Editable Version of DS-2032
1. General Information
Applicant is a U.S. Person:
□Yes □No
2. Registration Information
Registration Action:
□New □Renewal □Amendment □ Request Early Cancellation of Registration
Request Early Cancellation of Registration
If applicant selects "Request Early Cancellation of Registration" in response to "Registration Action," then display and require a response to the following fields:
Please indicate what you intend to cancel in your Defense Export Control and Compliance System (DECCS)
Registration:
☐Cancel entire Registration (all types/codes) with the Directorate of Defense Trade Controls (DDTC). ☐Cancel certain registration type(s).
Please provide the reason(s) for the early cancellation: ☐ Related to Mergers, Acquisitions, and Divestitures (MAD) ☐ Bankruptcy and Liquidation ☐ Discontinuing International Traffic in Arms Regulations (ITAR) Business ☐ Legal Entity Dissolution ☐ Other*
*If applicant selects "Other" in response to "Please provide the reason(s) for the early cancellation," then display and require the completion of the following explanation field:
Require the completion of the following explanation field, unless applicant selects "Other": Summarize the business reasons for your Early Cancellation of Registration:
If applicant colorts "Cancel antire Decistration (all types (so dec) with DDTC" in response to "Dlages indicate what

If applicant selects "Cancel entire Registration (all types/codes) with DDTC" in response to "Please indicate what you intend to cancel in your DECCS Registration," then display and require a response to the following acknowledgement statement:

Please be aware that selecting "cancel entire Registration (all types/codes) with the Directorate of Defense Trade Controls (DDTC)" will, upon completion of DDTC's review, cause all registration types in your registration to be cancelled. Cancellation is not immediate, and each cancellation request will be processed by a registration analyst. Please be aware that it is your responsibility to ensure that you have met, and continue to meet, all of your ITAR compliance obligations. Notably, 22 CFR Parts 122 and 129 require any person who engages in the United States in the business of manufacturing, exporting, or temporarily importing defense articles, furnishing defense services, or engaged in the business of brokering activities to

register with DDTC, unless otherwise exempt. If you intend to continue to engage in the business of		
manufacturing, exporting, or temporarily importing a defense article or furnishing a defense service,		
including fulfilling the terms of existing licenses or other approvals, you must remain registered with DDTC.		
You should complete any such activities relating to existing licenses or other approvals prior to requesting		
the cancellation of your registration.		
\square I have read the terms and acknowledge.		
If applicant selects "Request Early Cancellation of Registration" and selects "Cancel particular registration type(s)" in response to "Please indicate what you intend to cancel in your DECCS Registration," then display "Registration Type" and require action on "Registration Type" to allow registrant to remove any applicable registration types. If applicant selects "Related to Mergers, Acquisitions, and Divestitures (MAD)" in response to "Please provide the reason(s) for the early cancellation," then display and require completion of "MAD Change" section.		
Registration Type:		
☐ Manufacturer ☐ Exporter ☐ Broker ☐ FMS Freight Forwarder (Exporter)		
☐ U.S. Government ☐ Foreign Government ☐ One Time Exemption		
·		
ONE TIME EXEMPTION: Only display "One Time Exemption" option if the response to "Applicant is a U.S. Person" is "Yes,". If "One-Time Exemption" is selected then display and require completion of the following fields: Description/Make/Model of Defense Article: Manufacturer of Defense Article: USML Category:		
Quantity of Defense Article:		
Dollar Value of Defense Article:		
Please summarize the nature of the One Time Exemption transaction.		
_Add _		
I certify that I am not in the business of manufacturing, exporting or temporarily importing defense articles, related technical data, or furnishing defense services as defined in the 22 CFR Part 120. I also am not in the business of brokering in accordance with 22 CFR Part 129. □ I have read the terms and acknowledge.		
FOREIGN GOVERNMENT: If applicant selects "Foreign Government" in response to "Registration Type," then display the below (and require completion of the following fields only if Designate box is selected): Designate an U.S. FMS Freight Forwarder Applicant legal name:		
Subsidiary or Controlled Affiliate legal name: (if applicable)		
Registration code: (if known) Contract duration: (if known)		
EMS EDEIGHT EODWADDED (EVDODTED): If applicant solacts "EMS Evolatt Forwarder (Evportor)" in response to		
FMS FREIGHT FORWARDER (EXPORTER): If applicant selects "FMS Freight Forwarder (Exporter)" in response to "Registration Type," then display the following question:		
Has a Foreign Embassy in the U.S designated your company as their FMS Freight forwarder in DECCS Registration?		

