

**NISS Screenshots—Apr 2017**  
***Facility Clearance Package Submission***

***Includes SF-328 as an attachment (OMB Control Number 0704-0579, Expiration Date: 10/31/2021). The SF-328 IS NOT part of this collection package and maintains its own OMB Control Number.***

**New FCL Package**

Basic Information | SAM | SF-328 | Supporting Documents | KMP List | Meeting Notes and Comments | Record Information

Sponsorship Submission

FCL Package Action

Package Summary/Comments for DSS

Business Structure  ⓘ

FCL Package Status  ⓘ

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**New FCL Package**

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[Click here for SF-328 Definitions](#)

Check this box if your organization is a branch/division or your tier parent is submitting a consolidated SF328 (checking this box will delete the SF328 and its attachments from this package)

Consolidated SF-328 Parent CAGE Code

Consolidated SF-328 Parent Facility Name (if found)

Does your company issue stock? \*

Yes  No

#### PENALTY NOTICE

Failure to answer all questions or any misrepresentation (by omission or concealment, or by misleading, false or partial answers) may serve as a basis for denial of clearance for access to classified information. In addition, Title 18, United States Code 1001, makes it a criminal offense, punishable by a maximum of five (5) years imprisonment, \$15,000 fine or both, knowingly to make a false statement or representation to any Department or Agency of the United States, as to any matter within the jurisdiction of any Department or Agency of the United States. This includes any statement made herein which is knowingly incorrect, incomplete or misleading in any important particular.

#### PROVISIONS

1. This report is authorized by the Secretary of Defense, as Executive Agent for the National Industrial Security Program, pursuant to Executive Order 12829. While you are not required to respond, your eligibility for a facility security clearance cannot be determined if you do not complete this form. The retention of a facility security clearance is contingent upon your compliance with the requirements of DoD 5220.22-M for submission of a revised form as appropriate.

2. When this report is submitted in confidence and is so marked, applicable exemptions to the Freedom of Information Act will be invoked to withhold it from public disclosure.

3. Complete all questions on this form. Mark "Yes" or "No" for each question. If your answer is "Yes" furnish in full the complete information under the appropriate corresponding fields.

#### QUESTIONS and ANSWERS

1. (Answer 1a or 1b)

Note: Ownership of less than 5% should be included if the holder is entitled to control the appointment and tenure of any management position.

b. (For entities which do not issue stock): Has any foreign person directly or indirectly subscribed 5% or more of your organization's total capital commitment?

Yes  No

Identify the percentage of total capital commitment which is subscribed by foreign persons. \*

Is there an agreement(s) with the subscriber(s)? If yes, attach a copy(ies), and if none, so state. \*

Yes  No

Subscriber Agreement Comment

2. Does your organization directly, or indirectly through your subsidiaries and/or affiliates, own 10 percent or more of any foreign interest? \*

Yes  No

Identify the foreign interest by name, country, percentage owned, and personnel who occupy management positions with the organizations. \*

If there are personnel from your organization who occupy management positions with the foreign firm(s), identify the name(s), title, and extent of involvement in the operations of the organizations, (to include access to classified information). \*

3. Do any non-U.S. citizens serve as members of your organization's board of directors (or similar governing body), officers, executive personnel, general partners, regents, trustees or senior management officials? \*

Yes  No

Identify the foreign person(s) by name, title, citizenship, immigration status and clearance or exclusion status. \*

Attach copies of applicable by-laws or articles of incorporation, which describe the affected position(s). However, if you have already provided such copies to the Cognizant Security Agency Industrial Security Representative, so state.

4. Does any foreign person(s) have the power, direct or indirect, to control the election, appointment, or tenure of members of your organization's board of directors (or similar governing body) or other management positions of your organization, or have the power to control or cause the direction of other decisions or activities of your organization? \*

(4) Foreign Person(s) Control \*

Yes  No

Identify the foreign person(s) by name, title, citizenship, and all details concerning the control or influence. \*

Note: If any foreign person(s) have such power, this question shall be answered in the affirmative even if such power has not been exercised, and whether or not it is exercisable through ownership of your facility's securities, if such power may be invoked by contractual arrangements or by other means.

5. Does your organization have any contracts, agreements, understandings, or arrangements with a foreign person(s)? \*

Yes  No

If Yes, for each instance, provide the name of the foreign person, country, percentage of gross income derived, and nature of involvement, including:

-Whether defense/nuclear related or not

-Involvement with classified or export controlled technology

-Compliance with export control requirements

-Where the organization has a large number of involvements and where these involvements are not defense/ nuclear related and represent a small percentage of gross income; the explanation can be a generalized statement addressing the totals by country.

