



**Payment Card Industry (PCI)  
Data Security Standard  
Self-Assessment Questionnaire A  
and Attestation of Compliance**

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**Card-not-present Merchants,  
All Cardholder Data Functions Fully Outsourced**

**For use with PCI DSS Version 3.2**

April 2016

## Document Changes

| Date          | PCI DSS Version | SAQ Revision | Description                                                                                                                                   |
|---------------|-----------------|--------------|-----------------------------------------------------------------------------------------------------------------------------------------------|
| October 2008  | 1.2             |              | To align content with new PCI DSS v1.2 and to implement minor changes noted since original v1.1.                                              |
| October 2010  | 2.0             |              | To align content with new PCI DSS v2.0 requirements and testing procedures.                                                                   |
| February 2014 | 3.0             |              | To align content with PCI DSS v3.0 requirements and testing procedures and incorporate additional response options.                           |
| April 2015    | 3.1             |              | Updated to align with PCI DSS v3.1. For details of PCI DSS changes, see <i>PCI DSS – Summary of Changes from PCI DSS Version 3.0 to 3.1</i> . |
| July 2015     | 3.1             | 1.1          | Updated version numbering to align with other SAQs.                                                                                           |
| April 2016    | 3.2             | 1.0          | Updated to align with PCI DSS v3.2. For details of PCI DSS changes, see <i>PCI DSS – Summary of Changes from PCI DSS Version 3.1 to 3.2</i> . |

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## Before You Begin

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SAQ A has been developed to address requirements applicable to merchants whose cardholder data functions are completely outsourced to validated third parties, where the merchant retains only paper reports or receipts with cardholder data.

SAQ A merchants may be either e-commerce or mail/telephone-order merchants (card-not-present), and do not store, process, or transmit any cardholder data in electronic format on their systems or premises.

SAQ A merchants confirm that, for this payment channel:

- Your company accepts only card-not-present (e-commerce or mail/telephone-order) transactions;
- All processing of cardholder data is entirely outsourced to PCI DSS validated third-party service providers;
- Your company does not electronically store, process, or transmit any cardholder data on your systems or premises, but relies entirely on a third party(s) to handle all these functions;
- Your company has confirmed that all third party(s) handling storage, processing, and/or transmission of cardholder data are PCI DSS compliant; **and**
- Any cardholder data your company retains is on paper (for example, printed reports or receipts), and these documents are not received electronically.

*Additionally, for e-commerce channels:*

- All elements of the payment page(s) delivered to the consumer's browser originate only and directly from a PCI DSS validated third-party service provider(s).

***This SAQ is not applicable to face-to-face channels.***

This shortened version of the SAQ includes questions that apply to a specific type of small merchant environment, as defined in the above eligibility criteria. If there are PCI DSS requirements applicable to your environment that are not covered in this SAQ, it may be an indication that this SAQ is not suitable for your environment. Additionally, you must still comply with all applicable PCI DSS requirements in order to be PCI DSS compliant.

### PCI DSS Self-Assessment Completion Steps

1. Identify the applicable SAQ for your environment – refer to the *Self-Assessment Questionnaire Instructions and Guidelines* document on PCI SSC website for information.
2. Confirm that your environment is properly scoped and meets the eligibility criteria for the SAQ you are using (as defined in Part 2g of the Attestation of Compliance).
3. Assess your environment for compliance with applicable PCI DSS requirements.
4. Complete all sections of this document:
  - Section 1 (Parts 1 & 2 of the AOC) – Assessment Information and Executive Summary.
  - Section 2 – PCI DSS Self-Assessment Questionnaire (SAQ A)
  - Section 3 (Parts 3 & 4 of the AOC) – Validation and Attestation Details and Action Plan for Non-Compliant Requirements (if applicable)
5. Submit the SAQ and Attestation of Compliance (AOC), along with any other requested documentation—such as ASV scan reports—to your acquirer, payment brand or other requester.

## Understanding the Self-Assessment Questionnaire

The questions contained in the “PCI DSS Question” column in this self-assessment questionnaire are based on the requirements in the PCI DSS.

