



# Instructions to Supplement to Application for Regional Center Under the Immigrant Investor Program

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

USCIS  
Form I-924A  
OMB No. 1615-0061  
Expires 01/31/2015

## What Is the Purpose of This Supplement?

This supplement is used to demonstrate a regional center's continued eligibility for the regional center designation. Each approved regional center must file Form I-924A, Supplement to Form I-924, for each fiscal year (October 1 through September 30) on or before December 29 of the calendar year in which the fiscal year ended. An approved regional center with a designation letter dated on or before September 30 of a particular calendar year must file its initial Form I-924A on or before December 29 of the same calendar year. An approved regional center with a designation letter dated on or after October 1 of a particular calendar year must file its initial Form I-924A on or before December 29 of the following calendar year.

Failure to file Form I-924A in a timely manner for each fiscal year in which the regional center has been designated to participate in the Immigrant Investor Program will result in a notice of intent to terminate the participation. Such failure may ultimately result in the termination of the approval and designation of the regional center.

## General Instructions

U.S. Citizenship and Immigration Services (USCIS) provides forms free of charge through the USCIS Web site. In order to view, print, or fill out our forms, you should use the latest version of Adobe Reader, which you can download for free at <http://get.adobe.com/reader/>. If you do not have Internet access you may call the USCIS National Customer Service Center at 1-800-375-5283 and ask that we mail a form to you.

**Signature.** Each supplement must be properly signed and filed. For all signatures on this supplement, USCIS will not accept a stamped or typewritten name in place of a signature.

**Filing Fee.** Each supplement must be accompanied by the appropriate filing fee. (See the What Is the Filing Fee section of these instructions).

**Evidence.** At the time of filing, you must submit all evidence and supporting documentation listed in the What Evidence You Should Submit section of these instructions.

**Copies.** You may submit legible photocopies of documents requested, unless the instructions specifically state that you must submit an original document. USCIS may request an original document at the time of filing or at any time during processing of a supplement. If you submit original documents when not required, the documents may remain a part of the record, and USCIS will not automatically return them to you.

**Translations.** If you submit a document with information in a foreign language, you must also submit a full English translation. The translator must sign a certification that the English language translation is complete and accurate, and that the translator is competent to translate from the foreign language into English.

## How To Fill Out Form I-924A Supplement

1. Type or print clearly in black ink.
2. If you need extra space to complete any item within this supplement, use the space provided in **Part 11. Additional Information** or attach a separate sheet of paper; type or print the name of the regional center entity 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.
3. Answer all questions fully and accurately. If a question does not apply to you (for example, if the new commercial enterprise does not serve as a vehicle for investment into other job creating entities and the question asks for information about those entities), type or print "N/A," unless otherwise directed. If your answer to a question which requires a numeric response is zero or none (for example, "Aggregate non-EB-5 Capital Investment" or "Aggregate jobs maintained"), type or print "None," unless otherwise directed.

## Specific Instructions

### Part 1. Information About the Regional Center

**Item Numbers 1. - 4. Information About the Regional Center Entity.** Provide the name of the regional center entity, the name of the regional center (if different from the regional center entity), regional center identification number, and the receipt number for the Form I-924 filing. The regional center entity is the legal entity previously designated as a regional center in order to promote economic growth through investment in a limited geographic area.

**Item Numbers 5.a. - 5.f. Regional Center Mailing Address.** Enter the mailing address of the regional center.

**Item Numbers 6. - 9. Other Regional Center Contact Information.** Enter the daytime telephone number, fax number, email address (if any), and Web site address (if any) for the regional center entity.

### Part 2. Information About Managing Company or Agency (if different from the regional center entity)

A managing company or agency is any entity, agent, individual, or group that is or will be involved in the management, oversight, and administration of the regional center.

**Item Number 1. Information About The Managing Company or Agency.** Enter the name of the managing company or agency.

**Item Numbers 2.a. - 2.f. Managing Company or Agency Mailing Address.** Enter the mailing address of the managing company or agency.

