

**INFORMATION MANAGEMENT AND  
COMMUNICATION SUPPORT**

**ATTACHMENT J-10**

**DD FORM 254  
CONTRACT SECURITY CLASSIFICATIONS  
SPECIFICATIONS**

<b>DEPARTMENT OF DEFENSE</b> <b>CONTRACT SECURITY CLASSIFICATION SPECIFICATION</b> <i>(The requirements of the DoD Industrial Security Manual apply to all security aspects of this effort.)</i>				<b>1. CLEARANCE AND SAFEGUARDING</b> a. FACILITY CLEARANCE REQUIRED <p style="text-align: center;">SECRET</p> b. LEVEL OF SAFEGUARDING REQUIRED <p style="text-align: center;">NONE</p>	
<b>2. THIS SPECIFICATION IS FOR:</b> <i>(x and complete as applicable)</i>			<b>3. THIS SPECIFICATION IS:</b> <i>(x and complete as applicable)</i>		
<input type="checkbox"/>	a. PRIME CONTRACT NUMBER		<input type="checkbox"/>	a. ORIGINAL (Complete date in all cases)	DATE (YYMMDD)
<input type="checkbox"/>	b. SUBCONTRACT NUMBER		<input type="checkbox"/>	b. REVISED (Supersedes all previous specs)	Revision No. DATE (YYMMDD)
<input checked="" type="checkbox"/>	c. SOLICITATION OR OTHER NUMBER NNK07200300R	DUE DATE (YYMMDD)	<input type="checkbox"/>	c. FINAL (Complete Item 5 in all cases)	DATE (YYMMDD)
<b>4. THIS IS A FOLLOW-ON CONTRACT?</b> <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.					
<b>5. IS THIS A FINAL DD FORM 254?</b> <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 identified classified material is authorized for the period of _____.					
<b>6. CONTRACTOR</b> <i>(Include Commercial and Government Entity (CAGE) Code)</i>					
a. NAME, ADDRESS, AND ZIP CODE TBD		b. CAGE CODE	c. COGNIZANT SECURITY OFFICE <i>(Name, Address, and Zip Code)</i>		
<b>7. SUBCONTRACTOR</b>					
a. NAME, ADDRESS, AND ZIP CODE N/A		b. CAGE CODE N/A	c. COGNIZANT SECURITY OFFICE <i>(Name, Address, and Zip code)</i> N/A		
<b>8. ACTUAL PERFORMANCE</b>					
a. LOCATION KENNEDY SPACE CENTER (KSC), CAPE CANAVERAL AIR FORCE STATION (CCAFS)		b. CAGE CODE	c. COGNIZANT SECURITY OFFICE <i>(Name, Address, and Zip Code)</i> DEFENSE INVESTIGATIVE SERVICE (DIS) 2300 LAKE PARK DRIVE, SUITE 250 SMYRNA, GA 30080-7606		
<b>9. GENERAL IDENTIFICATION OF THIS PROCUREMENT</b> INFORMATION MANAGEMENT AND COMMUNICATIONS SUPPORT (IMCS) CONTRACT FOR KSC.					
<b>10. THIS CONTRACT WILL REQUIRE ACCESS TO:</b>			<b>11. IN PERFORMING THIS CONTRACT, THE CONTRACTOR WILL:</b>		
	YES	NO		YES	NO
a. COMMUNICATIONS SECURITY (COMSEC) INFORMATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>	a. HAVE ACCESS TO CLASSIFIED INFORMATION ONLY AT ANOTHER CONTRACTOR'S FACILITY OR A GOVERNMENT ACTIVITY	<input checked="" type="checkbox"/>	<input type="checkbox"/>
b. RESTRICTED DATA	<input type="checkbox"/>	<input checked="" type="checkbox"/>	b. RECEIVE CLASSIFIED DOCUMENTS ONLY	<input type="checkbox"/>	<input checked="" type="checkbox"/>
c. CRITICAL NUCLEAR WEAPON DESIGN INFORMATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>	c. RECEIVE AND GENERATE CLASSIFIED MATERIAL	<input type="checkbox"/>	<input checked="" type="checkbox"/>
d. FORMERLY RESTRICTED DATA	<input type="checkbox"/>	<input checked="" type="checkbox"/>	d. FABRICATE, MODIFY, OR STORE CLASSIFIED HARDWARE	<input type="checkbox"/>	<input checked="" type="checkbox"/>
e. INTELLIGENCE INFORMATION:			e. PERFORM SERVICES ONLY	<input type="checkbox"/>	<input checked="" type="checkbox"/>
(1) Sensitive Compartmented information (SCI)	<input type="checkbox"/>	<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 type="checkbox"/>	<input checked="" type="checkbox"/>
(2) Non-SCI	<input type="checkbox"/>	<input checked="" type="checkbox"/>	g. BE AUTHORIZED TO USE THE SERVICES OF DEFENSE TECHNICAL INFORMATION CENTER (DTIC) OR OTHER SECONDARY DISTRIBUTION CENTER	<input type="checkbox"/>	<input checked="" type="checkbox"/>
f. SPECIAL ACCESS INFORMATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>	h. REQUIRE A COMSEC ACCOUNT	<input type="checkbox"/>	<input checked="" type="checkbox"/>
g. NATO INFORMATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>	i. HAVE TEMPEST REQUIREMENTS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
h. FOREIGN GOVERNMENT INFORMATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>	j. HAVE OPERATIONS SECURITY (OPSEC) REQUIREMENTS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
i. LIMITED DISSEMINATION INFORMATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>	k. BE AUTHORIZED TO USE THE DEFENSE COURIER SERVICE	<input type="checkbox"/>	<input checked="" type="checkbox"/>
j. FOR OFFICIAL USE ONLY INFORMATION	<input type="checkbox"/>	<input checked="" type="checkbox"/>	l. OTHER <i>(Specify)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
k. OTHER <i>(Specify)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>			