Yes □ No □
If applicant selects NO, do not display Country or Embassy Registration code or Embassy Registration Expiration Date and allow to proceed to next question.
If applicant selects YES, then display, and require completion of the country field and ask for registration code and expiration date:
FMS FREIGHT FORWARDER (EXPORTER): If applicant selects "FMS Freight Forwarder (Exporter)" in response to "Registration Type," then display and require completion of the following field: Identify authorized countries:
Country:Add _
Embassy Registration code: (if known) Embassy Registration Expiration Date: (if known)
BROKER: If applicant selects "Renewal" AND ALSO selects "Broker" in response to "Registration Type," then display and require completion of the following field: Applicant has brokering activity to report (including successful/unsuccessful brokering activity). Yes No
RENEWAL: If applicant selects "Renewal" AND DECCS Registration determines that the registration is expired, then display and require a response to the following question: If renewing lapsed registration, did you conduct any ITAR business during the lapse period? \[\textsqr{Yes} \textsqr{No} \]
If applicant selects "Yes" in response to: "If renewing lapsed registration, did you conduct any ITAR business during the lapse period?" then display and require a response to the following questions: For a maximum period of 5 years please provide the number of months and the applicable year in which ITAR
business was conducted:
Number of months_\(\sigma\)_Year yyyyAdd
A voluntary disclosure has been submitted regarding the conduct of ITAR business during the lapse period. \Box Yes \Box No
If applicant selects "Amendment" OR "Renewal" in response to "Registration Action," then display and require a
response to the following question:
What is the change type? (You may select more than one option)
☐ Renewal with no changes (If Applicant selects "Amendment", then do not display this selection.) ☐ Substantive Change (Registration information not related to merger, acquisition, or divestiture)
☐ Substantive Change (Registration Information Not related to merger, acquisition, or divestiture) ☐ Merger, Acquisition, or Divestiture (MAD) Change involving ownership or control of applicant
☐ Administrative Change (All registration changes that are not Substantive or MAD changes)
NEW, Renewal, ADMINISTRATIVE, SUBTANTIVE, AND MAD CHANGE AMENDMENTS

If applicant selects "Applicant <u>opts in</u> to DDTC confirming our DDTC registration status" then this question no longer appears on subsequent Administrative Change registration submissions, unless Applicant opts out:
☐ Applicant opts in to allow DDTC to confirm its registration status (which includes only its legal name and registration expiration date) to Authorized Users of Australia and the United Kingdom under 126.7 Exemption of the ITAR.
If applicant selects "Applicant <u>opts out</u> from <u>DDTC</u> confirming our DDTC registration status" then on subsequent Administrative Change submissions the following question "Applicant opt in to DDTC confirming our DDTC registration status" will reappear:
☐ Applicant opts out of DDTC confirming its registration status to Authorized Users of Australia and the United Kingdom under 126.7 Exemption of the ITAR.
If applicant selects "Administrative Change", then display and require completion of the following:
Summarize the Administrative Change(s) being made:
SUBSTANTIVE CHANGE
If applicant selects "Substantive Change (Registration information not related to merger, acquisition, or divestiture)" in response to "What is the change type?" then display and require completion of the following fields and include data field for each Substantive change selected which must be completed:
Please select all Substantive Change(s) that apply: ☐ Criminal Charge ☐ Eligibility ☐ Name ☐ Address ☐ Legal organization structure ☐ Directors, senior officers, partners, and/or owners ☐ Establishment/Addition of subsidiary/controlled affiliate ☐ Removal of subsidiary/controlled affiliate ☐ Bankruptcy and/or Liquidation
Date of event triggering notification requirement <u>Click or tap to enter a date.</u>
Will any existing licenses or other approvals be impacted by the selected Substantive Change(s)? \Box Yes \Box No
If applicant selects Substantive Change the following question will appear if Substantive Change type selected is "Name":
Summarize the business reasons for the Substantive Change(s) being made, include a statement of purpose and description of scope with an explanation of actions taken/to be taken inside and outside of the United States:
MAD CHANGE
If applicant selects "Merger, Acquisition, or Divestiture (MAD) Change involving ownership or control of applicant" in response to "What is the change type?" then display and require completion of the following fields:

Please identify the relevant MAD trans ☐Merger ☐Acquisition	action: □Divestiture		
Date of event triggering notification re-	quirement <u>Click or tap to</u>	enter a date.	
The reported transaction has transferred include insertion of a foreign person be ☐ Yes ☐ No			a foreign person (to
The reported transaction has transferred insertion of a foreign person between to ☐ Yes ☐ No			reign person (to include
DECCS SYSTEM: If date selected from " from submission date, then display an A voluntary disclosure has been submit	d require a response to t		greater than 5 days
If applicant selects "Yes" in res require completion of the follo DTCC case number:	wing field:	isclosure has been submitted	l," then display and
Indicate how the reported transaction was executed. ☐ Asset Purchase ☐ Stock Purchase ☐ Other			
If applicant selects "Other" in response to "Indicate how the reported transaction was executed" then require completion of the following field:			
If other explain:			
Summarize the essential facts of the transcription of actions taken/to be taken			iption of scope with an
Details of Transaction Applicant's role in transaction:		☐ Surviving party to merger ☐ Non-Surviving party to me	rger
Identity of each additional acquiring pa		or party to the merger:	_Add _
Party Type: ☐ Entity ☐ Natural Perso			
If applicant selects "Natural Person" in following fields: First Name:		e," then display and require (completion of the
Middle Name:		_ _ □ None —	

Citizenship(s): Country of Residence:	
Citizenship 1 Telephone:	
Citizenship 2 E-Mail:	
Date of Birth:	
Birth Country:	
If applicant selects "Entity" in response to "Party Type," then display and require completion of the following fields:	
Select Entity Type: ☐ Parent ☐ Subsidiary ☐ Controlled Affiliate	
Registered with DDTC? ☐ Yes ☐ No ☐ Unknown	
If applicant selects "Yes" in response to "Registered with DDTC?" then display and require completion of the	
following fields:	
Registration code (if known):	
Role in transaction: Acquiring party Divesting party	
☐ Surviving party to merger ☐ Non-Surviving party to merger	
If applicant selects "Surviving party to merger" OR "Non-Surviving party to merger" in response to "Rolin Iransaction," then display and require completion of the following field:	le
For confirmation purposes, list registration code of surviving party:	
If applicant selects "Divesting Party" in response to "Applicant's role in transaction" OR "Role in transaction", then display and require completion of the following field: Was the divesting party wholly or partially acquired?	
☐ The divesting party has been wholly acquired.	
☐ The divesting party has been partially acquired.	
If applicant selects "the divesting party has been partially acquired" in response to "Was the divesting party wholly or partially acquired" then display and require completion of the following field: Identify each subsidiary or controlled affiliate that the applicant has divested or acquired in the described transaction:	.
Entity Legal Name:	
If applicant selects "Acquiring party" or "Surviving party to merger" in response to "Applicant's Role in Transaction" require completion of the following field:	the
Will any existing licenses and other approvals transfer to acquiring party or surviving party to merger's registration \Box Yes \Box No	n?
If applicant selects "Acquiring party" OR "Surviving party to merger" in response to "Applicant's role in transaction:" AND selects "Yes" in response to "Will any existing licenses and other approvals transfer acquiring party or surviving party to merger's registration," then display The applicant assumes all rights, responsibilities, liabilities, and obligations that existed, exist, or may develop under the Arms Export Control Act or the International Traffic in Arms Regulations for the specific DDTC licenses and/or other approvals (including any conditions, limitations, proviso, or amendments thereto).	to