**Item Numbers 3. - 6. Other Contact Information for Managing Company or Agency.** Enter the business telephone number, fax number, email address (if any), and Web site address (if any) for the regional center's managing company or agency.

**NOTE:** If more than one managing company or agency is associated with the regional center, provide the above information for all other managing companies or agencies. If you need extra space, use the space provided in Part 11. Additional Information.

### Part 3. Reporting Period for Regional Center Activity

**Item Numbers 1 - 2. Reporting Period.** Indicate whether you are filing this supplement for a single fiscal year or for a series of fiscal years. Confirm the period of time the supplement is meant to cover regarding reporting for the regional center.

### Part 4. Information About the Organizational Structure, Ownership, and Control of Regional Center Entity

#### Principal's of Regional Center Entity - Owners

A "principal" is any person (natural) or entity (non-natural) that is an owner of the regional center entity or any other individual in a position of executive managerial authority over the regional center entity or who is otherwise in a position to control, influence, or direct the management or policies of the regional center.

**Item Numbers 1.a. - 7.d. Information About Owner.** For those principals persons that hold an ownership interest in the regional center, enter each person's name, date and country of birth, and other names and aliases used. If the principal is a non-natural entity such as a corporation or partnership, provide the company's registered legal name, Federal Employee Identification Number, and the name of all natural persons having ownership, control or a beneficial interest in that non-natural owner.

**Item Numbers 8.a. - 8.f. Mailing Address of the Owner of the Regional Center Entity.** Enter the principal's mailing address.

**Item Numbers 9. - 11. Contact Information.** Enter the principal's current daytime telephone number, fax number, and email address (if any).

**Item Number 12. Web site Address (if any).** Enter the principal's Web site address.

**Item Number 13. Percentage of Ownership.** Enter the percentage of ownership held in the company.

**Item Number 14. Position Held Within the Regional Center.** Provide the current position/title held within the regional center (if applicable).

If there are multiple principals with ownership interest in the regional center, provide the information requested in **the space provided in Part 11. Additional Information.**

#### **Principals of the Regional Center Entity - Non-Owners**

**Item Numbers 15.a. - 21.d. Information About Non-Owner.** Enter the full legal name of **each principal person (natural) who does not hold an ownership interest in the regional center, as well as his or her date and country of birth and other names and aliases used.** If the principal is a non-natural **entity** such as a corporation or partnership, provide the company's registered legal name, Federal Employer Identification Number, and the name of all natural persons having ownership, **control**, or a beneficial interest in that non-natural principal.

**Item Numbers 22.a. - 22.f. Mailing Address.** Enter the principal's mailing address.

**Item Numbers 23. - 25. Contact Information for Non-Owner.** Enter the principal's daytime telephone number, business fax number, and email address **(if any).**

**Item Number 26. Web site Address (if any).** Enter the principal's Web site **address.**

**Item Number 27. Position Held Within the Regional Center.** Provide the current position/title held within the regional center (if applicable).

#### **Part 5. Information About The Regional Center's Operations**

**Item Numbers 1.a. - 1.d. Aggregate Capital Investment and Job Creation.** Enter the following information about the regional center operations: the aggregate amount of EB-5 investor capital invested through the regional center; the aggregate amount of non-EB-5 capital invested through the regional center; the aggregate number of new direct, indirect, and/or induced jobs created by EB-5 investors through **the** regional center; and the aggregate number of jobs maintained for EB-5 purposes through investment into "troubled business" associated with regional center activities (if applicable).

**Item Numbers 2.a. - 3.f. Industries and Resulting Aggregate Capital Investment and Job Creation.** Identify each industry that has been the focus of EB-5 capital investments sponsored through the regional center, and the resulting aggregate capital investment and job creation. Include the name of the industry, the **North American Industry Classification System (NAICS)** code for the industry, the aggregate number of direct and indirect jobs **created**, and the aggregate number of jobs maintained for EB-5 purposes through investment into "troubled businesses" associated with regional center activities (if applicable).

