

DEPARTMENT OF DEFENSE CONTRACT SECURITY CLASSIFICATION SPECIFICATION <i>(The requirements of the DoD Industrial Security Manual apply to all security aspects of this effort.)</i>				1. CLEARANCE AND SAFEGUARDING		
				a. FACILITY CLEARANCE REQUIRED <p style="text-align: center;">SECRET</p>		
				b. LEVEL OF SAFEGUARDING REQUIRED <p style="text-align: center;">NA</p>		
2. THIS SPECIFICATION IS FOR: <i>(X and complete as applicable)</i>			3. THIS SPECIFICATION IS: <i>(X and complete as applicable)</i>			
<input checked="" type="checkbox"/>	a. PRIME CONTRACT NUMBER F01620-03-D0002		a. ORIGINAL <i>(Complete date in all cases)</i>	DATE (YYYYMMDD)		
	b. SUBCONTRACT NUMBER		b. REVISED <i>(Supersedes all previous specs)</i>	REVISION NO.	DATE (YYYYMMDD)	
	c. SOLICITATION OR OTHER NUMBER F01620-02-R0031	DUE DATE (YYYYMMDD)	c. FINAL <i>(Complete Item 5 in all cases)</i>		DATE (YYYYMMDD)	
4. IS THIS A FOLLOW-ON CONTRACT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. If Yes, complete the following: Classified material received or generated under _____ <i>(Preceding Contract Number)</i> is transferred to this follow-on contract.						
5. IS THIS A FINAL DD FORM 254? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO. If Yes, complete the following: In response to the contractor's request dated _____, retention of the classified material is authorized for the period of _____						
6. CONTRACTOR <i>(Include Commercial and Government Entity (CAGE) Code)</i>						
a. NAME, ADDRESS, AND ZIP CODE BTAS, INC. 3572 Dayton-Xenia Rd, Suite 210 Beavercreek, OH 45432		b. CAGE CODE 07GB6	c. COGNIZANT SECURITY OFFICE <i>(Name, Address, and Zip Code)</i> Defense Security Service 2900 Presidential Drive Fairborn, OH 45324-6224			
7. SUBCONTRACTOR						
a. NAME, ADDRESS, AND ZIP CODE		b. CAGE CODE	c. COGNIZANT SECURITY OFFICE <i>(Name, Address, and Zip Code)</i>			
8. ACTUAL PERFORMANCE						
a. LOCATION Primary work will be at Maxwell AFB-Gunter Annex, AL. Additional sites will be determined by specific task orders issued under this contract.		b. CAGE CODE	c. COGNIZANT SECURITY OFFICE <i>(Name, Address, and Zip Code)</i> 42 SPS/SPAI 130 West Selfridge Maxwell AFB, AL 36112-6610			
9. GENERAL IDENTIFICATION OF THIS PROCUREMENT  THIS IS A SAMPLE FORM FOR INFORMATION ONLY.  AN ACTUAL REQUIREMENT FOR COMPLETION WILL BE AS IDENTIFIED ON SPECIFIC TASK ORDERS.						
10. CONTRACTOR WILL REQUIRE ACCESS TO:						
	YES	NO	11. IN PERFORMING THIS CONTRACT, THE CONTRACTOR WILL:		YES	NO
a. COMMUNICATIONS SECURITY (COMSEC) INFORMATION		<input checked="" type="checkbox"/>	a. HAVE ACCESS TO CLASSIFIED INFORMATION ONLY AT ANOTHER CONTRACTOR'S FACILITY OR A GOVERNMENT ACTIVITY		<input checked="" type="checkbox"/>	
b. RESTRICTED DATA		<input checked="" type="checkbox"/>	b. RECEIVE CLASSIFIED DOCUMENTS ONLY			<input checked="" type="checkbox"/>
c. CRITICAL NUCLEAR WEAPON DESIGN INFORMATION		<input checked="" type="checkbox"/>	c. RECEIVE AND GENERATE CLASSIFIED MATERIAL			<input checked="" type="checkbox"/>
d. FORMERLY RESTRICTED DATA		<input checked="" type="checkbox"/>	d. FABRICATE, MODIFY, OR STORE CLASSIFIED HARDWARE			<input checked="" type="checkbox"/>
e. INTELLIGENCE INFORMATION		<input type="checkbox"/>	e. PERFORM SERVICES ONLY		<input checked="" type="checkbox"/>	
(1) Sensitive Compartmented Information (SCI)		<input checked="" type="checkbox"/>	f. HAVE ACCESS TO U.S. CLASSIFIED INFORMATION OUTSIDE THE U.S., PUERTO RICO, U.S. POSSESSIONS AND TRUST TERRITORIES			<input checked="" type="checkbox"/>
(2) Non-SCI		<input checked="" type="checkbox"/>	g. BE AUTHORIZED TO USE THE SERVICES OF DEFENSE TECHNICAL INFORMATION CENTER (DTIC) OR OTHER SECONDARY DISTRIBUTION CENTER			<input checked="" type="checkbox"/>
f. SPECIAL ACCESS INFORMATION		<input checked="" type="checkbox"/>	h. REQUIRE A COMSEC ACCOUNT			<input checked="" type="checkbox"/>
g. NATO INFORMATION		<input checked="" type="checkbox"/>	i. HAVE TEMPEST REQUIREMENTS			<input checked="" type="checkbox"/>
h. FOREIGN GOVERNMENT INFORMATION		<input checked="" type="checkbox"/>	j. HAVE OPERATIONS SECURITY (OPSEC) REQUIREMENTS		<input checked="" type="checkbox"/>	
i. LIMITED DISSEMINATION INFORMATION		<input checked="" type="checkbox"/>	k. BE AUTHORIZED TO USE THE DEFENSE COURIER SERVICE			<input checked="" type="checkbox"/>
j. FOR OFFICIAL USE ONLY INFORMATION	<input checked="" type="checkbox"/>		l. OTHER <i>(Specify)</i>		<input checked="" type="checkbox"/>	
k. OTHER <i>(Specify)</i>	<input checked="" type="checkbox"/>		Reference block 13, Item 11L on reverse			
Notification of Government security activity required by FAR 25.204-2						