Additional resources that provide guidance on PCI DSS requirements and how to complete the self-assessment questionnaire have been provided to assist with the assessment process. An overview of some of these resources is provided below:

| Document                                                                                       | Includes:                                                                                                                                                                                                                   |
|------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| PCI DSS<br><i>(PCI Data Security Standard Requirements and Security Assessment Procedures)</i> | <ul style="list-style-type: none"> <li>• Guidance on Scoping</li> <li>• Guidance on the intent of all PCI DSS Requirements</li> <li>• Details of testing procedures</li> <li>• Guidance on Compensating Controls</li> </ul> |
| SAQ Instructions and Guidelines documents                                                      | <ul style="list-style-type: none"> <li>• Information about all SAQs and their eligibility criteria</li> <li>• How to determine which SAQ is right for your organization</li> </ul>                                          |
| <i>PCI DSS and PA-DSS Glossary of Terms, Abbreviations, and Acronyms</i>                       | <ul style="list-style-type: none"> <li>• Descriptions and definitions of terms used in the PCI DSS and self-assessment questionnaires</li> </ul>                                                                            |

These and other resources can be found on the PCI SSC website ([www.pcisecuritystandards.org](http://www.pcisecuritystandards.org)). Organizations are encouraged to review the PCI DSS and other supporting documents before beginning an assessment.

### **Expected Testing**

The instructions provided in the “Expected Testing” column are based on the testing procedures in the PCI DSS, and provide a high-level description of the types of testing activities that should be performed in order to verify that a requirement has been met. Full details of testing procedures for each requirement can be found in the PCI DSS.

## Completing the Self-Assessment Questionnaire

For each question, there is a choice of responses to indicate your company's status regarding that requirement. **Only one response should be selected for each question.**

A description of the meaning for each response is provided in the table below:

| Response                                                | When to use this response:                                                                                                                                                                                                                                                                                                                                                                  |
|---------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Yes</b>                                              | The expected testing has been performed, and all elements of the requirement have been met as stated.                                                                                                                                                                                                                                                                                       |
| <b>Yes with CCW</b><br>(Compensating Control Worksheet) | <p>The expected testing has been performed, and the requirement has been met with the assistance of a compensating control.</p> <p>All responses in this column require completion of a Compensating Control Worksheet (CCW) in Appendix B of the SAQ.</p> <p>Information on the use of compensating controls and guidance on how to complete the worksheet is provided in the PCI DSS.</p> |
| <b>No</b>                                               | Some or all elements of the requirement have not been met, or are in the process of being implemented, or require further testing before it will be known if they are in place.                                                                                                                                                                                                             |
| <b>N/A</b><br>(Not Applicable)                          | <p>The requirement does not apply to the organization's environment. (See <i>Guidance for Non-Applicability of Certain, Specific Requirements</i> below for examples.)</p> <p>All responses in this column require a supporting explanation in Appendix C of the SAQ.</p>                                                                                                                   |

### Guidance for Non-Applicability of Certain, Specific Requirements

If any requirements are deemed not applicable to your environment, select the "N/A" option for that specific requirement, and complete the "Explanation of Non-Applicability" worksheet in Appendix C for each "N/A" entry.

### Legal Exception

If your organization is subject to a legal restriction that prevents the organization from meeting a PCI DSS requirement, check the "No" column for that requirement and complete the relevant attestation in Part 3.

## Section 1: Assessment Information

### Instructions for Submission

This document must be completed as a declaration of the results of the merchant's self-assessment with the *Payment Card Industry Data Security Standard Requirements and Security Assessment Procedures (PCI DSS)*. Complete all sections: The merchant is responsible for ensuring that each section is completed by the relevant parties, as applicable. Contact acquirer (merchant bank) or the payment brands to determine reporting and submission procedures.

### Part 1. Merchant and Qualified Security Assessor Information

#### Part 1a. Merchant Organization Information

|                   |  |                          |      |
|-------------------|--|--------------------------|------|
| Company Name:     |  | DBA (doing business as): |      |
| Contact Name:     |  | Title:                   |      |
| Telephone:        |  | E-mail:                  |      |
| Business Address: |  | City:                    |      |
| State/Province:   |  | Country:                 | Zip: |
| URL:              |  |                          |      |

#### Part 1b. Qualified Security Assessor Company Information (if applicable)

|                        |  |          |      |
|------------------------|--|----------|------|
| Company Name:          |  |          |      |
| Lead QSA Contact Name: |  | Title:   |      |
| Telephone:             |  | E-mail:  |      |
| Business Address:      |  | City:    |      |
| State/Province:        |  | Country: | Zip: |
| URL:                   |  |          |      |