#### **Part 6. Information About New Commercial Enterprise**

**Item Number 1. Name of New Commercial Enterprise.** Enter the name of the new commercial enterprise and the industry category title.

**Item Numbers 2.a. - 2.f. Mailing Address.** Enter the mailing address of the new commercial enterprise.

**Item Numbers 3.a. - 3.g. Other Information.** Enter the following information about the new commercial enterprise (if the regional center oversees more than one new commercial enterprise, provide the information below for each new commercial enterprise in **the space provided in Part 11. Additional Information**). Provide the name of the industry; the NAICS code for the Industry; aggregate EB-5 capital investment; the aggregate amount of non-EB-5 capital investment; the aggregate number of direct, indirect, and/or induced jobs created by EB-5 investors; **the** aggregate number of jobs that have been maintained for EB-5 purposes through investments into "troubled **businesses**" **associated** with regional center activities **(if applicable)**; and confirm that the new commercial enterprise will serve as a vehicle for investment into job creating business entities that have or will create or maintain jobs for EB-5 purposes.

**Item Numbers 4.a. - 6.d. Job Creating Entity.** If any new commercial enterprise serves as a vehicle for investment into other business entities that have or will create or maintain jobs for EB-5 purposes, provide the names and address of the new commercial enterprise, the amount of EB-5 and non-EB-5 investment, and the number of jobs created or maintained by each actual job-creating entity. If the new commercial enterprise has made capital available to more than one job creating enterprise, provide this information for each job creating enterprise in **the space provided in Part 11. Additional Information.**

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## Part 7. Petitions Filed by EB-5 Investors

**Item Number 1.a. - 1.c. Form I-526, Immigrant Petition by Alien Entrepreneur.** Provide the total number of approved, denied, and revoked Form I-526 petitions filed by EB-5 investors for capital investments sponsored through the regional center.

**Item Number 2.a. - 2.b. For I-829, Petition by Entrepreneur to Remove Conditions.** Provide the total number of approved and denied Form I-829 petitions filed by EB-5 investors for capital investments sponsored through the regional center.

**NOTE:** In certain instances, in order to verify the aggregate data provided in this supplement, USCIS may require case-specific data relating to individual EB-5 petitions and the job creation and allocation methodologies used by a regional center.

## Part 8. Statement, Contact Information, Certification, and Signature of the Authorized Individual

This supplement must be signed and filed by an authorized individual of the regional center. An “authorized individual” of the regional center is a principal of the regional center entity with the executive managerial authority to complete and execute this supplement.

**Item Numbers 1.a. - 9.b.** Select the appropriate box to indicate if you read this supplement yourself or someone interpreted this supplement for you from English to a language in which you are fluent. If applicable, select the box to indicate if someone prepared this supplement for you. Further, you must sign and date your supplement and provide your daytime telephone number, mobile telephone number (if any), and email address (if any). A stamped or typewritten name in place of a signature is not acceptable.

## Part 9. Interpreter’s Contact Information, Certification, and Signature

**Item Numbers 1.a. - 6.b.** If you used anyone as an interpreter to read the instructions and questions on this supplement to you in a language in which you are fluent, the interpreter must fill out this section, provide his or her name, the name and address of his or her business or organization (if any), his or her daytime telephone number, and his or her email address (if any). The interpreter must sign and date the supplement.

## Part 10. Contact Information, Statement, Certification, and Signature of the Person Preparing this Supplement, If Other Than the Authorized Individual

**Item Numbers 1.a. - 8.b.** This section must contain the signature of the person who completed your supplement, if other than you, the authorized individual. If the same individual acted as your interpreter and preparer, that person should complete both Part 9, and Part 10. If the person who completed this supplement is associated with a business or organization, that person should complete the business or organization name and address information. Anyone who helped you prepare this supplement **MUST** sign and date the supplement. A stamped or typewritten name in place of a signature is not acceptable. If the person who helped you prepare your supplement is an attorney or accredited representative, he or she must also submit a completed Form G-28, Notice of Entry of Appearance as Attorney or Accredited Representative, along with your supplement.

