



PRIVACY THRESHOLD ANALYSIS (PTA)

This form serves as the official determination by the DHS Privacy Office to identify the privacy compliance requirements for all Departmental uses of personally identifiable information (PII).

A Privacy Threshold Analysis (PTA) serves as the document used to identify information technology (IT) systems, information collections/forms, technologies, rulemakings, programs, information sharing arrangements, or pilot projects that involve PII and other activities that otherwise impact the privacy of individuals as determined by the Chief Privacy Officer, pursuant to Section 222 of the Homeland Security Act, and to assess whether there is a need for additional Privacy Compliance Documentation. A PTA includes a general description of the IT system, information collection, form, technology, rulemaking, program, pilot project, information sharing arrangement, or other Department activity and describes what PII is collected (and from whom) and how that information is used and managed.

Please complete the attached Privacy Threshold Analysis and submit it to your component Privacy Office. After review by your component Privacy Officer the PTA is sent to the Department's Senior Director for Privacy Compliance for action. If you do not have a component Privacy Office, please send the PTA to the DHS Privacy Office:

Senior Director, Privacy Compliance
The Privacy Office
U.S. Department of Homeland Security
Washington, DC 20528
Tel: 202-343-1717

PIA@hq.dhs.gov

Upon receipt from your component Privacy Office, the DHS Privacy Office will review this form and assess whether any privacy compliance documentation is required. If compliance documentation is required – such as Privacy Impact Assessment (PIA), System of Records Notice (SORN), Privacy Act Statement, or Computer Matching Agreement (CMA) – the DHS Privacy Office or component Privacy Office will send you a copy of the relevant compliance template to complete and return.



Privacy Threshold Analysis (PTA)

Specialized Template for Information Collections (IC) and Forms

The Forms-PTA is a specialized template for Information Collections and Forms. This specialized PTA must accompany all Information Collections submitted as part of the Paperwork Reduction Act process (any instrument for collection (form, survey, questionnaire, etc.) from ten or more members of the public). Components may use this PTA to assess internal, component-specific forms as well.

Form Number:	1652-0057
Form Title:	Exercise Information System (EXIS)
Component:	Transportation Security Administration (TSA) Office: OIT

IF COVERED BY THE PAPERWORK REDUCTION ACT:

Collection Title:	EXIS		
OMB Control Number:	1652-0057	OMB Expiration Date:	April 30, 2018
Collection status:	Revision	Date of last PTA (if applicable):	March 21, 2017

PROJECT OR PROGRAM MANAGER

Name:	Jeffrey Graves		
Office:	Click here to enter text.	Title:	System Owner
Phone:	571-227-3575	Email:	jeffrey.graves@dhs.gov

COMPONENT INFORMATION COLLECTION/FORMS CONTACT

Name:	Glenn Stoll		
Office:	Information Management Program Section (IMPS)	Title:	IMPS Director, Forms Management Officer
Phone:	571-227-5175	Email:	Glenn.stoll@tsa.dhs.gov



SPECIFIC IC/Forms PTA QUESTIONS

1. Purpose of the Information Collection or Form

a. Describe the purpose of the information collection or form. *Please provide a general description of the project and its purpose, including how it supports the DHS mission, in a way a non-technical person could understand (you may use information from the Supporting Statement).*

If this is an updated PTA, please specifically describe what changes or upgrades are triggering the update to this PTA.

The Exercise Information System (EXIS) is a voluntary, online tool developed by TSA to fulfill requirements of the Implementing Recommendations of the 9/11 Commission Act of 2007. These statutory requirements led to the development of the Intermodal Security Training Exercise Program (I-STEP) for the Transportation Systems Sector (TSS). EXIS is used by TSS stakeholders to conduct security exercises, including publicly- or privately-owned transportation companies or assets. TSA collects five kinds of information online from transportation stakeholders: (1) user registration information; (2) nature and scope of exercise; (3) corrective actions/lessons learned/best practices; (4) evaluation feedback on EXIS itself; and (5) After-Action Reports.

b. List the DHS (or component) authorities to collect, store, and use this information. *If this information will be stored and used by a specific DHS component, list the component-specific authorities.*

Implementing Recommendations of the 9/11 Commission Act of 2007 (Pub. L. 110-153); ATSA (Pub. L. 107-71)

2. Describe the IC/Form

a. Does this form collect any Personally Identifiable Information” (PII¹)?