RENEWAL: If applicant selects "Renewal" in response to "Registration Action," then display and require a response to the following field:
Summarize the essentials of the registration renewal and any applicable changes, including a statement of purpose and description of scope with an explanation of actions taken/to be taken inside and outside of the United States:
3. Foreign Ownership/Control Information
If applicant selects "No" in response to "Applicant is a U.S. Person" AND selects "Broker" in response to "Registration Type," then do not display first three questions in Block 3, only display the last two questions regarding 22 CFR 126.1 relating to foreign ownership and control.
A foreign person owns, or foreign persons own, more than 50% of the outstanding voting securities of the applicant: \Box Yes \Box No
If applicant selects "Yes" in response to "A foreign person owns, or foreign persons own, more than 50% of the outstanding voting securities of the applicant" then display and require a response to the following field: Add
A foreign person has, or foreign persons have, the authority or the ability to establish or direct the general policies or day- to-day operations of the applicant: \square Yes \square No
If applicant selects "Yes" in response to "A foreign person has, or foreign persons have, the authority or the ability to establish or direct the general policies or day- to-day operations of the applicant" then display and require a response to the following field: Country:Add
A foreign person owns, or foreign persons own, 25% or more of the outstanding voting securities or equity and no other person controls an equal or larger percentage: \Box Yes \Box No
If applicant selects "Yes" in response to "Foreign persons (including foreign governments) from countries specified in 22 CFR 126.1 have the authority and/or ability to establish and/or direct the general policies and/or day-to-day operations of the applicant," then display and require a response to the following field: [Add]
Foreign persons (including foreign governments) from countries specified in 22 CFR 126.1 have the authority and/or ability to establish and/or direct the general policies and/or day-to-day operations of the applicant: \Box Yes \Box No
If applicant selects "Yes" in response to "Foreign persons (including foreign governments) from countries specified in 22 CFR 126.1 have the authority and/or ability to establish and/or direct the general policies and/or day-to-day operations of the applicant," then display and require a response to the following field:

Foreign persons (including foreign governments) from countries specified in 22 CFR 126.1 own more than 5% of the outstanding voting securities or equity of the applicant: \Box Yes \Box No		
If applicant selects "Yes" in response to "Foreign persons (including foreign governments) from countries specified in 22 CFR 126.1 own more than 5% of the outstanding voting securities of the applicant," then display and require a response to the following field:		
Country:Add _		
If the applicant selects "Renewal" or "Amendment" in response to "Registration Action" and also selects "Yes" in response to any of the Foreign Ownership/Control questions in Block 3 where "No" was not previously indicated, display and require response to the following fields:		
Did you submit, as appropriate, 60-day pre-transaction notification to DDTC per 22 CFR 122.4(b)? ☐ Yes ☐ No		
If the applicant selects "No" in response to "Did you submit, as appropriate, 60-day pre-transaction notification to DDTC per 22 CFR 122.4(b)?" display and require a response to the following fields:		
4. Organization Type Information		
Organization Type: ☐ Corporation ☐ Limited Liability Company ☐ Partnership ☐ Sole Proprietorship ☐ Educational Institution ☐ Individual ☐ Other		
If applicant selects "Other" in response to "Organization Type" require completion of the following field Other Organization Type:		
Other Organization Type Explanation:		
If one of the Organization types in question 4 is selected, then display the following fields, and if non-profit is selected require IRS supporting document:		
Is the Selected Organization Type For-Profit or Non-Profit?		
□ Non-profit		
Is the applicant a legal entity operating under a Joint Venture Agreement? Please indicate status below by selecting "Yes" or "No":		
□ Yes □ No		

