

The seal of the Department of the Treasury is a circular emblem. It features a central shield with a yellow background. On the shield, there are a pair of blue scales of justice at the top, a blue banner with white stars across the middle, and a blue key at the bottom. The shield is set against a blue circular background. The words "THE DEPARTMENT OF THE TREASURY" are written in white, uppercase letters around the inner edge of the circle. At the bottom of the circle, the year "1789" is written in white.

**Before the  
Outbound Investment Security Program**

Blank Notification Template for  
§ 850.401 Undertaking a Notifiable Transaction

**Before the  
Outbound Investment Security Program**

**U.S. Person Primary Representative Information**

**Full Name:**

**Title:**

**Email:**

**Phone Number:**

**Employer:**

**U.S. Person Primary Representative Information**

International

**Country:**

**Street Address:**

**City:**

**State:**

**Postal Code:**

**Persons Associated with the Transaction**

<b>Name</b>	<b>Company/Firm of Representative</b>	<b>Primary Representative?</b>
		YES/NO
		YES/NO
		YES/NO

**U.S. Person Information**

**Is the U.S. Person an individual or entity?**

Individual/Entity

**Full Name:**

**Principal Place of Business [City]:**

**Principal Place of Business [Country]:**

**Place of Incorporation or Legal Organization:**

**Primary NAICS Code:**

**Before the  
Outbound Investment Security Program**

Please provide a brief description of the U.S. Person:

Website Address (if any):

U.S. Person Parent(s):

Type	Name	Principle Place of Business	Place of Incorporation
Entity/Individual			
Entity/Individual			
Entity/Individual			

Does the U.S. Person have any Intermediate Parent(s)?

Yes/No

Intermediate Parent(s)

Entity Name	Principle Place of Business	Place of Incorporation

**U.S. Company Address**

Street Address:

City:

State:

Zip Code:

Additional Information:

**Covered Transaction**

Notification Type:

**Before the  
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Provide a brief description of why the U.S. person has determined the transaction is a covered transaction that includes an explanation of the nature of the transaction, its structure, reference to the paragraph of § 850.210(a) that best describes the transaction type, and whether the notification is being submitted pursuant to § 850.401, § 850.402, or § 850.403:

Briefly describe the commercial rationale for the transaction:

Please provide the date upon which the U.S. Person acquired such knowledge:

Please describe the status of the transaction:

Total transaction value (in U.S. dollars):

Please provide an explanation of how the transaction value was determined:

Provide the consideration from the U.S. Person (including cash, securities, other assets, and debt forgiveness) for the transaction:

Pre-transaction equity interest percentage:

Post-transaction equity interest percentage:

Provide the aggregate equity interest, voting interest, board seat (or equivalent holdings) of the U.S. person and its affiliates in the covered foreign person (or in the joint venture, as applicable) following the completion date of the transaction:

Was this transaction undertaken directly or indirectly?

Directly/Indirectly

**Agreements or Future Investments**

Are there any agreements or commitments for future investment or options to make future investment(s) not discussed above?

Yes/No

If yes, please include a description of any agreements or commitments for future investment or options to make future investments in the covered foreign person (or joint venture):

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**Select the type of transaction undertaken:**

Equity Interest	
Equity Interest Type	
Contingent Equity Interest	
Conversion of Equity Interest	
Debt Financing	
Assets	
Acquisition	
Leasing	
Development	
Joint Venture	
Acquisition of Interest in a Fund	

**Prior Transactions**

Is the transaction identified in this notification related to a prior transaction (e.g., between similar parties, acquiring additional interests, etc.)

Yes/No

If yes, please provide the related Notification ID, if applicable.

Notification ID

Has any party to this notification ever submitted a prior notification to the U.S. Department of the Treasury under 31 CFR Part 850?

Yes/No

If yes, please provide the relevant Notification ID, if applicable.

Notification ID

**Covered Transaction Additional Information:**

**Covered Foreign Person**

*If Covered Foreign Person is not applicable, please use the below space to describe the Covered Activities' location.*

**Full Name:**

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Outbound Investment Security Program**

**Principal Place of Business [City]:**

**Principal Place of Business [Country]:**

**Place of Incorporation or Legal Organization:**

**Was the Covered Foreign Person established as a result of the Transaction?**

Yes/No

**Website Address (If any):**

**Please include a statement identifying and describing the attributes that cause the entity to be a covered foreign person, and any other relevant information regarding the covered foreign person and covered activity or activities:**

**Please select all Countries of Concern related to the Covered Foreign Person or Covered Activities:**

People's Republic of China	<input type="checkbox"/>
Hong Kong SAR	<input type="checkbox"/>
Macau SAR	<input type="checkbox"/>

**Fund Information**

*If this notice is related to § 850.210(a)(6), please provide the below information*

**Full Name:**

**Principal Place of Business [City]:**

**Principal Place of Business [Country]:**

**Place of Incorporation or Legal Organization:**

**Describe the fund in which the U.S. person acquired interest, including the fund name and identification of any general partner, managing member, and investment adviser:**

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Describe the process by which the U.S. Person became aware that the relevant fund likely would invest in a Person of a Country of Concern in the semiconductors and microelectronics, quantum information technologies, or artificial intelligence sectors:

Describe the process by which the U.S. Person became aware that the relevant fund may undertake or undertook a transaction that would be a Covered Transaction if undertaken by a U.S. Person:

Is the information above attributable to a person of a country of concern?