Yes

No

b. From which type(s) of individuals does this form collect information? (Check all that apply.)

Members of the public

U.S. citizens or lawful permanent residents

Non-U.S. Persons.

DHS Employees

DHS Contractors

¹ Personally identifiable information means any information that permits the identity of an individual to be directly or indirectly inferred, including any other information which is linked or linkable to that individual regardless of whether the individual is a U.S. citizen, lawful permanent resident, visitor to the U.S., or employee or contractor to the Department.



	<input checked="" type="checkbox"/> Other federal employees or contractors.
<p>c. Who will complete and submit this form? (<i>Check all that apply.</i>)</p>	<input type="checkbox"/> The record subject of the form (e.g., the individual applicant). <input type="checkbox"/> Legal Representative (preparer, attorney, etc.). <input checked="" type="checkbox"/> Business entity. <p style="padding-left: 40px;">If a business entity, is the only information collected business contact information?</p> <p style="padding-left: 80px;"><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <input type="checkbox"/> Law enforcement. <input type="checkbox"/> DHS employee or contractor. <input type="checkbox"/> Other individual/entity/organization that is NOT the record subject. <i>Please describe.</i> Click here to enter text.
<p>d. How do individuals complete the form? <i>Check all that apply.</i></p>	<input type="checkbox"/> Paper. <input type="checkbox"/> Electronic. (ex: fillable PDF) <input checked="" type="checkbox"/> Online web form. (available and submitted via the internet) Provide link: https://exis.tsa.dhs.gov/default.aspx
<p>e. What information will DHS collect on the form? <i>List all PII data elements on the form. If the form will collect information from more than one type of individual, please break down list of data elements collected by type of individual.</i></p>	
<p>User's Name; Agency/Organization Name and Type; Job Title; Supervisor or other Sponsor's Name; Professional Phone Number; Professional Email Address; Employment Verification Contact Name; Employment Verification Contact Information (city, state, and zip code; phone number, and email address); user's login, password, & knowledge-based security questions & answers as well as the Reason for Needing an EXIS account. In addition, the following optional registration information can be added by the user: Professional (business), country; City; State; Zip Code; Mobile Phone Number; Alternate Email; and Preferred Transportation Sector.</p>	



f. Does this form collect Social Security number (SSN) or other element that is stand-alone Sensitive Personally Identifiable Information (SPII)? <i>Check all that apply.</i>	
<input type="checkbox"/> Social Security number <input type="checkbox"/> Alien Number (A-Number) <input type="checkbox"/> Tax Identification Number <input type="checkbox"/> Visa Number <input type="checkbox"/> Passport Number <input type="checkbox"/> Bank Account, Credit Card, or other financial account number <input type="checkbox"/> Other. <i>Please list:</i>	<input type="checkbox"/> DHS Electronic Data Interchange Personal Identifier (EDIPI) <input type="checkbox"/> Social Media Handle/ID <input type="checkbox"/> Known Traveler Number <input type="checkbox"/> Trusted Traveler Number (Global Entry, Pre-Check, etc.) <input type="checkbox"/> Driver's License Number <input type="checkbox"/> Biometrics
g. List the specific authority to collect SSN or these other SPII elements.	
NA	
h. How will this information be used? What is the purpose of the collection? Describe why this collection of SPII is the minimum amount of information necessary to accomplish the purpose of the program.	
NA	
i. Are individuals provided notice at the time of collection by DHS (<i>Does the records subject have notice of the collection or is form filled out by third party</i>)?	<input checked="" type="checkbox"/> Yes. Please describe how notice is provided. The form is completed directly by the EXIS participant. The EXIS registration form includes a Privacy Act statement as well. <input type="checkbox"/> No.