**12. PUBLIC RELEASE.** Any information (*classified or unclassified*) pertaining to this contract shall not be released for public dissemination except as provided by the iNISPOM 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*):  
 JOHN F. KENNEDY SPACE CENTER (KSC)  
 ATTN: XA, PUBLIC AFFAIRS  
 KSC, FL 32899  
 "To the Office of Public Affairs, National Aeronautics and Space Administration, Washington, DC 20546, for review."

**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.*)  
 A. CLASSIFICATION GUIDANCE WILL BE PROVIDED UNDER SEPARATE COVER.  
 B. CONTRACTING OFFICER'S TECHNICAL REPRESENTATIVE (COTR) IS TBD  
 C. CONTRACTING OFFICER (CO) IS MR. SEAN D. HOWE, 321-867-7358, SEB-IT, KSC, FL 32899

**14. ADDITIONAL SECURITY REQUIREMENTS.** Requirements, in addition to NISPOM requirements, are established for this contract. (*If Yes, identify the pertinent contractual clauses in the contract document itself, or provide any 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.*)  Yes  No  
 AS A LOING TERM VISITOR, THE CONTRACTOR WILL COMPLY WITH ALL APPLICABLE KSC SECURITY ISSUANCES.

**15. INSPECTIONS.** Elements of this contract are outside the inspection responsibility of the cognizant security office. (*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.*)  Yes  No  
 INSPECTION OF COPNTRACTOR ACTIVITIES ON KSC AND NASA OFFSITE LOCATIONS IS THE RESPONSIBILITY OF NASA KSC PROTECTIVE SERVICE  
 INSPECTION OF CONTRACTOR ACTIVITIES ON CCAFS IS THE RESPONSIBILITY OF 45CS/SCBI

**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 JOANN BROPHY	b. TITLE INDUSTRIAL SECURITY OFFICER	c. TELEPHONE ( <i>Include Area Code</i> ) (321) 867-2453
d. ADDRESS ( <i>Include Zip Code</i> ) NASA/KSC TA-G, KSC, FL 32899	<b>17. REQUIRED DISTRIBUTION</b> <input checked="" type="checkbox"/> a. CONTRACTOR <input type="checkbox"/> b. SUBCONTRACTOR <input checked="" type="checkbox"/> c. COGNIZANT SECURITY OFFICE FOR PRIME AND SUBCONTRACTOR <input type="checkbox"/> d. U.S. ACTIVITY RESPONSIBLE FOR OVERSEAS SECURITY ADMINISTRATION <input checked="" type="checkbox"/> e. ADMINSTRATIVE CONTRACTING OFFICER <input checked="" type="checkbox"/> f. OTHERS AS NECESSARY : XA	
e. SIGNATURE		