### Part 2. Executive Summary

#### Part 2a. Type of Merchant Business (check all that apply)

|                                                   |                                            |                                                            |
|---------------------------------------------------|--------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Retailer                 | <input type="checkbox"/> Telecommunication | <input type="checkbox"/> Grocery and Supermarkets          |
| <input type="checkbox"/> Petroleum                | <input type="checkbox"/> E-Commerce        | <input type="checkbox"/> Mail order/telephone order (MOTO) |
| <input type="checkbox"/> Others (please specify): |                                            |                                                            |

|                                                                                                                                                                                                                       |                                                                                                                                                                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| What types of payment channels does your business serve?<br><input type="checkbox"/> Mail order/telephone order (MOTO)<br><input type="checkbox"/> E-Commerce<br><input type="checkbox"/> Card-present (face-to-face) | Which payment channels are covered by this SAQ?<br><input type="checkbox"/> Mail order/telephone order (MOTO)<br><input type="checkbox"/> E-Commerce<br><input type="checkbox"/> Card-present (face-to-face) |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

**Note:** If your organization has a payment channel or process that is not covered by this SAQ, consult your acquirer or payment brand about validation for the other channels.

### Part 2b. Description of Payment Card Business

How and in what capacity does your business store, process and/or transmit cardholder data?

### Part 2c. Locations

List types of facilities (for example, retail outlets, corporate offices, data centers, call centers, etc.) and a summary of locations included in the PCI DSS review.

| Type of facility               | Number of facilities of this type | Location(s) of facility (city, country) |
|--------------------------------|-----------------------------------|-----------------------------------------|
| <i>Example: Retail outlets</i> | 3                                 | <i>Boston, MA, USA</i>                  |
|                                |                                   |                                         |
|                                |                                   |                                         |
|                                |                                   |                                         |
|                                |                                   |                                         |
|                                |                                   |                                         |
|                                |                                   |                                         |

### Part 2d. Payment Application

Does the organization use one or more Payment Applications?  Yes  No

Provide the following information regarding the Payment Applications your organization uses:

| Payment Application Name | Version Number | Application Vendor | Is application PA-DSS Listed?                            | PA-DSS Listing Expiry date (if applicable) |
|--------------------------|----------------|--------------------|----------------------------------------------------------|--------------------------------------------|
|                          |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                            |
|                          |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                            |
|                          |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                            |
|                          |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                            |
|                          |                |                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                            |

### Part 2e. Description of Environment

Provide a **high-level** description of the environment covered by this assessment.

*For example:*

- *Connections into and out of the cardholder data environment (CDE).*
- *Critical system components within the CDE, such as POS devices, databases, web servers, etc., and any other necessary payment components, as applicable.*

Does your business use network segmentation to affect the scope of your PCI DSS environment?

*(Refer to "Network Segmentation" section of PCI DSS for guidance on network segmentation)*

Yes  No



### Part 2f. Third-Party Service Providers

|                                                                                                                                                                                                                                                                                   |                                                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Does your company use a Qualified Integrator & Reseller (QIR)?<br>If Yes:<br>Name of QIR Company:<br>QIR Individual Name:<br>Description of services provided by QIR:                                                                                                             | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Does your company share cardholder data with any third-party service providers (for example, Qualified Integrator & Resellers (QIR), gateways, payment processors, payment service providers (PSP), web-hosting companies, airline booking agents, loyalty program agents, etc.)? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

**If Yes:**

| Name of service provider: | Description of services provided: |
|---------------------------|-----------------------------------|
|                           |                                   |
|                           |                                   |
|                           |                                   |
|                           |                                   |
|                           |                                   |
|                           |                                   |

