliated with, the Communist Party or any totalitarian party (in the United States or abroad) as described in INA section 212(a)(3)(D)? Yes No
10. Are you, any of the entities you have legal ownership in, or the sources of your Gold Card funds engaged in, ever been engaged in, or sought to engage in a violation of any statute, regulation, or executive order regarding foreign financial transactions or foreign asset control? Yes No
11. Have you, any of the entities you have legal ownership in, or the sources of your Gold Card funds been included, during the preceding 10 years, on any U.S., foreign country, or international sanctions or watchlist? (Examples include, but are not limited to: OFAC's Specialty Designated Nationals List, the UNSC Consolidated List, the European Union Consolidated Financial Sanctions List, or the UK HM Treasury Sanctions List). Yes No
12. Are you now, or have you ever been, an agent, official, or other similar entity or representative of a foreign government entity? Yes No
13. Have your funds derived from an agency, official, or other similar entity (or representative of) a foreign government entity? Yes No
14. Are any entities you have legal ownership in, or the sources of your Gold Card funds subject to, the direct or indirect involvement of an agency, official, or other similar entity (or representative of) a foreign government entity? Yes No

Part 8. Attestation of Corporate Petitioner's Authorized Official

For **Item Numbers 1. - 14.**, you should answer “Yes” to any question that applies, even if the records were sealed or otherwise cleared, or if anyone, including a judge, law enforcement officer, or attorney, told you that you or your company no longer have a record. You should also answer “Yes” to the following questions whether it occurred in the United States or anywhere else in the world. If you answer “Yes” to any of the questions in **Item Numbers 1. - 14.**, use the space provided in **Part 12. Additional Information** to provide an explanation and include all relevant documentation that includes why you or your company were arrested, cited, detained, or charged; and the outcome or disposition (for example, no charges filed, charges dismissed, jail, probation, community service).

1. Have your company assets been subject to a foreign or domestic freeze order or injunction from a court or regulatory agency in the past 10 years for an offense involving financial fraud or deceit? Yes No
2. Has your company or your company's principals ever committed, been charged with, arrested for, or convicted of a criminal or civil offense? Yes No
3. Is your company or your company's principals engaged in, ever been engaged in, or sought to engage in any illicit trafficking in any controlled substance or in any listed chemical (as defined in section 102 of the Controlled Substances Act)? Yes No
4. Is your company or your company's principals engaged in, ever been engaged in, or sought to engage in any activity relating to espionage, sabotage, or theft of intellectual property? Has your company or any of its principals financed or otherwise supported or does it seek to finance or otherwise support any activity relating to espionage, sabotage, or theft of intellectual property? Yes No
5. Is your company or your company's principals engaged in, ever been engaged in, or sought to engage in any activity related to money laundering (as described in section 1956 or 1957 of Title 18, United States Code)? Yes No
6. Has your company or your company's principals engaged in, ever been engaged in, or sought to engage in any terrorist activity (as defined in INA section 212(a)(3)(B))? Has your company or any of its principals ever financed or otherwise supported any terrorist activity (as defined in INA section 212(a)(3)(B))? Yes No
7. Has your company or your company's principals engaged in, ever been engaged in, or sought to engage in any activity constituting or facilitating human trafficking or a human rights offense? Yes No
8. Has your company or your company's principals engaged in, ever been engaged in, or sought to engage in any activity described in INA section 212(a)(3)(E) (such as participating in Nazi persecutions or genocide)? Has your company or any of its principals financed or otherwise supported any person or organization that has participated in, or is participating in genocide? Yes No
9. Has your company or your company's principals engaged in, ever been engaged in, or sought to engage in a violation of any statute, regulation, or executive order regarding foreign financial transactions or foreign asset control? Yes No
10. Is your company or any of its principals now, or during the preceding 10 years has your company or any of its principals been included on any U.S., foreign country, or international sanctions or watchlist? (Examples include, but are not limited to: OFAC's Specialty Designated Nationals List, the UNSC Consolidated List, the European Union Consolidated Financial Sanctions List, or the UK HM Treasury Sanctions List). Yes No
11. Has your company or your company's principals ever called for sectarian violence? Yes No
12. Is your company or company's principals now, or have they ever been, an agency, official, or other similar entity (or representative of) a foreign government entity? Yes No
13. Have your company's funds derived from an agency, official, or other similar entity (or representative of) a foreign government entity? Yes No
14. Is your company's ownership subject to the direct or indirect involvement of an agency, official, or other similar entity or representative of a foreign government entity? Yes No

