

# Attachment J-12: Checklist and Certification for Minimum Level of Enhanced Safeguarding for Unclassified DoD Information

Processed in accordance with provisions of Section C (MGT.16.1., MGT.16.2. and CP.3.) and CDRL A110 Checklist and Certification for Minimum Level of Enhanced Safeguarding for Unclassified DoD Information, of Contract HT9402-10-C-0002

Access Control					
Ref #	Nomenclature	Compliance Statement	Assessment Method	Compliance Date	Activity Description
AC-2	Account Management	Select Answer	Select Method		
AC-3	Access Enforcement	Select Answer	Select Method		
AC-3(4)	Access Enforcement	Select Answer	Select Method		
AC-4	Information Flow Enforcement	Select Answer	Select Method		
AC-6	Least Privilege	Select Answer	Select Method		
AC-7	Unsuccessful Login Attempts	Select Answer	Select Method		
AC-11	Session Lock	Select Answer	Select Method		
AC-11(1)	Session Lock	Select Answer	Select Method		
AC-17	Remote Access	Select Answer	Select Method		
AC-17(2)	Remote Access	Select Answer	Select Method		
AC-18	Wireless Access	Select Answer	Select Method		
AC-18(1)	Wireless Access	Select Answer	Select Method		
AC-19	Access Control for Mobile Devices	Select Answer	Select Method		

Awareness & Training					
Ref #	Nomenclature	Compliance Statement	Assessment Method	Compliance Date	Activity Description
AT-2	Security Awareness	Select Answer	Select Method		

<b>Audit &amp; Accounting</b>					
<b>Ref #</b>	<b>Nomenclature</b>	<b>Compliance Statement</b>	<b>Assessment Method</b>	<b>Compliance Date</b>	<b>Activity Description</b>
AU-2	Auditable Events	Select Answer	Select Method		
AU-3	Content of Audit Records	Select Answer	Select Method		
AU-6	Audit Review, Analysis & Reporting	Select Answer	Select Method		
AU-6(1)	Audit Review, Analysis & Reporting	Select Answer	Select Method		
AU-7	Audit Reduction & Report Generation	Select Answer	Select Method		
AU-8	Time Stamps	Select Answer	Select Method		
AU-9	Protection of Audit Information	Select Answer	Select Method		
AU-10	Non-Repudiation	Select Answer	Select Method		
AU-10(5)	Non-Repudiation	Select Answer			

<b>Configuration Management</b>					
<b>Ref #</b>	<b>Nomenclature</b>	<b>Compliance Statement</b>	<b>Assessment Method</b>	<b>Compliance Date</b>	<b>Activity Description</b>
CM-2	Baseline Configuration	Select Answer	Select Method		
CM-6	Configuration Settings	Select Answer	Select Method		
CM-7	Least Functionality	Select Answer	Select Method		
CM-8	Information Sys Component Inventory	Select Answer	Select Method		

<b>Contingency Planning</b>					
<b>Ref #</b>	<b>Nomenclature</b>	<b>Compliance Statement</b>	<b>Assessment Method</b>	<b>Compliance Date</b>	<b>Activity Description</b>
CP-9	Information System Backup	Select Answer	Select Method		

<b>Identification &amp; Authentication</b>					
<b>Ref #</b>	<b>Nomenclature</b>	<b>Compliance Statement</b>	<b>Assessment Method</b>	<b>Compliance Date</b>	<b>Activity Description</b>
IA-2	User Identification & Authentication	Select Answer	Select Method		
IA-4	Identifier Management	Select Answer	Select Method		
IA-5	Authenticator Management	Select Answer	Select Method		
IA-5(1)	Authenticator Management	Select Answer			

Incident Response					
Ref #	Nomenclature	Compliance Statement	Assessment Method	Compliance Date	Activity Description
IR-2	Incident Response Training	Select Answer	Select Method		
IR-4	Incident Handling	Select Answer	Select Method		
IR-5	Incident Monitoring	Select Answer	Select Method		
IR-6	Incident Reporting	Select Answer	Select Method		