**Note:** Requirement 12.8 applies to all entities in this list.

### Part 2g. Eligibility to Complete SAQ A

Merchant certifies eligibility to complete this shortened version of the Self-Assessment Questionnaire because, for this payment channel:

|                          |                                                                                                                                                                                                                |
|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | Merchant accepts only card-not-present (e-commerce or mail/telephone-order) transactions);                                                                                                                     |
| <input type="checkbox"/> | All processing of cardholder data is entirely outsourced to PCI DSS validated third-party service providers;                                                                                                   |
| <input type="checkbox"/> | Merchant does not electronically store, process, or transmit any cardholder data on merchant systems or premises, but relies entirely on a third party(s) to handle all these functions;                       |
| <input type="checkbox"/> | Merchant has confirmed that all third party(s) handling storage, processing, and/or transmission of cardholder data are PCI DSS compliant; <b>and</b>                                                          |
| <input type="checkbox"/> | Any cardholder data the merchant retains is on paper (for example, printed reports or receipts), and these documents are not received electronically.                                                          |
| <input type="checkbox"/> | <i>Additionally, for e-commerce channels:</i><br>All elements of the payment page(s) delivered to the consumer's browser originate only and directly from a PCI DSS validated third-party service provider(s). |

## Section 2: Self-Assessment Questionnaire A

**Note:** The following questions are numbered according to PCI DSS requirements and testing procedures, as defined in the PCI DSS Requirements and Security Assessment Procedures document.

Self-assessment completion date:

### Build and Maintain a Secure Network and Systems

#### Requirement 2: Do not use vendor-supplied defaults for system passwords and other security parameters

| PCI DSS Question |                                                                                                                                                                                                                                                                                                                                                                                                                   | Expected Testing                                                                                                                                                                                                | Response<br>(Check one response for each question) |                          |                          |                          |
|------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|--------------------------|--------------------------|--------------------------|
|                  |                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                 | Yes                                                | Yes with<br>CCW          | No                       | N/A                      |
| 2.1              | (a) Are vendor-supplied defaults always changed before installing a system on the network?<br><br><i>This applies to ALL default passwords, including but not limited to those used by operating systems, software that provides security services, application and system accounts, point-of-sale (POS) terminals, payment applications, Simple Network Management Protocol (SNMP) community strings, etc.).</i> | <ul style="list-style-type: none"> <li>Review policies and procedures</li> <li>Examine vendor documentation</li> <li>Observe system configurations and account settings</li> <li>Interview personnel</li> </ul> | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                  | (b) Are unnecessary default accounts removed or disabled before installing a system on the network?                                                                                                                                                                                                                                                                                                               | <ul style="list-style-type: none"> <li>Review policies and procedures</li> <li>Review vendor documentation</li> <li>Examine system configurations and account settings</li> <li>Interview personnel</li> </ul>  | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## Implement Strong Access Control Measures

### Requirement 8: Identify and authenticate access to system components

| PCI DSS Question |                                                                                                                                                                                                                                                                                                                                                                                                                       | Expected Testing                                                                                                                                                                                                               | Response<br>(Check one response for each question) |                          |                          |                          |
|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|--------------------------|--------------------------|--------------------------|
|                  |                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                | Yes                                                | Yes with CCW             | No                       | N/A                      |
| 8.1.1            | Are all users assigned a unique ID before allowing them to access system components or cardholder data?                                                                                                                                                                                                                                                                                                               | <ul style="list-style-type: none"> <li>▪ Review password procedures</li> <li>▪ Interview personnel</li> </ul>                                                                                                                  | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.1.3            | Is access for any terminated users immediately deactivated or removed?                                                                                                                                                                                                                                                                                                                                                | <ul style="list-style-type: none"> <li>▪ Review password procedures</li> <li>▪ Examine terminated users accounts</li> <li>▪ Review current access lists</li> <li>▪ Observe returned physical authentication devices</li> </ul> | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.2              | <p>In addition to assigning a unique ID, is one or more of the following methods employed to authenticate all users?</p> <ul style="list-style-type: none"> <li>▪ Something you know, such as a password or passphrase</li> <li>▪ Something you have, such as a token device or smart card</li> <li>▪ Something you are, such as a biometric</li> </ul>                                                               | <ul style="list-style-type: none"> <li>▪ Review password procedures</li> <li>▪ Observe authentication processes</li> </ul>                                                                                                     | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.2.3            | <p>(a) Are user password parameters configured to require passwords/passphrases meet the following?</p> <ul style="list-style-type: none"> <li>• A minimum password length of at least seven characters</li> <li>• Contain both numeric and alphabetic characters</li> </ul> <p>Alternatively, the passwords/passphrases must have complexity and strength at least equivalent to the parameters specified above.</p> | <ul style="list-style-type: none"> <li>▪ Examine system configuration settings to verify password parameters</li> </ul>                                                                                                        | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| PCI DSS Question |                                                                                                                                                                                                                                                                                                                                                                                                                                     | Expected Testing                                                                                                                                   | Response<br>(Check one response for each question) |                          |                          |                          |
|------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|--------------------------|--------------------------|--------------------------|
|                  |                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                    | Yes                                                | Yes with CCW             | No                       | N/A                      |
| 8.5              | <p>Are group, shared, or generic accounts, passwords, or other authentication methods prohibited as follows:</p> <ul style="list-style-type: none"> <li>▪ Generic user IDs and accounts are disabled or removed;</li> <li>▪ Shared user IDs for system administration activities and other critical functions do not exist; and</li> <li>▪ Shared and generic user IDs are not used to administer any system components?</li> </ul> | <ul style="list-style-type: none"> <li>▪ Review policies and procedures</li> <li>▪ Examine user ID lists</li> <li>▪ Interview personnel</li> </ul> | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**Requirement 9: Restrict physical access to cardholder data**

