



USAID
FROM THE AMERICAN PEOPLE

AID FORM 1550-2

PRIVATE VOLUNTARY ORGANIZATION

INITIAL REGISTRATION ANNUAL RETURN

For fiscal year beginning _____ ending _____

U.S. Agency for International Development
www.usaid.gov Keyword: PVC

PLEASE READ THE INSTRUCTIONS BEFORE COMPLETING THE FORM.

Inside this Form

- 1** Organization Information
- 2** VolAg Report Data
- 3** Schedule of Government Awards
- 4** Schedule of Private Overseas Support
- 5** Schedule of Contributors
- 6** Statement of Authorization

1. Name of Private Voluntary Organization (PVO)

2. Acronym _____

3. Headquarters Address

Address 1 _____

Address 2 _____

City _____

State _____

Zip Code + 4 _____

4. Telephone Number

() _____

5. Facsimile Number

() _____

6. PVO E-mail Address _____ @ _____

7. Web site _____

8. Executive Representative

(Dr., Mr., Ms.) (First) (Last)

Position Title _____

9. Financial Representative

(Dr., Mr., Ms.) (First) (Last)

Position Title _____

10. Correspondence Representative

(Dr., Mr., Ms.) (First) (Last)

Position Title _____

Rep. E-mail Address _____ @ _____

11. USAID-Assigned Identification Number (Decode Number)

12. Federal Employer Identification Number (EIN)

13. Date of Incorporation

14. Dun & Bradstreet/DUNS No.

15. IRS Classification 501(c)()

16. Financial Statement Months _____

INSTRUCTIONS

Note: The financial statements and AID Form 1550-2 must be for the same fiscal year and the totals for the two documents **MUST RECONCILE**. Failure to reconcile the two documents could cause a delay in processing the submission or may require the submission to be returned.

In the checkboxes provided on the front page of this form, check Initial Registration if this is your organization's application for registration with USAID; otherwise, other registrants should check Annual Return.

- Line 1:** Enter the corporate name of the organization as shown in its articles of incorporation. If the articles or bylaws have been changed within the past 12 months or since your last submission, include the amended documents with this form. Articles of incorporation and amendments must be on state letterhead with state seal and authorizing state signature.
- Line 2:** Enter the organization's acronym. **If no acronym is provided**, a substitute abbreviation for the organization title may be used in the narrative of the *Report of Voluntary Agencies Engaged in Overseas Relief and Development Registered with the U.S. Agency for International Development* (VolAg Report).
- Line 3:** Enter the address for the principal headquarters where official correspondence is received. This location must be where officials of the organization can be contacted on a daily basis. **A post office box address is not acceptable.**
- Line 4:** Enter the telephone number at headquarters.
- Line 5:** Enter the facsimile number at headquarters.
- Line 6:** Enter the general PVO e-mail address for publication in the VolAg Report. This e-mail address is used for USAID notifications.
Example: *info@pvoname.org*
- Line 7:** Enter the Internet address.
Example: *www.pvoname.org*
- Line 8:** Enter the designation (*Dr., Mr., Ms.*) name and title of the executive representative. This individual receives correspondence from the USAID Registrar.
- Line 9:** Enter the designation (*Dr., Mr., Ms.*) name and title of the financial representative. This individual receives annual submission notices and forms.
- Line 10:** Enter the designation (*Dr., Mr., Ms.*) name and title of the correspondence representative. This point of contact will receive e-mail correspondence sent from USAID.
- Line 11:** Enter the USAID-assigned identification number (decode number). This is the five-digit alphanumeric code printed on the PVO's letter of registration acceptance. *New applicants will be assigned a USAID decode number upon registration.*
- Line 12:** Enter the federal employer identification number (EIN) assigned to the organization by the Internal Revenue Service (IRS).
- Line 13:** Enter the organization's date of incorporation as stated in the **original** articles of incorporation.
- Line 14:** Enter the organization's Dun & Bradstreet Data Universal Numbering System (DUNS) number.
- Line 15:** Enter the organization's Internal Revenue Service tax exemption classification (i.e., 501(c)(3)).
- Line 16:** Enter the number of months the enclosed financial statements represent (e.g., 12 for a full year, 1-12 for less than a full year, 13-23 for greater than a full year).

PART 1

ORGANIZATION INFORMATION

PLEASE READ THE INSTRUCTIONS BEFORE COMPLETING THE FORM.