Maintenance					
Ref #	Nomenclature	Compliance Statement	Assessment Method	Compliance Date	Activity Description
MA-4	Remote Maintenance	Select Answer	Select Method		
MA-4(6)	Remote Maintenance	Select Answer			
MA-5	Maintenance Personnel	Select Answer	Select Method		
MA-6	Timely Maintenance	Select Answer	Select Method		

Media Protection					
Ref #	Nomenclature	Compliance Statement	Assessment Method	Compliance Date	Activity Description
MP-4	Media Storage	Select Answer	Select Method		
MP-6	Media Sanitization & Disposal	Select Answer	Select Method		

Physical & Environmental Protection					
Ref #	Nomenclature	Compliance Statement	Assessment Method	Compliance Date	Activity Description
PE-5	Access Control for Display Medium	Select Answer	Select Method		
PE-7	Visitor Control	Select Answer	Select Method		

Program Management					
Ref #	Nomenclature	Compliance Statement	Assessment Method	Compliance Date	Activity Description
PM-10	Security Authorization Process	Select Answer			

System & Comm Protection					
Ref #	Nomenclature	Compliance Statement	Assessment Method	Compliance Date	Activity Description
SC-2	Application Partitioning	Select Answer	Select Method		
SC-4	Information Remnance	Select Answer	Select Method		
SC-7	Boundary Protection	Select Answer	Select Method		
SC-7(2)	Boundary Protection	Select Answer	Select Method		
SC-9	Transmission Confidentiality	Select Answer	Select Method		
SC-9(1)	Transmission Confidentiality	Select Answer	Select Method		
SC-13	Use of Cryptography	Select Answer	Select Method		
SC-13(1)	Use of Cryptography	Select Answer			
SC-13(4)	Use of Cryptography	Select Answer			
SC-15	Collaborative Computing	Select Answer	Select Method		
SC-28	Protection of Information at Rest	Select Answer			

System & Information Integrity					
Ref #	Nomenclature	Compliance Statement	Assessment Method	Compliance Date	Activity Description
SI-2	Flaw Remediation	Select Answer	Select Method		
SI-3	Malicious Code Protection	Select Answer	Select Method		
SI-4	Information System Monitoring	Select Answer	Select Method		

**CERTIFICATION OF COMPLIANCE:** I certify that I am an official representative for [insert name of contractor], that I have authority to sign this document and obligate [insert name of contractor] to the statements made in this document, and that I have personal knowledge of the matters to which this certification applies. I also certify that [insert name of contractor] is in compliance with the enhanced safeguarding requirements identified within the contract clause stated above, this document and any applicable written determinations.

[Insert name of contractor] acknowledges that certification and submission of this document does not constitute approval or acceptance by the Government of the processes or procedures of [insert name of contractor] in meeting the expressed, enhanced safeguarding requirements required by contract, and that the Government may effect any or all rights and remedies allowed by law, regulation and/or contract requirements, clauses or special provisions in ensuring [insert name of contractor] meets the identified enhanced safeguarding requirements.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Company:** \_\_\_\_\_

## Sample Written Determination Format

### Written Determination <Insert Reference #> in Support of TMA's DTM 08-027 Checklist

<Insert Date>

Contract Reference #  
Contactor Name  
Street Address  
City, ST ZIP

<b>Information Assurance (IA) Control #:</b>	<Enter the specific IA Control # from the "Checklist">
<b>IA Control Nomenclature:</b>	<Enter the specific IA Control's Nomenclature>
<b>Compliance Statement:</b>	<Restate the Contractor's compliance with the IA Control.>
<b>Issue:</b>	
<Provide basic "business" description for why the contractor cannot / will not meet the requirements of the NIST 800-53/A IA control as listed on TMA's DTM 08-027 Checklist.>	
<b>Contractor-identified Solution:</b>	
<Provide a business-level description of the contractor's alternative plan to satisfy the security requirements associated with the Checklist's specific IA control.>	
<b>Mitigation / Remediation Plan:</b>	
<As appropriate, provide a business-level description of the contractor's plan of action and milestone for implementing the solution listed above.>	
<b>Risk Acceptance Statement</b>	
<Provide a statement the contractor accepts the risk of either implementing a technical solution different from the NIST guidance or contract operations until the NIST control can be implemented.>	