Yes/No

**Person of a Country of Concern**

Full Name:

Principal Place of Business [City]:

Principal Place of Business [Country]:

Place of Incorporation or Legal Organization:

Website Address (if any):

**Covered Foreign Person Company Address**

Address:

City:

Country:

Postal Code:

Does the Covered Foreign Person have any Intermediate or Ultimate Parents not referenced above?

Yes/No

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**Intermediate and Ultimate Parent(s)**

Parent Type	Parent Name	Principal Place of Business	Place of Incorporation/Organization
Intermediate/Ultimate			
Intermediate/Ultimate			
Intermediate/Ultimate			

**Corporate Leadership**

Please provide the full legal names and titles of each officer, director, and other members of management of the covered foreign person.

Title/Position	First Name	Middle Name	Last Name

**Covered Activity**

Select all the Technology Activities that apply:

Artificial Intelligence	<input type="checkbox"/>	Semiconductors and Microelectronics	<input type="checkbox"/>	Quantum Information Technologies	<input type="checkbox"/>
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**Artificial Intelligence Option(s):**

Develops any AI system designed exclusively for or intended to be used for military, government intelligence, or mass surveillance end use	<input type="checkbox"/>	Develops any AI system trained using a quantity of computing power greater than 10 <sup>25</sup> computational operations	<input type="checkbox"/>
Develops any AI system trained using a quantity of computer power greater than 10 <sup>24</sup> computational operations using primarily biological sequence data	<input type="checkbox"/>	Develops any Other AI system trained using a quantity of computing power greater than 10 <sup>23</sup> computational operations	<input type="checkbox"/>
Develops any Other AI system designed to be used for government intelligence or mass-surveillance end use	<input type="checkbox"/>	Develops any Other AI system intended to be used for cybersecurity applications	<input type="checkbox"/>
Develops any Other AI system intended to be used for digital forensics tools	<input type="checkbox"/>	Develops any Other AI systems intended to be used for penetration testing tools	<input type="checkbox"/>
Develops any Other AI systems intended to be used for the control of robotic systems	<input type="checkbox"/>		

**Semiconductors and Microelectronics Option(s):**

Integrated Circuits	<input type="checkbox"/>
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Design of any integrated circuit meeting or exceeding performance parameters in ECCN 3A090.a, or designed for operation at or below 4.5 Kelvin	<input type="checkbox"/>
Fabricates any logic integrated circuits (using a non-planar transistor architecture or with a production technology node of 16/14 nanometers or less)	<input type="checkbox"/>
Fabricates any NAND memory integrated circuits (at least 128 layers)	<input type="checkbox"/>
Fabricates any DRAM integrated circuits (technology node of 18 nanometer half-pitch or less)	<input type="checkbox"/>
Fabricates any ICs manufactured from gallium-based semiconductor	<input type="checkbox"/>
Fabricates any ICs using graphene transistors or nanotubes	<input type="checkbox"/>
Fabricates any ICs designed for operation at or below 4.5 Kelvin	<input type="checkbox"/>

<b>IC Equipment</b>	<input type="checkbox"/>
Develops or produces any front-end semiconductor fabrication equipment designed for performing volume fabrication of integrated circuits	<input type="checkbox"/>
Develops or produces any commodity, material, software, or technology designed exclusively for use in/with extreme ultraviolet lithography fabrication equipment	<input type="checkbox"/>
Develops, installs, sells, or produces any supercomputer enabled by advanced integrated circuits with certain levels of processing power	<input type="checkbox"/>

<b>IC Design</b>	<input type="checkbox"/>
Develops or produces any electronic design automation software for design of integrated circuits or advanced packaging	<input type="checkbox"/>
Other IC Design	<input type="checkbox"/>

<b>IC Fabrication</b>	<input type="checkbox"/>
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<b>IC Packaging</b>	<input type="checkbox"/>
Develops or produces any equipment for performing volume advanced packaging	<input type="checkbox"/>
Advanced packaging techniques used to package any IC	<input type="checkbox"/>
Other IC Packaging	<input type="checkbox"/>

**Quantum Information Technologies Option(s):**

Develops any Quantum Computer	<input type="checkbox"/>
Producing any critical components required to produce a quantum computer	<input type="checkbox"/>

Develops or produces any quantum product designed or intended to be used for any military, government intelligence, or mass-surveillance end use	<input type="checkbox"/>
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Quantum Sensing	<input type="checkbox"/>
Quantum Network	<input type="checkbox"/>
Quantum Communication	<input type="checkbox"/>

Develops or produces any quantum product designed or intended to be used for networking to scale up capabilities of quantum computers	<input type="checkbox"/>
Quantum Network	<input type="checkbox"/>
Quantum Communication	<input type="checkbox"/>

Develops or produces any quantum Product designed or intended to be used for secure communications	<input type="checkbox"/>
Quantum Network	<input type="checkbox"/>
Quantum Communication	<input type="checkbox"/>

Please identify and describe each of the covered activity or activities undertaken by the covered foreign person that makes the transaction a covered transaction:

Please describe the known end use(s) and end user(s) of the covered foreign person's technology, products, or services:

If a transaction involves a covered activity identified in § 850.217(a), (b), or (c), identification of the technology node(s) at which any applicable product is produced: