

A CVE Verified Service-Disabled Veteran Owned Small Business

CMMC Questionnaire

Inc Pri Tit Ph He Em	mpany Legal Name: lustry: mary Contact Name: le: one #: adquarters Address: nail: .GE Code:						
U _	IOL Code.						
1.	Are you a Prime contractor on a	•			Yes	No 🗌	
	a. If no, are you a subcont	•			Yes	No	
2.	Do you have any existing Contro	olled Unclassified Infor	mation?		Yes	No	
3.	How many total employees do	ou have?		Full Time	Part Tin	ne	
	a. How many IT employee	s you do you have?	Full	Time P	art Time	1099	
4.	How many locations do you have	e? How m	nany states are	they located in?	?		
5.	Have you determined your full (CMMC assessment bou	ındary and scop	pe?	Yes	No 🗌	
6.	Have you categorized all assets (People, Technology, Facility) within your assessment scope? (CUI, Security Protection						
	Specialized, Out of Scope, Contr	actor Risk Managed)	Yes	No			
7.	Do you have a Data Flow Diagra	m completed?	Yes	No			
8.	Do you have a Network Diagran	າ completed?	Yes	No			
9.	Have you conducted a mock CU	I flow test?	Yes	No			
10.	Do you have a fully completed a	ınd signed System Secı	urity Plan?	Yes	No 🗌		
11.	Do you have any open Plan of A	ction & Milestones (PC	DA&Ms) for any	deficiencies?	Yes	No 🗌	
12.	Have you completed a third-par	ty NIST 800-171 Assess	sment within th	ne last 180 days	? Yes	No 🗌	
13.	Have you entered your NIST 800)-171 assessment score	e in SPRS?		Yes	No	
14.	Do you provide your organization	on with Cybersecurity A	Awareness and	Training?	Yes	No 🗌	
15.	Do you utilize any third-party se	rvices providers?			Yes	No 🗌	
	a. If yes, please provider the	neir name, and a sumn	nary of what se	rvices they prov	vide:		
16.	How many of each type of syste	em do you currently ha	ve?				
	a. Windows 10/11 Compu	ters					
	i. Total number w	ith Microsoft 365:					
	h. Linux						



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c.	Mac					
d	iOS Devices					
е	Android Devices					
17. Is you	r Active Directory on-premise, hybrid, or cloud bas	sed?				
18. Numl	per of computers on Active Directory(s):					
10 Numl	per of Firewalls:					
d.	Brand and Type(s):					
20. Numl	per of remote access users:					
a	Types used (VPN, SSH, Terminal, etc.)					
21. Numl	per of servers by location/type:					
а	On-premise					
	i. Type(s)					
b	. Virtual					
	i. Type(s)					
C.	Cloud					
	i. Type(s)					
22. Stora	ge by location/type:					
a	On-premise					
	i. Type(s)					
b	. Cloud					
	i. Type(s)					
C.	Off-premise secured					
	i. Type(s)					
23. Do yo	ou have a list of, or database for, all your IT hardwa	re and software assets?	Yes	No		
24. Do yo	u use any cloud services for handling CUI?		Yes	No 🗌		
а	If so, what services:					
b	. Is the CSP FEDRAMP Authorized?		Yes	No		
25. Is the	re a formalized Risk Assessment process that ident	ifies, quantifies, and prioritize	es risks based on	the risk		
accep	tance levels relevant to the organization?		Yes	No 🗌		
26. Do Su	26. Do Subcontractors have access to scoped systems and data or processing facilities? Yes No					
27. Have	you developed formal written policies, practices ar	nd procedures regarding each	of the following	14 NIST 800-17		
nrima	primary control families?					



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Written Policy developed?	Practices and Procedures Developed?							
Additional Notes or information you would like to share:								