(5) Foreign Person(s) Details \*

Note: We do not expect and will not require the contractor to ask every customer if he/she falls within the NISPOM definition of a foreign person. We will ask the contractor to provide ongoing security education to those individuals who negotiate and/or administer such agreements regarding their responsibilities to report agreements with a foreign person(s) to the best of their knowledge. The contractor will be certifying the response to this question to "the best of his/her knowledge" or "through his/her best efforts".

6. Does your organization, whether as borrower, surety, guarantor or otherwise have any indebtedness, liabilities or obligations to a foreign person(s)? \*

Yes  No

Provide your overall debt-to-equity ratio (in percentage). \*

If yes, with respect to indebtedness or liability to a foreign person, indicate to whom indebted or liable, what collateral has been furnished or pledged, and any conditions or covenants of the loan agreement. If stock or assets have been furnished or pledged as collateral, provide a copy of the loan agreement or pertinent extracts thereof (to include procedures to be followed in the event of default).

(6) To Whom Indebted or Liable, Collateral, and Conditions or Covenants of Loan Agreement \*

If any debentures are convertible, provide specifics.

If loan payments are in default, provide details.

This question should be answered in the affirmative if the debt is with a U.S. entity that is owned or controlled either directly or indirectly by a foreign person. If unknown, so state.

Activate Windows  
Go to Settings to activate Windows

Note: As stated above, we do not expect and will not require the contractor to ask every lender if he/she qualifies as a foreign person. We will ask the contractor to provide ongoing security education to those employees who handle lending arrangements regarding their responsibilities to report any such arrangements with a foreign person lender, to the best of their knowledge. The contractor will be certifying the response to this question as being to "the best of his/her knowledge" or "through his/her best efforts".

7. During your last fiscal year, did your organization derive:

a. 5 percent or more of its total revenues or net income from any single foreign person? \*

Yes  No

b. In the aggregate 30 percent or more of its revenues or net income from foreign persons? \*

Yes  No

Provide overall percentage of income derived from foreign sources "by country", nature of involvement, and type of services or products. \*

Indicate if any single foreign source represents in excess of 5% of total revenues or net income. \*

Indicate if any single foreign source represents in excess of 5% of total revenues or net income. \*

If yes, with respect to indebtedness or liability to a foreign person, indicate to whom indebted or liable, what collateral has been furnished or pledged, and any conditions or covenants of the loan agreement. If stock or assets have been furnished or pledged as collateral, provide a copy of the loan agreement or pertinent extracts thereof (to include procedures to be followed in the event of default).

Indicate whether any classified information is involved. \*

State whether facility is in compliance with applicable export control requirements. \*

Note: As previously stated, we do not expect and will not require the contractor to ask every customer if he/she qualifies as a foreign person. We will ask the contractor to provide ongoing security education to those employees who handle information about company revenues regarding their responsibility to report revenues derived from a foreign person(s) to the best of their knowledge. The contractor will be certifying the response to this question as being to "the best of his/her knowledge" or "through his/her best efforts".

8. Is 10 percent or more of any class of your organization's voting securities held in 'nominee' shares, in 'street names' or in some other method which does not identify the beneficial owner? \*

Yes  No

Identify each foreign institutional investor holding 10% or more of the voting stock by name and address and the percentage of stock held. \*

Indicate whether any investor has attempted to, or has exerted any control or influence over appointments to management positions or influenced the policies of the organization. \*

If yes, include copies of SEC Schedule 13D 13G.

9. Do any of the members of your organization's board of directors (or similar governing body), officers, executive personnel, general partners, regents, trustees or senior management officials hold any positions with, or serve as consultants for, any foreign person(s)?

(9) Positions With or Consultants for Foreign Person(s) \*

Yes  No

Provide the name, title, citizenship, immigration status and clearance or exclusion status on all such persons. \*

Identify, by name and address, each foreign organization with which such persons serve and indicate the capacity in which they are serving. \*

Include a Statement of Full Disclosure of Foreign Affiliations for every cleared individual who is a representative of a foreign interest. \*

Note: We expect the contractor to be able to answer this question fully for those individuals holding such positions with his/her foreign subsidiaries and any foreign interests. However, we do not expect and will not require the contractor to ask every individual to ascertain if he/she is serving as a director, officer or manager of a foreign person. We will ask the contractor to provide ongoing security education to all key management personnel of their responsibilities to report serving as an interlocking director or in any other type of positions with a foreign person to the best of their knowledge. The contractor will be certifying the response to this question as being to "the best of his/her knowledge" or "through his/her best efforts".

