		1	<b>.</b>								
INITIAL REPORT	M/DD/YYYY)	UPDATED RE	Date: (MM/DD/YYYY) PORT		AFTER ACTION Date: (MM/DD/YYYY) REPORT						
GENERAL INFORMATION											
DATE OF BREACH (MM/DD/YYYY)	b. DATE BREA (MM/DD/YYY)	ACH DISCOVERED Y)	c. DATE REPORTED TO (MM/DD/YYYY)	US-CERT	d. US-CERT NUMBER						
COMPONENT INTERNAL TRACKING NUMBER (If applicable)	f. BREACH INV	VOLVED (Click to	g. TYPE OF BREACH (Cli	ck to select)	h. CAUSE OF BREACH (Click to see						
COMPONENT (Click to select)	1		j. OFFICE NAME								
DINT OF CONTACT FOR FURTH											
FIRST NAME	I. LAST NAME		m. RANK/GRADE AND TITLE								
DUTY E-MAIL ADDRESS	•			o. DUTY	TELEPHONE NUMBER						
AILING ADDRESS:				1							
ADDRESS			q. CITY								
			r. STATE		s. ZIP CODE						
b. ACTIONS TAKEN IN RESPO (Up to 150 words, bullet format					RRENCE AND LESSONS LEARNE						

3.a. NUMBER OF INDIVIDUALS AFFECTED			ED	b. \	NERE A	FFE	CTED IN	DIVIDUALS N	NOTIFIE	D? (1)	If Yes	were th	ev noti	fied within 1	0 wor	kina	
	Contractors				Yes		No				days?		Yes	No		3	
` '	DoD Civilian Personnel	(2) If Yes, notification of						e (MM/DD/YYY	If Yes	f Yes, number of individuals notified							
` '	Military Active Duty Personnel		(a) it is a final state (initial bot it it it)														
` ′	Military Family Members		(4) If notification will not be made, explain why, or if number of individuals notified differs from total										total				
		number of individuals							ain why:	:	11001	n marvia	aaio iio	unca amoro		totai	
` ′	5) Military Reservists																
` ′	(6) Military Retirees																
` ′	(7) National Guard																
(8)	Other (Specify):									L (0)	16 37		( ' 1'			124	
	<del></del>							edit monitoring offered? (6) If Yes, number of individuals offered cre- monitoring:								edit	
Yes No																	
4. PERSONALLY IDENTIFIABLE INFORMATION (PII) INVOLVED IN T																	
	(1) Names		`	,	swords			^If F	_					ovide additio	nai d	etail:	
	(2) Social Security Numbers		(8) Financial Information* (a) Personal financial information								nformatio	n					
	(3) Dates of Birth		(9	) Othe	er (Specif	y):			(b) Go	vernment	t credit	card I	f yes, wa	as issuing ban	k notif	ied?	
	(4) Protected Health Information (Ph	H)							(c) Oth	ner (Speci	ify):			Yes	No		
	(5) Personal e-mail addresses																
(6) Personal home addresses																	
5. \$	5. SELECT ALL THE FOLLOWING THAT APPLY TO THIS BREACH																
	a. PAPER DOCUMENTS/RECO	ORDS (I	lf select	ted, pro	vide additi	onal de	etail)	b. EQUIPN	ΛΕΝΤ (If	selected,	, provid	le additioi	nal detai	))			
	(1) Paper documents faxed							(1) Location	of equipm	nent							
	(2) Paper documents/records mailed							(2) Equipmer	nt dispose	ed of impr	roperly						
	(3) Paper documents/records disposed of improperly							(3) Equipmer	-								
	(4) Unauthorized disclosure of paper documents/records							(4) Government equipment Data At Rest (DAR) encrypted									
	(5) Other (Specify):																
(b) Strict (Openly).							(5) Government equipment password or PKI/CAC protected  (6) Personal equipment password protected or commercially encrypted										
	<u>I</u> F EQUIPMENT, NUMBER OF IT	EMS IV	IVOL	VED				(o) i eisoriai	equipine	iii passwc	olu pio	lected of	COMMINE	cially efforypte	u		
						Г		7 (7) Flash d	rive/USB	stick/othe	er 🗀		(If Oth	er, Specify):			
	.aptop/Tablet	. ,	P3 pla	•	·= ·0	ļ		removable media									
(2) Cell phone (5) Printer/Copier/Fax/Scanner								(8) Externa	al hard dri	ive							
(3) Personal Digital Assistant (6) Desktop computer							1	(9) Other									
d. EMAIL (If selected, provide additional detail)  e. INFO DISSEMENT OF THE PROPERTY OF THE PR									ISSEMI	NATION	(If sel	ected, pro	ovide ad	ditional detail)			
(1) Email encrypted								(1) Information	on was po	osted to th	he Inte	net					
(2) Email was sent to commercial account (i.e., .com or .net)							(2) Information was posted to an intranet (e.g., SharePoint or Portal)										
(3) Email was sent to other Federal agency								(3) Information was accessible to others without need-to-know on a share drive									
(4) Email recipients had a need to know							(4) Information was disclosed verbally										
						(5) Recipients had a need to know											
	f. OTHER (Specify):						•	•									
	•																
6.0	TYPE OF INOLURY (If and the shift	) (Oli-1-1	· I-	-1) //5	04	ic .\					T	IMDA	CT DE	redininati	ON /6		
6.a. TYPE OF INQUIRY (If applicable) (Click to select) (If Other, specify)						b. IMPACT DETERMINATION Component Privacy Official or de											
											use on	ly) (X on	e)				
														Г			
												Low		Medium		High	
C.	ADDITIONAL NOTES (Up to 150	) words, i	bullet	format	t acceptal	ble) N	NOTE: D	o NOT inclu	de PII o	r Classi	ified l	nformat	ion.				