Part 9. Contact Information, Certification, and Signature of the Self-Petitioner or the Corporate Petitioner's Authorized Official

Self-Petitioner's or Authorized Official's Contact Information

1. Family Name (Last Name) Given Name (First Name) Middle Name (if applicable)

2. Title

3. Daytime Telephone Number 4. Mobile Telephone Number (if any)

5. Email Address (if any)

Self-Petitioner's Certification

I certify, under penalty of perjury, that I provided or authorized all of the responses and information contained in and submitted with my petition, I read and understand or, if interpreted to me in a language in which I am fluent by the interpreter listed in **Part 10.**, understood, all of the responses and information contained in, and submitted with, my petition, and that all of the responses and the information are complete, true, and correct. Furthermore, I authorize the release of any information from any and all of my records that USCIS may need to determine my eligibility for an immigration request and to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

Authorized Official's Certification

If filing this petition on behalf of an organization, I certify, under penalty of perjury, that I am authorized to do so by the organization:

- 1) I reviewed and provided or authorized all of the responses and information in my petition;
- 2) I understood all of the responses and information contained in, and submitted with, my petition; and
- 3) All of the responses and information were complete, true, and correct at the time of filing.

Furthermore, I authorize the release of any information from any and all of my records as authorized signatory and the petitioner's records that USCIS may need to determine the petitioner's eligibility for an immigration request and to other entities and persons where necessary for the administration and enforcement of U.S. immigration law.

Self-Petitioner's or Authorized Official's Signature

6. Self-Petitioner's or Authorized Official's Signature Date of Signature (mm/dd/yyyy)

Part 10. Interpreter's Contact Information, Certification, and Signature

Provide the following information about the interpreter.

Interpreter's Full Name

1. Family Name (Last Name) Given Name (First Name)

2. Business or Organization Name (if any)

Part 10. Interpreter's Contact Information, Certification, and Signature (continued)

Interpreter's Contact Information

3. **Daytime** Telephone Number

4. **Mobile** Telephone Number (if any)

5. **Email** Address (if any)

Interpreter's Certification

I certify, under penalty of perjury, that I am fluent in English and , and I have interpreted every question on the petition and Instructions and interpreted the petitioner's or authorized signatory's answers to the questions in that language, and the petitioner or authorized signatory informed me that he or she understood every instruction, question, and answer on the petition.

Interpreter's Signature

6. Interpreter's Signature

Date of Signature (mm/dd/yyyy)

Part 11. Contact Information, Certification, and Signature of the Person Preparing this Petition, if Other Than the Self-Petitioner or Authorized Official

Provide the following information about the preparer.

Preparer's Full Name

1. **Family** Name (Last Name)

Given Name (First Name)

2. **Business** or Organization Name

Preparer's Contact Information

3. **Daytime** Telephone Number

4. **Mobile** Telephone Number (if any)

5. **Email** Address (if any)

Preparer's Certification

I certify, under penalty of perjury, that I prepared this petition for the petitioner or authorized signatory at his or her request and with express consent and that all of the responses and information contained in and submitted with the petition are complete, true, and correct and reflects only information provided by the petitioner or authorized signatory. The petitioner or authorized signatory reviewed the responses and information and informed me that he or she understands the responses and information in or submitted with the petition.

Preparer's Signature

6. Preparer's Signature

Date of Signature (mm/dd/yyyy)

Part 12. Additional Information

If you need extra space to provide any additional information within this petition, 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 petition 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. Page Number Part Number Item Number

2. Page Number Part Number Item Number

3. Page Number Part Number Item Number

4. Page Number Part Number Item Number

5. Page Number Part Number Item Number

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