U.S. Department of the Treasury Outbound Investment Security Program

Blank Notification Template for

§ 850.401 Undertaking a Notifiable Transaction

U.S. Department of the Treasury

Outbound Investment Security Program

U.S. Person Information

| Full Name: |
|--|
| Principal Place of Business [City]: |
| Principal Place of Business [Country]: |
| Place of Incorporation: |
| Primary NAICS Code: |
| Please provide a brief description of the U.S. Person: |
| |
| Website Address (if any): |
| U.S. Person Ultimate Parent(s): |

| Туре | Name | Principal Place of Business | Place of Incorporation |
|-------------------|------|-----------------------------|------------------------|
| Entity/Individual | | | |
| Entity/Individual | | | |
| Entity/Individual | | | |

| ☐ Does the Ultimate Parent have | ve any Intermediate Parent(s)? | |
|---------------------------------|--------------------------------|------------------------|
| Intermediate Parent(s): | | |
| Entity Name | Principal Place of Business | Place of Incorporation |
| | | |
| | | |
| | | |
| | | |
| U.S. Company Address | | |
| Street Address: | | |
| City: | | |
| State: | | |
| Zip Code: | | |
| Additional Information: | | |
| | | |
| Covered Transaction | | |
| Briefly describe the commercial | rationale for the transaction: | |

| 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: |
| |
| |
| Provide the actual date of the completed transaction: |
| Please provide an explanation of 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 (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 the transaction undertaken directly or indirectly? Yes/No

Agreements or Future Investments

Are there any agreements or options for future investments 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):

Select the type of transaction undertaken:

| Equity Interest (select one): | | |
|-------------------------------|--|--|
| Majority | | |
| Minority | | |
| o Full Acquisition | | |
| Contingent Equity Interest | | |
| Conversion of Equity Interest | | |
| Debt Financing | | |

| | Assets | (select all that apply): |
|-----------|----------|---|
| | 0 | Acquisition |
| | 0 | Leasing |
| | 0 | Development |
| | Joint V | enture |
| | Acquis | sition of Interest in a Fund |
| | | |
| <u>Pr</u> | ior Tr | <u>ansactions</u> |
| ls t | he tran | saction identified in this notification related to a prior transaction (e.g., between |
| sim | ilar pa | rties, acquiring additional interests, etc.)? Yes/No |
| If y | es, plea | ase provide the related Notification ID, if applicable: |
| Has | any pa | arty to this notification ever submitted a prior notification to the U.S. Department |
| of t | he Trea | asury? Yes/No |
| If y | es, plea | ase provide the relevant Notification ID, if applicable: |
| Add | ditiona | Information: |

Covered Foreign Person

Please select all Countries of Concern related to the Covered Foreign Person (select all that apply):

| ☐ People's Republic of China | | | | |
|--|--|--|--|--|
| ☐ Hong Kong SAR | | | | |
| ☐ Macau SAR | | | | |
| | | | | |
| Full Name: | | | | |
| Principal Place of Business [City]: | | | | |
| Principal Place of Business [Country]: | | | | |
| Place of Incorporation or Legal Organization: | | | | |
| \square Is this individual a person of a country of concern? | | | | |
| 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: | | | | |
| | | | | |
| Covered Foreign Person Company Address | | | | |
| Street Address: | | | | |
| City: | | | | |
| Country: | | | | |

| Postal Code: | | | | | |
|--|----------------------|--------------------|--------------------|-----------|--------------------|
| ☐ Does the Covered Foreign Person have any Intermediate Parents? | | | | | |
| | | | | | |
| | | | | | |
| Intermediate Parent(s) | | | | | |
| | | | | | |
| Entity Name | | Principal Place | of Business | Place c | of Incorporation |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Corporate Leaders | Corporate Leadership | | | | |
| | | | | | |
| Please provide the full le | egal nam | es and titles of o | each officer, dire | ctor, and | d other members of |
| management of the cover | ered for | eign person: | | | |
| Title/Position | First Na | ame | Middle Name | | Last Name |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Covered Activity

Select all the Technology Activities that apply:

| ☐ AI System | ☐ Integrated Circuits & Eq | uipment | ☐ Quantum Technologies |
|---|---|---|---|
| Al System Option | n(s): | | |
| intended to be dintelligence, or land Al system tracomputer power computational dibiological sequed □ Other Al system | igned exclusively for or used for military, government mass surveillance end use ined using a quantity of r greater than 10^24 operations using primarily ence data em designed to be used for elligence or mass-surveillance | computing computatio Other Al computing computatio | trained using a quantity of power greater than 10^25 nal operations system trained using a quantity of power greater than 10^23 nal operations system intended to be used for ty applications |
| end use ☐ Other AI syston digital forensics | em intended to be used for tools ems intended to be used for | ☐ Other AI | systems intended to be used for testing tools |
| Integrated Circui | t & Equipment Option(s): | | |
| ☐ Integrated Circ | cuits | | |
| - | ted circuit meeting or exceeding ration at or below 4.5 Kelvin | g performano | e parameters in ECCN 3A090.a, or |
| _ | ntegrated circuits (using a non-pology node of 16/14 nanomete | | tor architecture or with a |

| ☐ NAND memory integrated circuits (at least 128 layers) |
|--|
| \square DRAM integrated circuits (technology node of 18 nanometer half-pitch or less) |
| \square ICs manufactured from gallium-based semiconductor |
| ☐ ICs using graphene transistors or nanotubes |
| \square ICs designed for operation at or below 4.5 Kelvin |
| □ IC Equipment |
| ☐ Front-end semiconductor fabrication equipment designed for performing volume fabrication of integrated circuits |
| ☐ Commodity, material, software, or technology designed exclusively for use in/with extreme ultraviolet lithography fabrication equipment |
| $\hfill\Box$ Supercomputer enabled by advanced integrated circuits with certain levels of processing power |
| □ IC Design |
| ☐ Electronic design automation software for design of integrated circuits or advanced packaging |
| ☐ Other IC Design |
| □ IC Fabrication |
| □ IC Packaging |
| \square Equipment for performing volume advanced packaging |
| \square Advanced packaging techniques used to package any IC |
| ☐ Other IC Packaging |
| Quantum Technologies Option(s): |
| ☐ Quantum Computers |
| ☐ Critical components required to produce a quantum computer |
| \square Quantum computers product designed or intended to be used for any military, government ntelligence, or mass-surveillance end use |
| ☐ Quantum Computers Sensing |
| ☐ Quantum Computers Network |
| ☐Quantum Computers Communication |

| $\hfill\square$ Quantum computers product designed or intended to be used for networking to scale up capabilities of quantum computers |
|---|
| ☐ Quantum Computers Network |
| ☐ Quantum Computers Communication |
| $\hfill\square$ Quantum Computers Product designed or intended to be used for secure communications |
| ☐ Quantum Computers Network |
| ☐ Quantum Computers Communication |
| 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: |