1. Is the organization a private, charitable, and nongovernmental organization that maintains its principal headquarters in the United States? Yes No

_____ Enter the total number of employees organization-wide.

_____ Enter the number of employees at principal headquarters.

2. Does the organization receive cash contributions from the U.S. general public (i.e., private individuals, foundations, and corporations)? Yes No

3. Does the organization solicit cash contributions from the U.S. general public (i.e., perform fundraising activities)? If no, please explain. Yes No

4. Are the organization's board members compensated for serving on the board? Yes No

Required: List of board members with employees of the organization indicated.

_____ Enter the total number of board members from the list.

_____ Enter the total number of employees indicated on the list of board members.

_____ Enter the number of meetings held by the board within the past 12 months.

5. Is the organization engaged in voluntary, charitable, or development assistance abroad? Yes No

_____ Enter the number of volunteers working overseas.

If the answer to question 5 is Yes, then go to question 7.

6. Does the organization anticipate becoming involved in overseas programs? Where? Yes No

_____ (List anticipated countries.)

7. Are the organization's financial statements available to the public upon request? If no, please explain. Yes No

INSTRUCTIONS FOR PART 1

- Note:** The Conditions of Registration can be found at: www.usaid.gov *Keyword: PVC*
- Question 1:** If the answer is no, then your organization is not meeting Condition No.1, which states an organization must have its headquarters in the United States; where officials of the organization can be contacted on a daily basis.
- Question 2:** If your organization receives cash contributions during the current fiscal year, answer yes to this question. Any organization that does not receive cash contributions—as supported by the financial statements—does not meet Condition No. 2.
- Question 3:** If your organization actively solicits cash contributions during the current fiscal year, answer yes to this question.
- Question 4:** If your organization's board members are compensated for the sitting on the board, then your organization does not meet Condition No. 7. Compensation is defined as payment made specifically for being a member of the Board of Directors. Wages and benefits, both current and deferred, that staff receives from their employment with the organization are not considered compensation for sitting on the board. Reimbursement for reasonable travel expenses to attend board meetings is acceptable.
- Question 5:** If your organization implements overseas charitable or development activities without volunteer support, answer yes to the question and enter zero for the number of overseas volunteers.
- Question 6:** If your organization intends on implementing overseas activities, please indicate in which countries the program(s) will begin.
- Question 7:** USAID will publish the financial information provided in Part 2, VolAg Report Data.

INSTRUCTIONS FOR PART 2

- Note:** The financial statements and the AID Form 1550-2 must be for the same fiscal year and the totals for the two documents must reconcile.
- Lines 1 - 5:** Enter only amounts as a prime recipient of USAID awards reported as revenue in your organization's financial statements that have been listed in Part 3, Item A.
- Line 6:** Compute total USAID support by adding lines 1 through 6.
- Lines 7 - 9:** Enter only amounts as a prime recipient of other U.S. Federal Government awards reported as revenue in your organization's financial statements that have been listed in Part 3, Item B.
- Line 10:** Compute Total Other U.S. Federal Government support by adding lines 7 through 9.
- Line 11:** Enter the amount of private contributions and grants (include all fund groups, such as restricted, unrestricted, endowment, plant, etc.). Indicate by percentage the distribution of these sources. The total must be 100%.
- Required:** **Complete Part 5, Schedule of Top Ten Cash Contributors. This schedule will not be available to the public.**
- Line 12:** Enter the amount as a sub-recipient with nongovernmental organizations (NGOs), PVOs, and any grants received from the National Endowment for Democracy (NED).
- Line 13:** Enter the amount of donated goods and equipment reported in the financial statements.
- Line 14:** Enter the amount of donated services reported in the financial statements.
- Line 15:** Enter the amount of private revenue. This revenue includes sales of publications, service fees, membership dues, income from investments, gains and losses from investments, and miscellaneous income, as well as other similar sources.
- Line 16:** Enter the amount of support received from any foreign government.
- Line 17:** Enter the amount of support from international organizations, such as the United Nations and its agencies, and the World Bank and its agencies.
- Line 18:** Enter the amount of support reported as revenue from U.S. state and local governments.
- Line 19:** Compute total private support by adding lines 11 through 18.
- Line 20:** Add lines 6, 10, and 19. **The amount on this line must agree with the total support and revenue reported in the financial statements for both operating and nonoperating sources.**
- Line 21:** Enter expenses for overseas programs. Report USAID-funded expenses as overseas programs.
- Note:** Overseas activities are those programs that benefit development in countries other than the United States. Certain activities that support these programs may take place in the United States, such as commodity purchasing, participant training, or conference planning. The purpose of the program and the country of origin of its beneficiaries establish whether activities undertaken in implementing the program are overseas or domestic.
- Line 22:** Enter expenses for domestic programs. No USAID-funded expenses are reported on this line.
- Line 23:** Enter the expenses for administrative and management activities as reported in the financial statements. ***Organizations that report no expenses on this line must furnish an explanation.***
- Line 24:** Enter the expenses for fundraising activities. **If the amount of fundraising expenses equals zero, enter an explanation in Part 1, Line 3.**
- Line 25:** Add lines 21 through 24. **The amount on this line must agree with the total expenses reported in the financial statements.**