10. Is there any other factor(s) that indicates or demonstrates a capability on the part of foreign persons to control or influence the operations or management of your organization? \*

Yes  No

Describe the foreign involvement in detail, including why the involvement would not be reportable in the preceding questions. \*

Remarks

#### Certification Information

Witness 1 Name \*

Witness 2 Name

Authorized Contractor Representative Name \*

Authorized Contractor Representative Title \*

Street 1 \*

Street 2

City \*

State \*

Zip Code

**WHEN READY TO SIGN COMPLETED SF-328:**

When you've completed and validated the information on this page, you can generate a PDF of this SF-328 information by clicking the "Print SF-328 to PDF" button below and save the PDF to your desktop.

Once generated, print the PDF, sign and certify it as indicated, scan the signed printout, and attach the scan to this form as an "SF-328" Supporting Document attachment. Then you should be able to Save and Submit your completed FCL Package.

Note: be sure to Save your changes to this form before generating your PDF.

Activate Windows

Go to Settings to activate Windows

Save

Cancel

## New FCL Package

Basic Information

SAM

SF-328

Supporting Documents

KMP List

Meeting Notes and Comments

Record Information

The following documents are REQUIRED for your business structure. Additional documents may be uploaded.

Upload Supporting Documents

ADD RECORD

Document Type



No Records Present

Save

Cancel

### Add Record button of Upload Supporting Documents sub form

Document Type



Supporting Document



+ Select a File

Description

FCL Package



### Add Record button of Upload Supporting Documents sub form

Document Type ?

- Articles of Incorporation
- Articles of Organization
- Business License
- By-Laws**
- Certificate of Formation
- Certificate of Incorporation
- Certificate of Limited Partnership
- Charter
- DD Form 254
- DD Form 441
- DD Form 441-1
- Exclusion Resolution for KMP (Directors or Officers)
- Exclusion Resolution for KMP (LLC Member)
- Exclusion Resolution for Parent Organization
- Exclusion Resolution for Subsidiary Organization (Noting Parent's Exclusion)
- FSO Appointment Letter
- Fictitious Name Certificate
- JV Agreement
- Legal Organization Chart
- Meeting Minutes
- Most Recent SEC Filings
- Operating Agreement
- Other
- PWS/SOW
- Partnership Agreement
- Proof of Citizenship
- SEC Schedule 13D/13G
- SF-328
- Shareholder Agreement
- Standard Practices Procedures (SPP)
- Standard Practices Procedures (SPP) - with FSO Effectiveness Items
- Stock Ledger
- Subscriber Agreement

Supporting Document ?

FCL Package

### New FCL Package

The following FCLs for KMPs are REQUIRED for your business structure. Additional KMPs may be identified.

KMPs

First Name	Last Name	KMP Role	
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No Records Present

Notice:  
Under the Privacy Act of 1974, you must safeguard personnel information retrieved through this system. Disclosure of information is governed by Title 5, United States Code, Section 552a Public Law 93-579, DoDD 5400.11, DoDR 5400.11-R and the applicable service directives.

KMP Details

Prefix (Mr., Dr., etc.)

Last Name 

Middle Name 

Essential KMP

Yes  No

KMP Role

- FSO
- ITPSO
- SMO

FSO Appointment Date



SSN 

First Name 

Suffix 

Position Titles

Select all that apply:

- CEO
- Partner
- President
- Vice President
- Secretary
- Treasurer
- Chairman
- Director
- Member
- Manager
- Other

Other (Please Specify)

Personnel Security Clearance

PSQ Submitted

Yes  No



Clearance Active

Yes  No



Eligibility



Eligibility Date



Adjudication By

KMP Exclusion

Temporary Exclusion

Exclusion Date



Birth Information

D.O.B (yyyy/mm/dd)



Citizenship

Dual Citizenship

Immigration Status



Investigation Open Date



Investigation Type



Investigation Close Date



Investigation By

Activate Windows

Go to Settings to activate Windows

Country



State



Citizenship Country



Phone



Email



FOCI Related KMP

Inside Director

Outside Director/Proxy Holder



Street 1



Street 2



City



State



Zip Code



Activate Windows  
Go to Settings to activate Windows

Save Cancel