**12. PUBLIC RELEASE.** Any information (*classified or unclassified*) pertaining to this contract shall not be released for public dissemination except as provided by the Industrial Security Manual or unless it has been approved for public release by appropriate U.S. Government authority. Proposed public releases shall be submitted for approval prior to release  Direct  Through (*Specify*)

HQ SSG/PK  
 490 E. Moore Dr, Suite 270  
 MAFB-Gunter Annex, AL 36114-3000

to the Directorate for Freedom of Information and Security Review, Office of the Assistant Secretary of Defense (Public Affairs)\* for review.  
 \*In the case of non-DoD User Agencies, requests for disclosure shall be submitted to that agency.

**13. SECURITY GUIDANCE.** The security classification guidance needed for this classified effort is identified below. If any difficulty is encountered in applying this guidance or if any other contributing factor indicates a need for changes in this guidance, the contractor is authorized and encouraged to provide recommended changes; to challenge the guidance or the classification assigned to any information or material furnished or generated under this contract; and to submit any questions for interpretation of this guidance to the official identified below. Pending final decision, the information involved shall be handled and protected at the highest level of classification assigned or recommended. (*Fill in as appropriate for the classified effort. Attach, or forward under separate correspondence, any documents/guides/extracts referenced herein. Add additional pages as needed to provide complete guidance.*)

Using contractor or activity will furnish complete classification guidance for the service to be performed. The highest level of classification for the contract is SECRET. Individual task order will address any specific security requirements.

DOD 5220-22R, Industrial Security Regulation, DOD 5220-22M, National Industrial Security Program Operating Manual, Air Force Policy Directive 31-6, Air Force Instruction 31-601, Industrial Security Program Management, are all applicable to this contract.

Item 10J. For Official Use Only (FOUO) Information: Access to FOUO information may be required. When this access is required it will be stated in the security section of the task order and coordinated with the specific Program Manager. FOUO material will be maintained and controlled in accordance with DOD 5400.7/Air Force Supplement, Freedom of Information Act Program.

Item 11L. Automated Information Systems: DOD military, civilian, consultants, and contractor personnel using unclassified automated information systems must have, at a minimum, a National Agency Check in accordance with DOD 5200.2R, Personnel Security Program, January 1987. Those personnel requiring access to classified systems are subject to appropriate background/security investigations.

HQ SSG/MSS \_\_\_\_\_  
 42 SPS/SPAI \_\_\_\_\_

**14. ADDITIONAL SECURITY REQUIREMENTS.** Requirements, in addition to ISM requirements, are established for this contract.  Yes  No  
 (*If Yes, identify the pertinent contractual clauses in the contract document itself, or provide an appropriate statement which identifies the additional requirements. Provide a copy of the requirements to the cognizant security office. Use Item 13 if additional space is needed.*)

A long term visitor security group agreement will be executed between the installation commander or designator and the contractor.

**15. INSPECTIONS.** Elements of this contract are outside the inspection responsibility of the cognizant security office.  Yes  No  
 (*If Yes, explain and identify specific areas or elements carved out and the activity responsible for inspections. Use Item 13 if additional space is needed.*)

42 SPS/SPAI will perform security inspections.

**16. CERTIFICATION AND SIGNATURE.** Security requirements stated herein are complete and adequate for safeguarding the classified information to be released or generated under this classified effort. All questions shall be referred to the official named below.

a. TYPED NAME OF CERTIFYING OFFICIAL	b. TITLE Contracting Officer or Program Manager	c. TELEPHONE ( <i>include Area Code</i> )
--------------------------------------	--	---

d. ADDRESS ( <i>include Zip Code</i> )	<b>17. REQUIRED DISTRIBUTION</b>					
	<input checked="" type="checkbox"/>	a. CONTRACTOR	<input checked="" type="checkbox"/>	b. SUBCONTRACTOR	<input checked="" type="checkbox"/>	c. COGNIZANT SECURITY OFFICE FOR PRIME AND SUBCONTRACTOR
e. SIGNATURE	<input checked="" type="checkbox"/>	d. U.S. ACTIVITY RESPONSIBLE FOR OVERSEAS SECURITY ADMINISTRATION	<input checked="" type="checkbox"/>	e. ADMINISTRATIVE CONTRACTING OFFICER	<input checked="" type="checkbox"/>	f. OTHERS AS NECESSARY
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	