PART 3

SCHEDULE OF GOVERNMENT AWARDS

LIST ALL AWARDS. COPY THIS PAGE IF ADDITIONAL SPACE IS NEEDED.

A. USAID Grants, Cooperative Agreements, Contracts, P.L. 480 Food and Freight, Section 123 Ocean Freight, and Excess Property

Award Number	Office or Mission	Program Title	Current FY Amount
Example: FAO-A-00-04-00001-00	DCHA/PVC-ASHA	Microenterprise Development	\$150,000
1. _____	_____	_____	\$ _____
2. _____	_____	_____	\$ _____
3. _____	_____	_____	\$ _____
4. _____	_____	_____	\$ _____
5. _____	_____	_____	\$ _____
6. _____	_____	_____	\$ _____
7. _____	_____	_____	\$ _____
8. _____	_____	_____	\$ _____
9. _____	_____	_____	\$ _____
10. _____	_____	_____	\$ _____
Total:			\$ _____ Equals Part 2, line 6

B. Other U.S. Federal Government (USG) Grants, Cooperative Agreements, Contracts, and Excess Property

Other USG Grants, Cooperative Agreements, Contracts, and Excess Property for Overseas Activities

Award Number	Department/Agency	Program Title	Current FY Amount
Example: IA-000-000-G	Dept. of State	Anti-Trafficking	\$400,000
1. _____	_____	_____	\$ _____
2. _____	_____	_____	\$ _____
3. _____	_____	_____	\$ _____
4. _____	_____	_____	\$ _____
5. _____	_____	_____	\$ _____
Subtotal:			\$ _____

Other USG Grants, Cooperative Agreements, Contracts and Excess Property for Domestic Activities

+ \$ _____

Total: \$ _____
 Equals Part 2, line 10

INSTRUCTIONS FOR PART 3

Item A: Enter only the amount as a prime recipient of USAID awards reported as revenue in your organization's financial statements. USAID award numbers are 15-digit numbers that take the following form:

XXX X XX XX XXXXX XX

Examples of USAID Grants, Cooperative Agreements, Contracts:

Award Number	Office or Mission	Program Title	Amount
FFP-G-00-05-00250-00	DCHA/FFP	Farm Bill 202E	\$25,000
656-A-00-04-00113-00	USAID/Mozambique	Ovata Development Program	\$287,000
262-C-00-05-00026-00	USAID/Cairo	Admin. of Justice Support	\$500,000

Total must match Part 2, line 6.

Item B: Enter only the amount as a prime recipient of other USG awards for overseas activities reported as revenue in your organization's financial statements.

Examples of Other USG Grants, Cooperative Agreements, Contracts:

Award Number	Department/Agency	Program Title	Amount
FFEE-440-2003/000-00	Dept. of Agriculture	Scientific Resources	\$775,000
DE-FG12-12DE12345	Dept. of Energy	Envir. Friendly Drilling	\$1,450,000
Funded Transportation	Dept. of Defense	Transportation	\$1,565,000

Add the amount as a prime recipient of other USG awards for domestic activities reported as revenue in your organization's financial statements.

Total must match Part 2, line 10.

