(Ownership or control of registrant (related to merger, acquisition, or divestiture): 5-day Buyer and Seller)

## U.S. Department of State **DS-7789 STATEMENT OF MATERIAL CHANGES**

(SEE INSTRUCTIONS PAGE)

\* PAPERWORK REDUCTION ACT STATEMENT: Public reporting burden for this collection of information is estimated to average 2 hours per response, including time required for searching existing data sources, gathering the necessary data, providing the information required, and reviewing the final collection. Send comments on the accuracy of this estimate of the burden and recommendations for reducing it to: Department of State (A/GIS/DIR) Washington, D.C. 20520.

Block 1. Applicant Information	
Registration Code:	
Natural Person Entity	
if applicant is: Natural Person	
First Name:	
Middle Name:	None
Last Name:	
if applicant is: Entity	
Applicant Name:	
Address Line 1:	
Address Line 2:	
Address Line 3:	
City:	Country:
State/Province:	Zip/Postal Code:
Block 2. Description of Material Change	
What is the material change type?	
Ownership or Control of Registrant (related to merger, acquisi	tion, or divestiture)
Other Registration Information (not related to merger, acquisi	tion, or divestiture)
if material change type is: Ownership or Control of Registrant the	en display
if material change type is: Other Registration Information then d	isplay
Criminal charge Eligibility Name	e
☐ Directors, senior officers, partners, and/or owners ☐ Estab	lishment of subsidiary/controlled affiliate
Date of event triggering notification requirement:	
Is this a 5-day notice or a 60-day notice?	) 60-Day
If material change type is: merger, acquisition, or divestiture then	display and require the following questions:
The reported transaction will transfer/has transferred ownership of insertion of a foreign person between the registrant and ultimate p	
○ Yes ○ No	
The reported transaction will transfer/has transferred control of a reinsertion of a foreign person between the registrant and ultimate p	
○ Yes ○ No	
If date of event triggering notification is greater than 5 days or less following question	than 60 days as applicable then: display and require the
A voluntary disclosure has been submitted.  Yes No	
If a voluntary disclosure has been submitted is: yes	

DTCC case number:	
The reported transaction will be/has been accomplished by asset or stock purchase:	
○ Asset Purchase ○ Stock Purchase ○ Other If other explain:	
The divesting party will be/has been wholly acquired:	
○ Yes ○ No	
If wholly acquired is: No	
Identify each subsidiary or affiliate that the applicant has divested or acquired, or intends to divest or acquire, in the describe transaction:	ed:
Entity Name:	
Add	
Summarize the essentials of the transaction, including a statement of purpose and description of scope with an explanation of a	ctions
taken/to be taken inside and outside of the U.S.:	
Block 3. Details of Transaction	
Applicant's role in transaction: Acquiring party Divesting party Party to merger	
Identity of each additional acquiring party, divesting party, and/or party to merger:	
Entity Name:	Add
Registered with DDTC? Yes ONO OUnknown	
If are they registered with DDTC is: yes  Registration code (if known):	
Role in transaction: Acquiring party Divesting party Party to merger	
Will any existing authorizations transfer to acquiring party's registration?	
○ Yes ○ No	
If 5-day and existing authorizations will transfer is: yes	
Select all authorization(s) (if known):	
Does the applicant intend to terminate its registration as a result of this transaction?  Yes No	
If registration numbers will be discontinued is: yes	
Registration code to be discontinued:	Add
If applicant's role is acquiring party AND if yes to "Will any existing authorizations transfer to acquiring party's registration," tl display:	
The applicant agrees to assume all rights, responsibilities, liabilities, and obligations that existed, exist, or may develop under the Export Control Act or the International Traffic in Arms Regulations for the specified DDTC licenses and/or other authorizations (in any conditions, limitations, proviso, or amendments thereto).	
○ Yes ○ No	
Block 4. Supporting Documentation	
Other supporting material	
If applicant's role in transaction is: Party to merger  Certificate of merger	
Block 5. Point of Contact Information	
Identify, if applicable, a point of contact with special knowledge regarding the reported material change.	
POC Name:	
POC Title:	

POC Telephone: Int'l Exchange Number	POC E-Mail:
Block 6. Senior Officer Application and Certification Signat	ure
	22 CFR 120-130; 18 U.S.C. 1001), I hereby state that I am an authorized ments made herein, together with any and all appendices and
First Name:	
Middle Name:	
Last Name:	
Title:	
Company or Organization Name:	
E-Mail:	
Signature:	Date:
Priv	vacy Act Statement

AUTHORITIES: U.S. Department of State's authorities to register persons engaged in the business of manufacturing, exporting or importing any defense article or defense service are 22 U.S.C. 2778(b)(1)(A)(i), 22 CFR Part 122, and Executive Order 13637. The authorities to register brokers are 22 U.S.C. 2778 (b)(1)(A)(ii)(I), 22 CFR 129.3, and Executive Order 13637.

PURPOSE: The information gathered through registration is used to identify individuals and entities engaged in certain manufacturing, exporting and brokering activities.
The Department of State will use this information to build and maintain records of ownership, management and transactions related to munitions manufacture, export and temporary import.

**ROUTINE USES:** The information solicited on this form is made available to appropriate agencies for law enforcement or pursuant to a court order. It may also be used to send required reports to Congress about certain defense transactions. More information on the Routine Uses for the system can be found in the System of Records Notice State-42, Munitions Control Records.

**DISCLOSURE:** Disclosure of this information is voluntary. Failure to provide the information requested will prevent completion of the registration process.

(Ownership or control of registrant (related to merger, acquisition, or divestiture): 60-day Buyer)

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Block 1. Applicant Information		
What is your role in the transaction?		
Acquiring party Divesting party	O Party to merger	
Registration Code:	Not registered with PM/DDTC	
If not registered is: Yes		
○ Natural Person ○ Entity		
if applicant is: Natural Person		
First Name:		
Middle Name:		None
Last Name:		
if applicant is: Entity		
Applicant Name:		
Address Line 1:		
Address Line 2:		
A.I.I		
Address Line 3:		
City:	Country	
City:	Country	
City:	Country: Zip/Postal Code:	
City: State/Province:	Country: Zip/Postal Code:	
City:  State/Province:  Select if your mailing address is the same a  Mailing address:  Address Line 1:	Country:  Zip/Postal Code:  as above	
City:  State/Province:  Select if your mailing address is the same a  Mailing address:  Address Line 1:	Country: Zip/Postal Code:	
City:  State/Province:  Select if your mailing address is the same at the same	Country:  Zip/Postal Code:  as above	
City:  State/Province:  Select if your mailing address is the same at the same	Country:  Zip/Postal Code:  as above	
City:  State/Province:  Select if your mailing address is the same at a same and a same a sam	Country:Zip/Postal Code:as above	
City:  State/Province:  Select if your mailing address is the same at address:  Address Line 1:  Address Line 2:  Address Line 3:  City:  State/Province:	Country:  Zip/Postal Code:  as above  Country: United States	
City:  State/Province:  Select if your mailing address is the same at the same	Country: Zip/Postal Code:  as above  Country: United States Zip/Postal Code:	
City:  State/Province:  Select if your mailing address is the same at the same	Country:  Zip/Postal Code:  as above  Country: United States  Zip/Postal Code:  analf of the acquiring party or party to merger? Yes No	
City:  State/Province:  Select if your mailing address is the same at the same	Country:  Zip/Postal Code:  as above  Country: United States  Zip/Postal Code:  analf of the acquiring party or party to merger? Yes No  Per is: Yes	
City:  State/Province:  Select if your mailing address is the same at the same	Country:  Zip/Postal Code:  as above  Country: United States  Zip/Postal Code:  analf of the acquiring party or party to merger? Yes No  Per is: Yes	
City:  State/Province:  Select if your mailing address is the same at address:  Address Line 1:  Address Line 2:  Address Line 3:  City:  State/Province:  If role is: Divesting Party  Are you completing this notification on behalf completing on behalf of behalf of the buye Entity Name:  Address Line 1:	Country:  Zip/Postal Code:  as above  Country: United States  Zip/Postal Code:  analf of the acquiring party or party to merger? Yes No  Per is: Yes	
City:  State/Province:  Select if your mailing address is the same at address:  Address Line 1:  Address Line 2:  Address Line 3:  City:  State/Province:  If role is: Divesting Party  Are you completing this notification on behalf completing on behalf of behalf of the buye Entity Name:  Address Line 1:  Address Line 2:  Address Line 3:	Country: Zip/Postal Code:  as above  Country: United States Zip/Postal Code:  analf of the acquiring party or party to merger? Yes No  Per is: Yes	
City:  State/Province:  Select if your mailing address is the same at address:  Address Line 1:  Address Line 2:  Address Line 3:  City:  State/Province:  If role is: Divesting Party  Are you completing this notification on behalf completing on behalf of behalf of the buye Entity Name:  Address Line 1:  Address Line 2:  Address Line 3:	Country:  Zip/Postal Code:  as above  Country: United States  Zip/Postal Code:  analf of the acquiring party or party to merger? Yes No  Per is: Yes  Country:	

What is the material change type?
Ownership or Control of Registrant (related to merger, acquisition, or divestiture)
Other Registration Information (not related to merger, acquisition, or divestiture)
if material change type is: Ownership or Control of Registrant then display
if material change type is: Other Registration Information then display
☐ Criminal charge ☐ Eligibility ☐ Name ☐ Address ☐ Legal organization structure
☐ Directors, senior officers, partners, and/or owners ☐ Establishment of subsidiary/controlled affiliate
Date of event triggering notification requirement:
Is this a 5-day notice or a 60-day notice? 5-Day 60-Day  If date of event triggering notification is greater than 5 days or less than 60 days as applicable then: display and require the following question  A voluntary disclosure has been submitted. Yes No
If a voluntary disclosure has been submitted is: yes  DTCC case number:
The divesting party will be/has been wholly acquired:
If wholly acquired is: No
Identify each subsidiary or affiliate that the applicant has divested or acquired, or intends to divest or acquire, in the described transaction:
Entity Name:
The identified entity will be/has been wholly acquired: Yes No
Summarize the essentials of the transaction, including a statement of purpose and description of scope with an explanation of actions taken/to be taken inside and outside of the U.S.:
Disale 2. Details of Turner etion
Block 3. Details of Transaction  Does the acquiring party/party to merger have any parent entities (U.S. and foreign, intermediate and ultimate)? Yes No
If Does acquiring party/party to merger have any parent entities (U.S. and foreign, intermediate and ultimate) is: Yes
Entity Name:
"Doing Business As" name:
Address Line 1:
Address Line 2:
Address Line 3:
City: Country:
State/Province: Zip/Postal Code:
Point of Contact:
POC Telephone: Int'l Exchange Number POC E-Mail:
Parent Status: Ultimate Intermediate U.S. Person: Yes No
Foreign owned or controlled: Yes No Government owned or controlled: Yes No

Does the acquiring entity/merger partner have any subsidiaries/affili	iates registered with DDTC? Yes No
If Does acquiring entity/merger partner have any subsidiaries/affil	liates registered with DDTC is: Yes
Entity Name:	
Address Line 1:	
Address Line 2:	
Address Line 3:	
City:	Country:
State/Province:	Zip/Postal Code:
Citizenship(s):	Add
Ad	d
List individuals or entities with an ownership interest of greater than  Natural Person Entity	15% in the acquiring party:
if Individual is: Natural Person	
First Name:	
Middle Name:	None
Last Name:	
if Individual is: Entity	
Entity Name:	
Position/Title:	
Address Line 1:	
Address Line 2:	
Address Line 3:	
City:	Country:
State/Province:	Zip/Postal Code:
Telephone: Int'I Exchange Number	E-Mail:
Citizenship(s):	Add
U.S. Person: Yes No	
Ad	d
List members of the board of directors, senior officers, and partners of presidents, vice presidents, corporate secretaries, partners, members general counsel):	
○ Natural Person ○ Entity	
if member is: Natural Person	
First Name:	
Middle Name:	None
Last Name:	
if member is: Entity	
Entity Name:	
Position/Title:	
Address Line 1:	
Address Line 2:	

Address Line 3:			
City:	Country:		
tate/Province: Zip/Postal Code:			
Telephone: Int'l Exchange Number	E-Mail:		
Citizenship(s):			Add
U.S. Person: Yes No	d		
Will any existing authorizations transfer?	Jnknown		
With respect to the acquiring party or party to merger, including throdo any foreign persons (including foreign governments) from count		ent entities	thereof,
Have authority and/or ability to establish and/or direct the genera	l policies and/or day-to-day operations?	○ Yes	○No
Own 5% or more of the outstanding voting securities or equity?			○No
Have a contingent interest, including through an outstanding loar	n or convertible voting instrument?	○Yes	○No
Have the ability to appoint principal officers or members of the bo	ard of directors?	○Yes	○No
With respect to the acquiring party or party to merger, including three do any foreign governments from countries not specified in 22 CFR	• ,	ent entities	thereof,
Have authority and/or ability to establish and/or direct the genera	l policies and/or day-to-day operations?	○ Yes	$\bigcirc$ No
Own 5% or more of the outstanding voting securities or equity?		○ Yes	$\bigcirc$ No
Have a contingent interest, including through an outstanding loar	or convertible voting instrument?	○ Yes	○No
Have the ability to appoint principal officers or members of the bo	ard of directors?	○Yes	○No
if any foreign person/government questions is: Yes  Name of foreign person and/or government:  Country:			
Explanation:			
Ad	d		
Describe any representation the acquiring entity or party to merger	will have in the acquired party's management:		
Will foreign persons have management or oversight of, or access to, undertaken, by the acquired entity as a result of the merger or acqui	—·	○ Yes	○ No
if management or oversight is: Yes			
Describe the intended management, oversight, and/or access:			
Indicted/Charged/Convicted status of acquiring party or party to me No person has been indicted or otherwise charged (e.g., charge	_	for or con	victed
of violating any of the U.S. criminal statutes enumerated in 22 defense articles where conviction of such law carries a minimulation on or more persons has been indicted or otherwise charged convicted of violating any of the U.S. criminal statutes enumer exportation of defense articles where conviction of such law copy of the relevant documentation is attached.	om term of imprisonment of greater than 1 year. (e.g., charged by criminal information in lieu of in Tated in 22 CFR 120.27 or violating a foreign crim	ndictment) inal law on	) for or
Contract and license eligibility of acquiring party or party to merger:			
No person is ineligible to contract with, or to receive a license of from, or to receive an export license or other approval from, are One or more persons is ineligible to contract with, or to receive services from, or to receive an export license or other approval	ny agency of the U.S. Government. e a license or other approval to import defense a	articles or d	lefense
documentation is attached.			

Block 4. Supporting Do	cumentation	
Evidence of good s	standing to conduct bu	siness
_ ~	ort depicting how the a	quired entity will be integrated into the acquiring party or party to merger (including the or ultimate parents)
Copy of the ITAR co	ompliance materials (to	include export compliance policies and procedures) in effect immediately after the
transaction closes		
☐ Indicted/Charged/	Convicted status docui	nentation
Contract and licens	se eligibility status doc	mentation
Other supporting n	naterial	
If completed by divesti	ing party on behalf of	acquiring party or party to merger is: Yes
Certification from a	acquiring party regardi	ng the veracity of the information provided
Block 5. Point of Contac	 ct Information	
POC Name:		
POC Title:		
POC Telephone:	Int'l Exchange	POC E-Mail:
officer of the applicant.	I warrant the truth of a ssion on behalf of the a	C. 2278-2780; 22 CFR 120-130; 18 U.S.C. 1001), I hereby state that I am an authorized senion I statements made herein, together with any and all appendices and attachments thereto cquiring party or party to merger identified in block (1), I warrant that the information
First Name:		
Middle Name:		
Last Name:		
Title:		
Company or Organizat	ion Name:	
E-Mail:		
Signature:		Date:
		Privacy Act Statement
		ster persons engaged in the business of manufacturing, exporting or importing any defense article or defense ecutive Order 13637. The authorities to register brokers are 22 U.S.C. 2778 (b)(1)(A)(ii)(I), 22 CFR 129.3, and
_		used to identify individuals and entities engaged in certain manufacturing, exporting and brokering activities. In maintain records of ownership, management and transactions related to munitions manufacture, export and
	ess about certain defense tra	de available to appropriate agencies for law enforcement or pursuant to a court order. It may also be used to nsactions. More information on the Routine Uses for the system can be found in the System of Records Notice
<b>DISCLOSURE:</b> Disclosure of thi	is information is voluntary. F	silure to provide the information requested will prevent completion of the registration process.

(Ownership or control of registrant (related to merger, acquisition, or divestiture): 60-day Seller)

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Block 1. Applicant Information	
Registration Code:	
Natural Person Entity	
if applicant is: Natural Person	
First Name:	
Middle Name:	None
Last Name:	
if applicant is: Entity	
Applicant Name:	
Address Line 1:	
Address Line 2:	
Address Line 3:	
City:	Country:
State/Province:	Zip/Postal Code:
Block 2. Description of Material Change	
What is the material change type?	
Ownership or Control of Registrant (related to merger, acquisi	tion, or divestiture)
Other Registration Information (not related to merger, acquisi	tion, or divestiture)
if material change type is: Ownership or Control of Registrant the	en display
if material change type is: Other Registration Information then d	isplay
Criminal charge Eligibility Name	e
☐ Directors, senior officers, partners, and/or owners ☐ Estab	lishment of subsidiary/controlled affiliate
Date of event triggering notification requirement:	
Is this a 5-day notice or a 60-day notice?	) 60-Day
If material change type is: merger, acquisition, or divestiture then	display and require the following questions:
The reported transaction will transfer/has transferred ownership of insertion of a foreign person between the registrant and ultimate p	
○ Yes ○ No	
The reported transaction will transfer/has transferred control of a reinsertion of a foreign person between the registrant and ultimate p	
○ Yes ○ No	
If date of event triggering notification is greater than 5 days or less following question	than 60 days as applicable then: display and require the
A voluntary disclosure has been submitted.  Yes No	
If a voluntary disclosure has been submitted is: yes	

DTCC case number:	
The reported transaction will be/has been accomplished by asset or stock purchase:	
○ Asset Purchase ○ Stock Purchase ○ Other If other explain:	
The divesting party will be/has been wholly acquired:	
○ Yes ○ No	
If wholly acquired is: No	
Identify each subsidiary or affiliate that the applicant has divested or acquired, or intends to divest or acquire, in the describe transaction:	•d
Entity Name:	
The identified entity will be/has been wholly acquired: Yes No	
Summarize the essentials of the transaction, including a statement of purpose and description of scope with an explanation of actaken/to be taken inside and outside of the U.S.:	ctions
Block 3. Details of Transaction	
Applicant's role in transaction: Acquiring party Divesting party Party to merger	
Identity of each additional acquiring party, divesting party, and/or party to merger:	
Entity Name:	Add
Role in transaction: Acquiring party Divesting party Party to merger	
Registered with DDTC? Yes No Unknown	
If they are registered with DDTC is: yes	
Registration Code (if known):	
Will any existing authorizations transfer to acquiring party's registration? Yes No Unknown	
Does the applicant intend to terminate its registration as a result of this transaction?  Yes No	
If registration numbers will be discontinued is: yes	
Registration code to be discontinued:	Add
if 60-day notice:	
Name of direct, intermediate, and ultimate parent(s) for each acquiring party or party to merger:	
Entity Name:	Add
Registered with DDTC? Yes No Unknown	
If they are registered with DDTC is: yes	
Registration Code (if known):	
Will the divesting party cease to perform ITAR-controlled activities and divest itself of all ITAR-controlled items (to include technic data) prior to the transaction?  Yes No	cal
Will the transaction be filed/has it been filed with the Committee on Foreign Investment in the United States (CFIUS)? Yes	○ No
Is the organizational chart submitted with the applicant's DS-2032 current?  Yes  No	<b>O110</b>
Block 4. Supporting Documentation	
Other supporting material	
If organizational chart submitted with DS-2032 current is: No	
Organizational chart	
If ceasing all ITAR-controlled activities is: Yes	

Statement explaining the details of, and certifying to, the applicant's plan to divest itself of ITAR-controlled materials
applicant's role in transaction is: Party to merger
Certificate of merger
lock 5. Point of Contact Information
Identify, if applicable, a point of contact with special knowledge regarding the reported material change.
POC Name:
POC Title:
POC Telephone: Int'l Area Exchange Number POC E-Mail:
lock 6. Senior Officer Application and Certification Signature
Under penalty according to federal law (22 U.S.C. 2278-2780; 22 CFR 120-130; 18 U.S.C. 1001), I hereby state that I am an authorized senior officer of the applicant. I warrant the truth of all statements made herein, together with any and all appendices and attachments thereto.
First Name:
Middle Name:
Last Name:
Title:
Company or Organization Name:
E-Mail:
Signature: Date:
Privacy Act Statement

AUTHORITIES: U.S. Department of State's authorities to register persons engaged in the business of manufacturing, exporting or importing any defense article or defense

service are 22 U.S.C. 2778(b)(1)(A)(i), 22 CFR Part 122, and Executive Order 13637. The authorities to register brokers are 22 U.S.C. 2778 (b)(1)(A)(ii)(I), 22 CFR 129.3, and Executive Order 13637.

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