# ICTS TRANSACTION REVIEW REFERRAL INTAKE FORM

This form is intended to provide a way for industry stakeholders and other entities to submit information regarding ICTS (Information and Communications Technology and Services) transactions for potential review by the Office of Information and Communications Technology and Services (OICTS). This form enables OICTS to assess potential risks to the national security of the United States or the security and safety of United States persons posed by specific ICTS transactions within the regulatory requirements under Executive Orders 13873,14034 and the implementing regulation at 15 C.F.R. Part 791.

***OICTS will consider all information provided in this referral but reserves the discretion to further pursue any tips provided, based upon investigative value. Do not use this form to submit inquires or provide information about export controls.***

**Warning:** Providing false information could result in a fine, imprisonment, or both (Title 18, U.S. Code, Section 1001).

## REFERRING ENTITY DETAILS

Please provide your contact information.

**Organization/Agency:**

Name: _____
Address: _____
City: _____
State: _____
Zip Code: _____
Phone Number: _____
Website: _____

**Referral Point of Contact (POC):**

Name: _____
Title: _____
Email Address: _____
Phone Number: _____

## INFORMATION REQUIRED TO ESTABLISH JURISDICTION

OICTS must determine whether a referral involves an ICTS transaction or class of ICTS transactions that fall under the jurisdictional scope of EO 13873, section 1(a), and at 15 C.F.R. § 791.3.

Answering as many of the following questions, if possible, will help OICTS determine if the transaction(s) are covered ICTS transactions and whether they qualify for further review.

Does the transaction or transactions involve a person (individual or entity) or property subject to U.S. jurisdiction? *If yes, please provide as much information as possible.*

_____

_____

Does a foreign country or national have an interest in the property involved? *If yes, please provide as much information as possible.*

_____

_____

Was the transaction or were the transactions initiated, pending, or completed on or after January 19, 2021? *If yes, please provide as much information as possible.*

_____

_____

Does the transaction or transactions involve the acquisition, import, transfer, installation, dealing in, or use of ICTS types specified in 15 C.F.R. § 791.3(a)(4)? *If yes, please provide as much information as possible.*

_____

_____

Does the transaction or transactions involve ICTS designed, developed, manufactured, or supplied by a person(s) (individual or entity) owned by, controlled by, or subject to the jurisdiction or direction of a foreign adversary? *If yes, please provide as much information as possible.*

_____

_____

**SUBJECT ENTITY DETAILS**

Please provide as much information as possible regarding the foreign or domestic entity that is the subject of the referral.

**Full Name of Entity:** _____

**Entity Address (U.S. address if available):**

Address: _____
City:_____
State:_____
Zip Code: _____

**Corporate Ownership Information (if available):**

U.S. Subsidiaries: _____
Foreign Subsidiaries: _____
Ultimate Beneficial Owner (UBO): _____

## TRANSACTION DETAILS

Please provide as much information as possible regarding a specific ICTS transaction(s) (e.g., services or products actually provided by the subject entity you're referring) that can be traced to the foreign adversary country (e.g., People's Republic of China, Russia) and a U.S. person (individual or entity).

**Specific Transactions of Concern:**

Products or Services Provided:

_____
_____

Connection to U.S. Persons (individual or entity):

_____
_____

Additional Information Concerning the Transaction:

_____
_____

## ADDITIONAL RELEVANT INFORMATION

Provide any further information that supports concerns about the ICTS transaction(s), including supporting documents or references.

_____
_____
_____
_____
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