3. How will DHS store the IC/form responses?



<p>a. How will DHS store the original, completed IC/forms?</p>	<p><input type="checkbox"/> Paper. Please describe. Click here to enter text.</p> <p><input checked="" type="checkbox"/> Electronic. Please describe the IT system that will store the data from the form. Information is automatically stored in EXIS backend.</p> <p><input type="checkbox"/> Scanned forms (completed forms are scanned into an electronic repository). Please describe the electronic repository. Click here to enter text.</p>
<p>b. If electronic, how does DHS input the responses into the IT system?</p>	<p><input type="checkbox"/> Manually (data elements manually entered). Please describe. Click here to enter text.</p> <p><input checked="" type="checkbox"/> Automatically. Please describe. Click here to enter text.</p>
<p>c. How would a user search the information submitted on the forms, <i>i.e.</i>, how is the information retrieved?</p>	<p><input checked="" type="checkbox"/> By a unique identifier.² <i>Please describe.</i> If information is retrieved by personal identifier, please submit a Privacy Act Statement with this PTA. User name.</p> <p><input type="checkbox"/> By a non-personal identifier. <i>Please describe.</i> Click here to enter text.</p>
<p>d. What is the records retention schedule(s)? <i>Include the records schedule number.</i></p>	<p>1600.3.1-a(1) Community Creator User Profiles: Cutoff at the end of the calendar year; destroy/delete 10 years after cutoff. ((N1-560-11-5, Item 1a(1))</p> <p>1600.3.1-a(2) All other user profiles: Cutoff after 1 year of inactivity or termination of account; destroy/delete 3 years after cutoff. ((N1-560-11-5, Item 1a(2))</p> <p>1600.3.1-b Exercise Packages: Cutoff at the end of the calendar year. Destroy/delete 10 years after cutoff. ((N1-560-11-5; Item 1b))</p>

² Generally, a unique identifier is considered any type of “personally identifiable information,” meaning any information that permits the identity of an individual to be directly or indirectly inferred, including any other information which is linked or linkable to that individual regardless of whether the individual is a U.S. citizen, lawful permanent resident, visitor to the U.S., or employee or contractor to the Department.



	1600.3.1-c Communities: Cutoff at the end of the calendar year; Destroy/delete 10 years after cutoff. ((N1-560-11-5; Item 1c))
e. How do you ensure that records are disposed of or deleted in accordance with the retention schedule?	Community creator profiles, exercise packages, and community records are cut-off at the end of every calendar year, then periodically reviewed to identify and delete any that are over 10 years old. Regular user profiles are reviewed annually and any inactive or terminated user profiles (for at least one year) are cut-off, then reviewed periodically and those older than 3 years are deleted.
f. Is any of this information shared outside of the original program/office? <i>If yes, describe where (other offices or DHS components or external entities) and why. What are the authorities of the receiving party?</i>	
<input type="checkbox"/> Yes, information is shared with other DHS components or offices. Please describe. Click here to enter text. <input type="checkbox"/> Yes, information is shared <i>external</i> to DHS with other federal agencies, state/local partners, international partners, or non-governmental entities. Please describe. Click here to enter text. <input checked="" type="checkbox"/> No. Information on this form is not shared outside of the collecting office.	



Please include a copy of the referenced form and Privacy Act Statement (if applicable) with this PTA upon submission.



PRIVACY THRESHOLD REVIEW

(TO BE COMPLETED BY COMPONENT PRIVACY OFFICE)

Component Privacy Office Reviewer:	Jennifer L. Schmidt
Date submitted to component Privacy Office:	December 19, 2017
Date submitted to DHS Privacy Office:	January 5, 2018
Have you approved a Privacy Act Statement for this form? <i>(Only applicable if you have received a waiver from the DHS Chief Privacy Officer to approve component Privacy Act Statements.)</i>	<input checked="" type="checkbox"/> Yes. Please include it with this PTA submission. See below. <input type="checkbox"/> No. Please describe why not. Click here to enter text.
Component Privacy Office Recommendation: <i>Please include recommendation below, including what existing privacy compliance documentation is available or new privacy compliance documentation is needed.</i>	
<p>TSA Privacy recommends approval of this PTA. EXIS is a privacy sensitive system as it collects PII from members of the public. Existing PIA coverage is provided by DHS/ALL-006 DHS General Contact Lists. SORN coverage is necessary because records are retrieved by a unique personal identifier. SORN coverage is provided by DHS/ALL-004 General Information Technology Access Account Records System and DHS/ALL 002, DHS Mailing and Other Lists System.</p> <p>Privacy Act Statement: AUTHORITY: 49 USC § 114(f)(15); 6 USC §§ 1136(a), 1167, and 1183.</p>	