## Part 11. Additional Information

**Item Numbers 1. - 8.b.** If you need extra space to provide any additional information within this supplement, use the space provided in Part 11. Additional Information. If you need more space than what is provided in Part 11., you may make copies of Part 11. to complete and file with your supplement or attach a separate sheet of paper. Include the regional center entity’s name 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.

**We recommend that you print or save a copy of your completed supplement to review in the future and for your records.**



## What Evidence Should You Submit?

Each regional center must provide USCIS with updated information to demonstrate the regional center is continuing to promote economic growth, improved regional productivity, job creation, or increased domestic capital investment in the approved geographic area. Such information must be submitted to USCIS on an annual basis, on a cumulative basis, and/or as otherwise requested by USCIS, using this **Form I-924A**.

**You must submit all required information requested in these instructions with your Form I-924A, in accordance with 8 CFR 103.2(a)(1).**

If you fail to completely fill out your Form I-924A, USCIS may reject your **supplement**. USCIS will issue a notice of intent to terminate the participation of the regional center in the Immigrant Investor Program if a regional center fails to submit the required information or upon a determination that the regional center no longer serves the purpose of promoting economic growth, including increased export sales, improved regional productivity, job creation, and increased domestic capital investment, in accordance with 8 CFR 204.6(m)(6) and these instructions.

## What Is the Filing Fee?

There is **no filing fee** for **Form I-924A**.

## Where To File?

Please see our Web site at [www.uscis.gov/I-924A](http://www.uscis.gov/I-924A) or call our National Customer Service Center at **1-800-375-5283** for the most current information about where to file this supplement. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.

## Address Change

You must notify USCIS **of your new address** within 10 days of any change to the mailing address of the regional center entity. For information on filing a change of address go to **USCIS Web site at [www.uscis.gov/addresschange](http://www.uscis.gov/addresschange)** or contact the USCIS National Customer Service Center at **1-800-375-5283**. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.

**NOTE:** Do not submit a change of address request to USCIS Lockbox **facilities because** these facilities do not process change of address requests.

## Processing Information

**Initial Processing.** Once USCIS accepts your supplement, we will check it for completeness. If you do not completely fill out this supplement or if you otherwise fail to demonstrate that the regional center is continuing to promote economic growth, improved regional productivity, job creation, or increased domestic capital investment in the approved geographic area, USCIS will issue a notice of intent to terminate the participation of the regional center in the Immigrant Investor Program.

**Requests for More Information.** We may request that you provide more information or evidence **to support your supplement**. We **may also** request that you provide the originals of any copies you submit. USCIS will return any requested originals when they are no longer needed.

**Requests for Interview.** We may request that you appear at a USCIS office for an interview based on your supplement. At the time of any interview or other appearance at a USCIS office, we may require that you provide your fingerprints, photograph, and/or signature to verify your identity and/or update background and security checks.

**Decision.** The decision **on Form I-924A** involves a determination of whether you have established eligibility for the immigration benefit you are seeking. USCIS will notify you of the decision in writing.

## USCIS Forms and Information

To ensure you are using the latest version of this supplement, visit the USCIS Web site at [www.uscis.gov](http://www.uscis.gov) where you can obtain the latest USCIS forms and immigration-related information. If you do not have Internet access, you may order USCIS forms by calling our toll-free number at **1-800-870-3676**. You may also obtain forms and information by calling the USCIS National Customer Service Center at **1-800-375-5283**. For TTY (deaf or hard of hearing) call: **1-800-767-1833**.

Instead of waiting in line for assistance at your local USCIS office, you can now schedule an appointment through **our online** system, **InfoPass**, at [infopass.uscis.gov/](http://infopass.uscis.gov/). Use the **InfoPass** appointment scheduler and follow the screen prompts to set up your appointment. **InfoPass** generates an electronic appointment notice that appears on the screen.