Date of Incorporation or Business Commencement Date (if applicable): (mm/dd/yyyy or mm/yyyy) Place of Incorporation or Business Commencement Date (if applicable):			
			Country:
5 Ident	tifying Information		
J. Idein	inying information		
Applican	t Type:		
☐ Entity	☐ Natural Person		
If applica	ınt selects "Entity" in res	oonse to "Applicant Type,	then display and require completion of the following
	entity engage in the busi ning a defense service?		exporting, or temporarily importing of a defense article
tempora		se article or furnishing of a	gage in the business of manufacturing, or exporting, or a defense service?", then display and require
	dentify the entity type. ☐ Holding Company ☐ F	rivate Equity □Other	
Other Or	ganization Type Explanat	ion:	
	f applicant selects "Holdi completion of the followi		to "Identify the entity type," then display and require
	_		ty and/or ability to establish or direct the general sidiaries and controlled affiliates? $\ \Box$ Yes $\ \Box$ No
	_		ary oversight, including directing policies and rolled affiliates compliance with the ITAR? $\ \square$ Yes $\ \square$ No
If application fields: Company	//Organization Name:	ponse to "Applicant Type,	
Doing Bu	siness As:		_Add _
Address I	Line:		
City:		Country:	
			p/Postal Code:
Website:			

If applicant selects "Natural Person" in response to "Applicant Type," then display and require comp	letion of the	
following fields:		
First Name:		
Middle Name: \Box		
Last Name:		
Address Line:		
City: Country:		
State/Province: Zip/Postal Code:		
Website:		
☐ Mailing address is the same as legal address.		
If applicant DOES NOT select "Mailing address is the same as legal address", then display and requi	e completion	
of the following fields:	,	
Applicant Mailing Address		
Address Line:		
City: Country:		
State/Province: Zip/Postal Code:		
State/110vinee Zip/10stal code		
Applicant Point of Contact:		
POC Type: Applicant Third Party		
,, ,, ,,		
POC Name:POC Position/Title:		
POC Telephone: POC E-Mail:		
_Add _		
If applicant selects "Authorized third" party point of contact" for this registration then display and r	equire:	
completion of the following POC fields:		
Authorized third party point of contact:		
Company or Organization:		
Name:		
Title:		
Telephone: E-Mail:		
6. Members of the Board of Directors, Senior Officers, Partners, and Owners:		
If "Organization Type" is "Corporation", "Limited Liability Company", or "Partnership" then only dis	play following	
options:		
Yes □ No □ Chief Executive Officer		
Yes □ No □ President		
Yes ☐ No ☐ Chief Financial Officer		
Yes ☐ No ☐ Chief Operating Officer		
Yes □ No □ Chief Information Officer		
Yes ☐ No ☐ Chief Technology Officer		
Vac No Carparata Carretary		
Yes ☐ No ☐ Corporate Secretary Yes ☐ No ☐ Partner [number of Partners]		

Yes ☐ No ☐ Managing Member
Yes 🗌 No 🔲 Treasurer
Yes 🗆 No 🗀 Inside General Counsel
Yes 🗌 No 🖂 Chairman of the Board of Directors
Yes No Member Board of Directors [number of inside positions]
Yes□ No □ Owner (Natural Person) [number of Owners (Natural Person)]
Yes \square No \square Owner (Legal Entity) [number of Owners (Legal Entities)]
Yes \square No \square Owner (Trust) and managing Trustee [number of Trusts and managing Trustees $__$]
Yes \square No \square Other [number of other positions $_$]
If "Organization Type" is "Educational Institution" then only display the following options:
Yes □ No □ Provost
Yes □ No □ Chancellor
Yes ☐ No ☐ Chief Executive Officer
Yes □ No □ President
Yes □ No □ Chief Financial Officer
Yes ☐ No ☐ Chief Operating Officer
Yes ☐ No ☐ Chief Information Officer
Yes No Chief Technology Officer
Yes No Corporate Secretary
Yes No Partner [number of Partners]
Yes ☐ No ☐ Managing Member
Yes \square No \square Treasurer
Yes ☐ No ☐ Inside General Counsel Yes ☐ No ☐ Chairman of the Board of Directors
Yes No Member Board of Directors [number of inside positions []
Yes No Owner (Trust) and managing Trustee [number of Trusts and managing Trustees]
Yes \(\sum \) Owner (Legal Entity) [number of Owners (Legal Entities) \(\sum \)
Yes No Owner (Natural Person)) [number of Owners (Natural Person)]
Yes \square No \square Other [number of other positions $_$]
If "Organization Type" is "Sole Proprietor" then only display the following option:
Yes ☐ No ☐ Sole Proprietor
If "Organization Type" is" Individual" then only display the following option.
Yes □ No □ Individual
If "Organization Type" is "U.S. Government" then only display the following option.
Yes ☐ No ☐ U.S. Government Official
16 "Daristantin Tana" i "Fansia Caramana Walana ankadi albaha da fallanin ankan
If "Registration Type" is "Foreign Government" then only display the following option.
Yes □ No □ Foreign Government Official
Complete the below for all Position(s)/Title(s) where selected Yes above.
Member Type:
□ Natural Person □ Entity