PRINCIPAL PURPOSE(S): This information will be used to grant individuals access to EXIS.
ROUTINE USE(S): This information may be shared in accordance with the Privacy Act of 1974, 5 USC § 552(a), for routine uses identified in the DHS system of records, DHS/ALL-004 General Information Technology Access Account Records System and DHS/ALL 002 DHS Mailing and Other Lists System, or as further described in the Privacy Impact Assessment, DHS/ALL/PIA-006 DHS General Contact Lists and subsequent updates, available at www.dhs.gov/privacy. **DISCLOSURE:** Furnishing this information is voluntary; however, failure to provide the requested information will prevent TSA from being able to grant an individual’s access request to EXIS.

PRIVACY THRESHOLD ADJUDICATION

(TO BE COMPLETED BY THE DHS PRIVACY OFFICE)

DHS Privacy Office Reviewer:	Sean McGuinness
PCTS Workflow Number:	1156615
Date approved by DHS Privacy Office:	January 23, 2018
PTA Expiration Date	January 23, 2021

DESIGNATION

Privacy Sensitive IC or Form:	Yes If “no” PTA adjudication is complete.
Determination:	<input type="checkbox"/> PTA sufficient at this time. <input type="checkbox"/> Privacy compliance documentation determination in progress. <input type="checkbox"/> New information sharing arrangement is required. <input type="checkbox"/> DHS Policy for Computer-Readable Extracts Containing SPII applies. <input checked="" type="checkbox"/> Privacy Act Statement required. <input checked="" type="checkbox"/> Privacy Impact Assessment (PIA) required. <input checked="" type="checkbox"/> System of Records Notice (SORN) required. <input type="checkbox"/> Specialized training required. <input type="checkbox"/> Other.
DHS IC/Forms Review:	DHS PRIV has not received this ICR/Form.



Date IC/Form Approved by PRIV:	Click here to enter a date.
IC/Form PCTS Number:	
Privacy Act Statement:	Privacy Act Statement approved concurrently with this PTA
PTA:	Choose an item. System PTA for EXIS approved April 10, 2017
PIA:	If covered by existing PIA, please list: If a PIA update is required, please list: DHS/ALL/PIA-006 General Contact Lists
SORN:	If covered by existing SORN, please list: If a SORN update is required, please list: DHS/ALL-004 General Information Technology Access Account Records System January 18, 2007, 72 FR 2294 and DHS/ALL 002 DHS Mailing and Other Lists System November 25, 2008, 73 FR 71659
DHS Privacy Office Comments: <i>Please describe rationale for privacy compliance determination above.</i>	
DHS Privacy Office finds that the Exercise Information System (EXIS) form is privacy sensitive as it collects PII from members of the public, (to include U.S. citizens or lawful permanent residents and non-U.S. persons) DHS employees/contractors and other federal employees or contractors.	
EXIS is an Internet-accessible knowledge management system or e-tool that allows industry stakeholders to design and execute their own security exercises within the transportation industry. This form collects contact information to grant individuals' access to EXIS.	
PRIV agrees with TSA Privacy that PIA coverage is provided under DHS/ALL/PIA-006 General Contact List. The General Contact Lists PIA outlines how DHS collects contact information in order to distribute information and perform various other administrative tasks.	
PRIV agrees with TSA Privacy that SORN coverage is provided under DHS/ALL-004 GITAARS and DHS/ALL-002 DHS Mailing and Other Lists System. DHS/ALL-004	



GITAARS outlines the collection of information from DHS employees in order to provide authorized individuals with access to DHS information technology resources. DHS ALL-002 outlines how DHS components maintain records for the purpose of mailing informational literature or responses to those who request it; maintaining lists of individuals who attend meetings; maintaining information regarding individuals who enter contests sponsored by DHS; and for other purposes for which mailing or contact lists may be created.

A Privacy Act Statement is required as this form retrieves information via unique identifier. A Privacy Act Statement for this form is being approved concurrently with this PTA.