## Penalties

If you knowingly and willfully falsify or conceal a material fact or submit a false document with your Form I-924A, we **will deny your Form I-924A and** may terminate the regional center designation and may deny any immigration benefit. In addition, you will face severe penalties provided by law and may be subject to criminal prosecution.

## USCIS Compliance Review and Monitoring

By signing this supplement, you have stated under penalty of perjury (28 U.S.C. section 1746) that all information and documentation submitted with this supplement is complete, **true**, and correct. **You also authorize** the release of any information from **the records of the regional center that** USCIS may need to determine the regional center's **continued** eligibility **for designation**, and **consent** to USCIS verifying such information.

The U.S. Department of Homeland Security (DHS) has the authority to verify any information you submit to establish eligibility for regional center designation at any time. USCIS' legal authority to verify this information is in 8 U.S.C. sections 1103 **and** 1155; the Departments of Commerce, Justice, and State, the Judiciary, and Related Agencies Appropriations Act, 1993, Pub. L. No. 102-395, **section** 610, 106 Stat 1828, 1874 (1992) (as amended); and 8 CFR Part 103. To ensure compliance with applicable laws and authorities, USCIS may verify information before or after this supplement is decided.

**Agency** verification methods may include, but are not limited to: review of public records and information; contact via written correspondence, the Internet, facsimile, other electronic transmission, or telephone; unannounced physical site inspections of residences and locations of employment; and interviews. USCIS will use information obtained through verification to assess your compliance with the laws and to determine **your** eligibility for regional center designation.

**Subject to the restrictions** under 8 CFR 103.2(b)(16) and/or 8 CFR 204.6(m)(6) and subject to applicable restrictions, USCIS will provide you with an opportunity to address any adverse or derogatory information that may result from a USCIS compliance review, verification, or site visit after the agency **has initiated** an adverse action which may result in **revocation or** termination of an approval.

## USCIS Privacy Act Statement

**AUTHORITIES:** The information requested on this supplement, and the associated evidence, is collected under the Immigration and Nationality Act, sections 101, 103, and 203 (as amended) and the Departments of Commerce, Justice, and State, the Judiciary, and Related Agencies Appropriation Act, Pub. L. No. 102-395, section 610, 106 Stat 1828, 1874 (1992) (as amended).

**PURPOSE:** The primary purpose for **providing** the requested information on this supplement is to determine if the regional center has established continued eligibility for regional center designation. DHS will use the information you provide to grant or deny the regional center application.

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**DISCLOSURE:** The information you provide is voluntary. However, failure to provide the requested information, and any requested evidence, may adversely impact continued eligibility for regional center designation.

**ROUTINE USES:** DHS may share the information you provide on this supplement with other Federal, state, local, and foreign government agencies and authorized organizations. DHS follows approved routine uses described in the associated published system of records notices [DHS-USCIS-007 - Benefits Information System and DHS-USCIS-001 - Alien File, Index, and National File Tracking System of Records] which you can find at [www.dhs.gov/privacy](http://www.dhs.gov/privacy). DHS may also share the information, as appropriate, for law enforcement purposes or in the interest of national security.

#### Paperwork Reduction Act

An agency may not conduct or sponsor an information collection, and a person is not required to respond to a collection of information, unless it displays a currently valid OMB control number. The public reporting burden for this collection of information is estimated at 40 hours per response, for initial and amendment filings, including the time for reviewing instructions, gathering the required documentation and information, completing the supplement, preparing statements, and attaching necessary documentation, and submitting the supplement. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: U.S. Citizenship and Immigration Services, Regulatory Coordination Division, Office of Policy and Strategy, 20 Massachusetts Ave NW, Washington, DC 20529-2140; OMB No. 1615-0061. **Do not mail your completed Form I-924A to this address.**

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09/30/2014