U.S. Person:		
☐ Yes ☐ No		
List all Position(s)/Title(s) Held: Other:		
If applicant selects "Owner (Trust)," or "Owner (L "List all Position(s)/Title(s)," then display and req Does the owner own more than 5% of the applica Does the owner own more than 50% of the applic	nt's voting securities? Yes No	
following fields:	Member Type," then display and require completion of the	
Last Name: First Name:	Date of Birth:	
Middle Name:	Country of Residence:	
Telephone:	,	
E-Mail:		
If the applicant selects "Member Type" is a natural person and selects yes to "U.S. Person", and the applicant and Members list a residence outside of the United States, then display the following question: Summarize how U.S. Person Members residing outside the United States exercise the authority or the ability to establish or direct the general policies or day-to-day operations of the Applicant, its subsidiaries, and its controlled affiliates, to ensure ITAR compliance and oversight?		
If applicant selects "Entity" in response to "Member fields:	Type," then display and require completion of the following	
Company/Organization Name:		
Doing Business As Name:		
Address Line:		
City:		
Country:Zip/Postal Code:		
	Organization Type" then display and require completion of	
Trust Information		
Trust Name:		
Address Line:		
City:		

Country:				
Zip/Postal Code:				
Trustee Information				
Last Name:				
First Name:				
Middle Name:				
Citizenship(s):				
Telephone:				
E-Mail:				
Point of Contact:				
First Name:				
Last Name:				
Telephone:				
Email:				
Towns of NA - PC - P - W				
Type of Modification:	Agreer Acquisition Divestiture Demove/not dispose			
Establishment/Addition (non-MAD)	Merger □ Acquisition □ Divestiture □ Remove/not dispose □			
Establishment/Addition (non-MAD)	lei			
7. U.S. Munitions List Categories				
,				
U.S. Munitions List categories relevant to t	he applicant's manufacturing, exporting, and/or brokering activities:			
☐ I Firearms and Related Articles				
☐ II Guns and Armament				
☐ III Ammunition and Ordnance				
☐ IV Launch Vehicles, Guided Missiles,	Ballistic Missiles, Rockets, Torpedoes, Bombs, and Mines			
	, Propellants, Incendiary Agents, and Their Constituents			
☐ VI Surface Vessels of War and Special				
☐ VII Ground Vehicles	• •			
☐ VIII Aircraft and Related Articles				
☐ IX Military Training Equipment and T	raining			
☐ X Personal Protective Equipment				
☐ XI Military Electronics				
☐ XII Fire Control, Laser, Imaging, and Guidance Equipment				
☐ XIII Materials and Miscellaneous Articles				
☐ XIV Toxicological Agents, Including Chemical Agents, Biological Agents, and Associated Equipment				
☐ XV Spacecraft and Related Articles				
☐ XVI Nuclear Weapons Related Article	5			
☐ XVII Classified Articles, Technical Data	, and Defense Services Not Otherwise Enumerated			
☐ XVIII Directed Energy Weapons				
☐ XIX Gas Turbine Engines and Associa	• •			
☐ XX Submersible Vessels and Related	Articles			
☐ XXI Articles, Technical Data, and Defe	ense Services Not Otherwise Enumerated			
Enter applicable Determination number: _				
Please provide a brief description of applic	ant's business activities:			