| PCI DSS Question |                                                                                                                                                                                                                                                                                   | Expected Testing                                                                                                                                    | Response<br>(Check one response for each question) |                          |                          |                          |
|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|--------------------------|--------------------------|--------------------------|
|                  |                                                                                                                                                                                                                                                                                   |                                                                                                                                                     | Yes                                                | Yes with CCW             | No                       | N/A                      |
| 9.5              | <p>Are all media physically secured (including but not limited to computers, removable electronic media, paper receipts, paper reports, and faxes)?</p> <p><i>For purposes of Requirement 9, "media" refers to all paper and electronic media containing cardholder data.</i></p> | <ul style="list-style-type: none"> <li>▪ Review policies and procedures for physically securing media</li> <li>▪ Interview personnel</li> </ul>     | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.6              | (a) Is strict control maintained over the internal or external distribution of any kind of media?                                                                                                                                                                                 | <ul style="list-style-type: none"> <li>▪ Review policies and procedures for distribution of media</li> </ul>                                        | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                  | (b) Do controls include the following:                                                                                                                                                                                                                                            |                                                                                                                                                     |                                                    |                          |                          |                          |
| 9.6.1            | Is media classified so the sensitivity of the data can be determined?                                                                                                                                                                                                             | <ul style="list-style-type: none"> <li>▪ Review policies and procedures for media classification</li> <li>▪ Interview security personnel</li> </ul> | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| PCI DSS Question |                                                                                                                                   | Expected Testing                                                                                                                                                    | Response<br>(Check one response for each question) |                          |                          |                          |
|------------------|-----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|--------------------------|--------------------------|--------------------------|
|                  |                                                                                                                                   |                                                                                                                                                                     | Yes                                                | Yes with<br>CCW          | No                       | N/A                      |
| 9.6.2            | Is media sent by secured courier or other delivery method that can be accurately tracked?                                         | <ul style="list-style-type: none"> <li>Interview personnel</li> <li>Examine media distribution tracking logs and documentation</li> </ul>                           | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.6.3            | Is management approval obtained prior to moving the media (especially when media is distributed to individuals)?                  | <ul style="list-style-type: none"> <li>Interview personnel</li> <li>Examine media distribution tracking logs and documentation</li> </ul>                           | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.7              | Is strict control maintained over the storage and accessibility of media?                                                         | <ul style="list-style-type: none"> <li>Review policies and procedures</li> </ul>                                                                                    | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.8              | (a) Is all media destroyed when it is no longer needed for business or legal reasons?                                             | <ul style="list-style-type: none"> <li>Review periodic media destruction policies and procedures</li> </ul>                                                         | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                  | (c) Is media destruction performed as follows:                                                                                    |                                                                                                                                                                     |                                                    |                          |                          |                          |
| 9.8.1            | (a) Are hardcopy materials cross-cut shredded, incinerated, or pulped so that cardholder data cannot be reconstructed?            | <ul style="list-style-type: none"> <li>Review periodic media destruction policies and procedures</li> <li>Interview personnel</li> <li>Observe processes</li> </ul> | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                  | (b) Are storage containers used for materials that contain information to be destroyed secured to prevent access to the contents? | <ul style="list-style-type: none"> <li>Examine security of storage containers</li> </ul>                                                                            | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## Maintain an Information Security Policy