## INSTRUCTIONS FOR COMPLETING DD FORM 2959, BREACH OF PERSONALLY IDENTIFIABLE INFORMATION (PII) REPORT

Select Initial, Updated, or After Action Report and enter the date.

## 1. GENERAL INFORMATION.

- a. Date of Breach. Enter the date the breach occurred. If the specific date cannot be determined, enter an estimated date and provide further explanation in the notes section of the report.
- b. Date Breach Discovered. Enter the date the breach was initially discovered by a DoD employee, military member, or DoD contractor.
- c. Date reported to US-CERT. Breaches must be reported to US-CERT within 1 hour of discovery. Enter the date reported to US-CERT.
- d. US-CERT Number. Enter the number assigned by US-CERT when the breach was reported.
- e. Component Internal Tracking Number (if applicable). If your component uses an internal tracking number, enter the number assigned.
- f. Breach Involved (click to select). Select from the drop-down list Email, Info Dissemination, Paper Records, or Equipment.
- g. Type of Breach (click to select). Select from the drop-down list Theft, Loss, or Compromise.
- h. Cause of Breach (click to select). Select from the drop-down list the predominate cause of the breach Theft, Failure to Follow Policy, Computer Hacking, Social Engineering, Equipment Malfunction, Failure to Safeguard Government Equipment or Information, Improper Security Settings, or Other.
- i. j. Component. Select from the drop-down list. After you select your Component, enter the Office/Name in block 1.j (i.e., if "OSD/JS" is the Component selected, an example of the Office would be "TMA").
- k. s. Point of Contact for Further Information. Enter the requested information for the person to be contacted if DPCLO requires additional details regarding the breach.
- 2.a. DESCRIPTION OF BREACH (Up to 150 words, bullet format acceptable). Note: Do not include PII or classified information. Summarize the facts or circumstances of the theft, loss or compromise of PII as currently known, including:
- the description of the parties involved in the breach;
- the physical or electronic storage location of the data at risk;
- if steps were immediately taken to contain the breach;
- whether the breach is an isolated incident or a systemic problem;
- who conducted the investigation of the breach; and
- any other pertinent information.

## b. ACTIONS TAKEN IN RESPONSE TO BREACH, TO INCLUDE ACTIONS TAKEN TO PREVENT RECURRENCE AND LESSONS LEARNED (Up to 150 words, bullet format acceptable). Note: Do not include PII or classified information. Summarize steps taken to mitigate actual or potential harm to the individuals affected and the organization. For example, training,

disciplinary action, policy development or modification, information systems modifications. List any findings resulting from the investigation of the breach.

- **3.a. NUMBER OF INDIVIDUALS AFFECTED.** For each category of individuals listed, enter the number of individuals affected by the breach. Do not include an individual in more than one category.
- b. Were affected individuals notified? Check box "Yes" or "No". If the individuals affected will not receive a formal notification letter about the breach, select "No" and enter an explanation of why the Component determined notification was not necessary in 3.b.(4). If additional space is needed for this justification, continue text in 6.c., Additional Notes.
- (1) If affected individuals were notified, were they notified within 10 working days? Check "Yes" or "No".
- (2) If the affected individuals will be notified of the breach, provide the date the notification letters will be sent.
- (3) (4) If "Yes", list the number of individuals notified. If the number of individuals notified differs from total number of individuals affected, explain why in 3.b.(4).
- (5) Was credit monitoring offered? Select "Yes" or "No".
- Note: This is a risk of harm based decision to be made by the DoD Component.
- (6) If "Yes", enter the number of individuals offered credit monitoring.
- 4. PERSONALLY IDENTIFIABLE INFORMATION (PII) INVOLVED IN THIS BREACH. Select all that apply. If Financial Information is selected, provide additional details.
- 5. SELECT ALL THE FOLLOWING THAT APPLY TO THIS BREACH.
  Check at least one box from the options given. If you need to use the "Other" option, you must specify other equipment involved.
- a. Paper Documents/Records. If you choose Paper Documents/Records, answer each associated question by selecting from the drop-down options.
- b. c. Equipment. If you choose Equipment, answer the associated questions by selecting from the drop-down options. Enter a number in the empty field indicating how many pieces of each type of equipment were involved in the breach. If "Other", you will need to specify what type of equipment was involved.
- d. e. Email and Info Dissemination. If Email or Info Dissemination is selected, choose either "Yes" or "No" for all of the questions.
- **6.a. TYPE OF INQUIRY.** Select the type of inquiry conducted as a result of the breach. If the inquiry type is "Other", please describe.
- b. Impact Determination. (Component Privacy Official or designee use only.) Select one: What is the overall risk level associated with this breach? Risk is determined by considering the likelihood that the PII can be accessed by an unauthorized person and assessing the impact to the organization and individual if the PII is misused.
- c. Additional Notes. This field can be used to convey additional information.