8. Subsidiary/Controlled Affiliate Information			
Does the applicant own, or otherwise control, any U.S. or foreign subsidiaries or controlled affiliates in the business of manufacturing, exporting, and/or brokering defense articles or services? \Box Yes \Box No			
Activity Type: ☐ Manufacturer ☐ Exporter ☐ Broker ☐ FMS Freight Forwarder (Exporter)			
Company/Organization Legal Name: "Doing Business As" Name:			
Address Line:			
City: Country:			
State/Province: Zip/Postal Code:			
List all U.S. or foreign subsidiaries and affiliates in the business of manufacturing, exporting, or brokering defense articles or services owned or otherwise controlled by applicant. U.S. Person: Yes No Relationship: Subsidiary Controlled Affiliate			
Is the applicant's subsidiary or controlled affiliate operating under a Joint Venture Agreement? Please indicate status below by selecting "Yes" or "No":			
□ Yes □ No			
If applicant selects "Controlled Affiliate" in response to "Relationship," then display and require responses to the following fields: For Controlled Affiliate: Applicant has the authority and/or ability to establish or direct the general policies or day-to-day operations of the controlled affiliate. Yes No			
Applicant owns 25% or more of the controlled affiliate's outstanding voting securities and no other person controls an equal or larger percentage. □ Yes □ No			
For Controlled Affiliate: Countries specified by 22 CFR 126.1: A foreign person from a country specified in 22 CFR 126.1 has, or foreign persons from ITAR 126.1 countries have, the authority or ability to establish or direct the general policies or day-to-day operations of the controlled affiliate.			
□ Yes □ No			
If applicant selects "Yes" in response to "A foreign person from a country specified in ITAR 126.1 has, or foreign persons from ITAR 126.1 countries have, the authority or ability to establish or direct the general policies or day-to-day operations of the controlled affiliate," then display and require the completion of the following field: Add			

A foreign person from a country specified in 22 CFR 126.1 controls, or a foreign person from a country listed in 22 CFR 126.1, controls 5% or more of the applicant's voting securities.				
□ Yes □ No				
If applicant selects "Yes" in response to "A foreign person from a country specified in 22 CFR 126.1 controls, or foreign persons from countries listed in 22 CFR 126.1, control, 5% or more of the applicant's voting securities," then display and require the completion of the following field: [Add]				
Type of Modification: ☐ No change ☐ Substantive Change☐ Merger ☐ Acquisition ☐ Divestiture ☐ Remove/not dispose ☐ Establishment/Addition (non-MAD) ☐ Other				
☐ Separate Point of Contact for Subsidiary/Controlled Affiliate				
If applicant selects "Separate Point of Contact for Subsidiary/Controlled Affiliate," then display and require completion of the following POC fields: Subsidiary/Controlled Affiliate Point of contact: POC Name: POC Title:				
POC Title:				
Remove subsidiary/controlled affiliate:Add				
If applicant selects "Broker" in response to "Registration Type" AND "Renewal" in response to "Registration Action," then display and require response to the following field: Subsidiary/controlled affiliate has brokering activity to report (including successful/unsuccessful broker activity). Yes No				
9. Parent Information				
Does the applicant have any parent entities (U.S. and foreign, intermediate, and ultimate) that have ownership and control over the applicant? ☐ Yes ☐ No				
If the applicant selects "Yes" to "Does the applicant have any parent entities (U.S. and foreign, intermediate, and ultimate) that have ownership and control over the applicant?" then display and require response to the following field:				
List all parent entities (U.S. or foreign, intermediate, or ultimate): Organization Legal Name: "Doing Business As" Name:				
Address Line:				
City: Country: State/Province: Zip/Postal Code:				
☐ Separate Point of Contact for Parent				