### Requirement 12: *Maintain a policy that addresses information security for all personnel*

**Note:** For the purposes of Requirement 12, “personnel” refers to full-time part-time employees, temporary employees and personnel, and contractors and consultants who are “resident” on the entity’s site or otherwise have access to the company’s site cardholder data environment.

| PCI DSS Question |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Expected Testing                                                                                                                                      | Response<br>(Check one response for each question) |                          |                          |                          |
|------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|--------------------------|--------------------------|--------------------------|
|                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                       | Yes                                                | Yes with CCW             | No                       | N/A                      |
| 12.8             | Are policies and procedures maintained and implemented to manage service providers with whom cardholder data is shared, or that could affect the security of cardholder data, as follows:                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                       |                                                    |                          |                          |                          |
| 12.8.1           | Is a list of service providers maintained, including a description of the service(s) provided?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | <ul style="list-style-type: none"> <li>Review policies and procedures</li> <li>Observe processes</li> <li>Review list of service providers</li> </ul> | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12.8.2           | Is a written agreement maintained that includes an acknowledgement that the service providers are responsible for the security of cardholder data the service providers possess or otherwise store, process, or transmit on behalf of the customer, or to the extent that they could impact the security of the customer’s cardholder data environment?<br><br><b>Note:</b> The exact wording of an acknowledgement will depend on the agreement between the two parties, the details of the service being provided, and the responsibilities assigned to each party. The acknowledgement does not have to include the exact wording provided in this requirement. | <ul style="list-style-type: none"> <li>Observe written agreements</li> <li>Review policies and procedures</li> </ul>                                  | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12.8.3           | Is there an established process for engaging service providers, including proper due diligence prior to engagement?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <ul style="list-style-type: none"> <li>Observe processes</li> <li>Review policies and procedures and supporting documentation</li> </ul>              | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

| PCI DSS Question |                                                                                                                                       | Expected Testing                                                                                                                             | Response<br>(Check one response for each question) |                          |                          |                          |
|------------------|---------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|--------------------------|--------------------------|--------------------------|
|                  |                                                                                                                                       |                                                                                                                                              | Yes                                                | Yes with<br>CCW          | No                       | N/A                      |
| 12.8.4           | Is a program maintained to monitor service providers' PCI DSS compliance status at least annually?                                    | <ul style="list-style-type: none"> <li>▪ Observe processes</li> <li>▪ Review policies and procedures and supporting documentation</li> </ul> | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12.8.5           | Is information maintained about which PCI DSS requirements are managed by each service provider, and which are managed by the entity? | <ul style="list-style-type: none"> <li>▪ Observe processes</li> <li>▪ Review policies and procedures and supporting documentation</li> </ul> | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12.10.1          | (a) Has an incident response plan been created to be implemented in the event of system breach?                                       | <ul style="list-style-type: none"> <li>▪ Review the incident response plan</li> <li>▪ Review incident response plan procedures</li> </ul>    | <input type="checkbox"/>                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## **Appendix A: Additional PCI DSS Requirements**

### ***Appendix A1: Additional PCI DSS Requirements for Shared Hosting Providers***

This appendix is not used for merchant assessments.

### ***Appendix A2: Additional PCI DSS Requirements for Entities using SSL/early TLS***

This appendix is not used for SAQ A merchant assessments

### ***Appendix A3: Designated Entities Supplemental Validation (DESV)***

This Appendix applies only to entities designated by a payment brand(s) or acquirer as requiring additional validation of existing PCI DSS requirements. Entities required to validate to this Appendix should use the DESV Supplemental Reporting Template and Supplemental Attestation of Compliance for reporting, and consult with the applicable payment brand and/or acquirer for submission procedures.



## Appendix B: Compensating Controls Worksheet

Use this worksheet to define compensating controls for any requirement where “YES with CCW” was checked.

**Note:** Only companies that have undertaken a risk analysis and have legitimate technological or documented business constraints can consider the use of compensating controls to achieve compliance.

Refer to Appendices B, C, and D of PCI DSS for information about compensating controls and guidance on how to complete this worksheet.