PART 4	<h2 style="margin: 0;">SCHEDULE OF PRIVATE SUPPORT USED FOR OVERSEAS PROGRAMS</h2> <p style="font-size: small; margin: 5px 0 0 0;">PLEASE READ THE INSTRUCTIONS BEFORE COMPLETING THE FORM.</p>
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OVERSEAS PRIVATE SUPPORT	<ol style="list-style-type: none"> 1. Private Contributions 2. Subgrants 3. Privately Donated Goods and Equipment 4. Privately Donated Services 5. Private Revenue (i.e., interest income, investment income, sales) 6. Foreign Government Support 7. International Organization Support 8. Other U.S. Government Support (i.e., State and Local Grants and Contracts) 9. Total Private Support Used for Overseas Programs (Add Lines 1 Through 8) 	\$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____
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INSTRUCTIONS FOR PART 4

Note: If the organization performs overseas programs, as well as domestic programs, only the portions attributable to the overseas programs should be reported on the above schedule.

Overseas programs are those programs that benefit development in countries other than the United States. Certain activities that support these programs may take place in the United States, such as commodity purchasing, participant training, or conference planning. The purpose of the program and its beneficiaries' country of origin establish whether activities undertaken in implementing the program are overseas or domestic.

- Line 1:** Enter the amount of private contributions and grants (include all fund groups, such as restricted, unrestricted, endowment, plant, etc.) used for overseas programs.
- Line 2:** Enter the amount as a sub-recipient with nongovernmental organizations (NGOs), PVOs, and any grants received from the National Endowment for Democracy (NED) used for overseas programs.
- Line 3:** Enter the amount of donated goods and equipment used for overseas programs if reported in the financial statements.
- Line 4:** Enter the amount of donated services used for overseas programs if reported in the financial statements.
- Line 5:** Enter the amount of private revenue used for overseas programs. This revenue includes sales of publications, service fees, membership dues, income from investments, gains and losses from investments, and miscellaneous income, as well as other similar sources.
- Line 6:** Enter the amount of support for overseas programs received from any foreign government.
- Line 7:** Enter the amount of support for overseas programs received from international organizations, such as the United Nations and its agencies, and the World Bank and its agencies.
- Line 8:** Enter the amount of support for overseas programs reported as revenue from U.S. state and local governments.
- Line 9:** Compute total overseas private support by adding lines 1 through 8.

PART 5

SCHEDULE OF TOP TEN CASH CONTRIBUTORS

THIS SCHEDULE IS NOT AVAILABLE FOR PUBLIC DISCLOSURE.

	Name and Address	Current FY Amount
1.	_____	\$ _____
2.	_____	\$ _____
3.	_____	\$ _____
4.	_____	\$ _____
5.	_____	\$ _____
6.	_____	\$ _____
7.	_____	\$ _____
8.	_____	\$ _____
9.	_____	\$ _____
10.	_____	\$ _____
	Total	\$ _____

INSTRUCTIONS FOR PART 5

Enter the names, addresses and amounts received from your organization's top 10 contributors for the current year. You may attach Schedule B, Schedule of Contributors of the IRS Form 990 as a substitute for this schedule.
Any information you provide on this schedule is not open to the public.

PART 6

STATEMENT OF AUTHORIZATION

- 1. Is the checklist carefully reviewed, completed, and included in the submission? Yes
- 2. Does the submission contain all the required documents as listed on the checklist? Yes

AID FORM 1550-2 PREPARER

Please print or type the contact information for the preparer of this form.

_____	_____
AID Form 1550-2 Preparer	Telephone Number
_____	_____
Date	Facsimile Number

	E-mail Address

AUTHORIZED SIGNATURES

Under penalty of perjury, I certify that this is a nonprofit organization with a tax-exemption status under the 501(c)(3) provision of the Internal Revenue Code.

I certify that this organization accounts for its funds in accordance with generally accepted accounting principles (GAAP), has a sound financial position, provides its financial statements to the public upon request, and has been incorporated for not less than 18 months.

I am authorized to sign this form on behalf of the organization. I have examined this form, including the accompanying schedules, and to the best of my knowledge it is true, correct, and complete.

_____	_____
Chief Executive Officer	Chief Financial Officer
_____	_____
Date	Date
_____	_____
Telephone Number	Telephone Number
_____	_____
Facsimile Number	Facsimile Number
_____	_____
E-mail Address	E-mail Address

BURDEN ESTIMATE STATEMENT

PAPERWORK REDUCTION ACT NOTICE: Public reporting burden for this collection of information is estimated to average one to three hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The Agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to USAID, Chief, Policy, Planning and Outreach Division (PPO), Room 7.06, Ronald Reagan Building, Washington, DC 20523-7600 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Paperwork Reduction Project (0412-0035), Washington, DC 20503.