_Add _			
If applicant selects "Separate Point of Contact for Parent," then display and require completion of the following point of contact (POC) fields:			
Parent Company Point of contact (POC):			
POC Name:			
POC Title: POC E-Mail: POC E-Mail:			
Parent Status: ☐ Ultimate ☐ Intermediate			
U.S. Person: ☐ Yes ☐ No Foreign owned or controlled: ☐ Yes ☐ No			
Government owned or controlled:			
Torre of NA JiP and and			
Type of Modification: ☐ No change ☐ Substantive Change ☐ Merger ☐ Acquisition ☐ Divestiture ☐ Remove/not dispose ☐			
Establishment/Addition (non-MAD) Other			
10. ITAR Written Policies			
Does applicant have written policies and procedures for compliance with the ITAR (including but not limited to 22			
CFR 122.5)? ☐ Yes ☐ No			
11. Statement of Registration			
Indicted/Charged/Convicted Status:			
□ No person has been indicted or otherwise charged (e.g., charged by criminal information in lieu of indictment) for or convicted of violating any of the U.S. criminal statutes enumerated in 22 CFR 120.6 or violating a foreign criminal law on exportation of defense articles where conviction of such law carries a minimum term of imprisonment of greater than 1 year.			
☐ One or more persons have been indicted or otherwise charged (e.g., charged by criminal information in lieu of indictment) for or convicted of violating any of the U.S. criminal statutes enumerated in 22 CFR 120.6 or violating a foreign criminal law on exportation of defense articles where conviction of such law carries a minimum term of imprisonment of greater than 1 year. A copy of the relevant documentation is attached.			
Contract and license eligibility			
☐ No person is ineligible to contract with, or to receive a license or other approval to import defense articles or defense services from, or to receive an export license or other approval from, any agency of the U.S. Government.			
☐ One or more persons are eligible to contract with, or to receive a license or other approval to import defense articles or defense services from, or to receive an export license or other approval from, any agency of the U.S. Government. A copy of the relevant documentation is attached.			
Summantina Danumantation.			
Supporting Documentation: ☐Legal Entity Organizational chart			
□Director/Senior Officer Organizational chart □Applicant organization type "other" explanation			

☐Indicted/Charged/Convicted status document	tation			
_				
☐ Explanation of applicant control/ownership	Contract and license eligibility status documentation			
☐IRS nonprofit authorization	Subsidiary/controlled affiliate removal type "other" explanation			
☐Documentation of U.S. Person status	☐ Commodity Jurisdiction Final Determination Letter			
□ Other supporting documentation □ Broker activity report (Control #: 1405-0141) Burden: 2 hours) Proof Applicant is Currently Authorized to Do E □ Articles of Incorporation – For Compa □ Articles of Organization – For Compa □ Certificate of Limited Liability Partne	Business			
☐ Certificate of Limited Farthership – For Companies organized as a Limited Farthership ☐ Certificate of Limited Liability Limited Partnership – For Companies organized as a Limited Liability Limited Partnership				
•	Colleges, and Institutions of higher learning.			
	rtificate) – For Companies that change their legal name			
☐ State Government Endorsed Annual				
	of Good Standing – Only valid for current year			
☐ Trust Agreement – For entities organ				
☐ City or County Business License (only				
☐ IRS EIN (only for sole proprietor)				
☐ Other Supporting State Government otherwise identified above.	document – For other Company organization structure not			
Proof Foreign Person Broker is Currently Author	arized to Do Rusiness			
	cument (Also attach English translation if not in English)			
☐ Supporting Foreign Government Doo	cument (Also attach English translation il flot ili English)			
Proof of Merger, Acquisition, or Divestiture Tr	ansaction			
	es that legally merge with and into another company			
	rtificate) – For Companies that change their legal name			
	panies that changed their business entity type (for example, Inc. to			
LLC)	, , , , , , , , , , , , , , , , , , ,			
	document – For other Company organization structure not			
otherwise identified in one through three				
and the state of t				
Proof of Organizational Structure				
☐ Trust Agreement - For entities organized as a Trust				
☐ Joint Venture Agreement – For applicant or subsidiary or controlled affiliate operating under a Joint Venture				
Agreement				
Senior Officer application and certification sign	nature:			
First Name:				
Middle Name:	 □ None			

Last Name:		
Title:	E-Mail:	
Signature:	Date:	_
Designate a corporate administrator:		
Name:		
Title:		
Telephone:	E-Mail:	
_Add _		