### Requirement Number and Definition:

|                                               | Information Required                                                                                                                 | Explanation |
|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|-------------|
| 1. <b>Constraints</b>                         | List constraints precluding compliance with the original requirement.                                                                |             |
| 2. <b>Objective</b>                           | Define the objective of the original control; identify the objective met by the compensating control.                                |             |
| 3. <b>Identified Risk</b>                     | Identify any additional risk posed by the lack of the original control.                                                              |             |
| 4. <b>Definition of Compensating Controls</b> | Define the compensating controls and explain how they address the objectives of the original control and the increased risk, if any. |             |
| 5. <b>Validation of Compensating Controls</b> | Define how the compensating controls were validated and tested.                                                                      |             |
| 6. <b>Maintenance</b>                         | Define process and controls in place to maintain compensating controls.                                                              |             |



## Section 3: Validation and Attestation Details

### Part 3. PCI DSS Validation

This AOC is based on results noted in SAQ A (Section 2), dated (SAQ completion date).

Based on the results documented in the SAQ A noted above, the signatories identified in Parts 3b-3d, as applicable, assert(s) the following compliance status for the entity identified in Part 2 of this document: **(check one)**:

| <input type="checkbox"/> | <p><b>Compliant:</b> All sections of the PCI DSS SAQ are complete, all questions answered affirmatively, resulting in an overall <b>COMPLIANT</b> rating; thereby (Merchant Company Name) has demonstrated full compliance with the PCI DSS.</p>                                                                                                                                                                                                                                                                                                                                                                  |                      |                                                                |  |  |  |  |
|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------------------------------------------------|--|--|--|--|
| <input type="checkbox"/> | <p><b>Non-Compliant:</b> Not all sections of the PCI DSS SAQ are complete, or not all questions are answered affirmatively, resulting in an overall <b>NON-COMPLIANT</b> rating, thereby (Merchant Company Name) has not demonstrated full compliance with the PCI DSS.</p> <p><b>Target Date</b> for Compliance:</p> <p>An entity submitting this form with a status of Non-Compliant may be required to complete the Action Plan in Part 4 of this document. <i>Check with your acquirer or the payment brand(s) before completing Part 4.</i></p>                                                              |                      |                                                                |  |  |  |  |
| <input type="checkbox"/> | <p><b>Compliant but with Legal exception:</b> One or more requirements are marked “No” due to a legal restriction that prevents the requirement from being met. This option requires additional review from acquirer or payment brand.</p> <p><i>If checked, complete the following:</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">Affected Requirement</th> <th>Details of how legal constraint prevents requirement being met</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> </tr> </tbody> </table> | Affected Requirement | Details of how legal constraint prevents requirement being met |  |  |  |  |
| Affected Requirement     | Details of how legal constraint prevents requirement being met                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                      |                                                                |  |  |  |  |
|                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                      |                                                                |  |  |  |  |
|                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                      |                                                                |  |  |  |  |

### Part 3a. Acknowledgement of Status

Signatory(s) confirms:

**(Check all that apply)**

|                          |                                                                                                                                                  |
|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | PCI DSS Self-Assessment Questionnaire A, Version (version of SAQ), was completed according to the instructions therein.                          |
| <input type="checkbox"/> | All information within the above-referenced SAQ and in this attestation fairly represents the results of my assessment in all material respects. |
| <input type="checkbox"/> | I have confirmed with my payment application vendor that my payment system does not store sensitive authentication data after authorization.     |
| <input type="checkbox"/> | I have read the PCI DSS and I recognize that I must maintain PCI DSS compliance, as applicable to my environment, at all times.                  |
| <input type="checkbox"/> | If my environment changes, I recognize I must reassess my environment and implement any additional PCI DSS requirements that apply.              |

**Part 3a. Acknowledgement of Status** (continued)

- No evidence of full track data<sup>1</sup>, CAV2, CVC2, CID, or CVV2 data<sup>2</sup>, or PIN data<sup>3</sup> storage after transaction authorization was found on ANY system reviewed during this assessment.
- ASV scans are being completed by the PCI SSC Approved Scanning Vendor (*ASV Name*)

**Part 3b. Merchant Attestation**

|                                                  |               |
|--------------------------------------------------|---------------|
| <i>Signature of Merchant Executive Officer</i> ↑ | <i>Date:</i>  |
| <i>Merchant Executive Officer Name:</i>          | <i>Title:</i> |

**Part 3c. Qualified Security Assessor (QSA) Acknowledgement (if applicable)**

|                                                                                             |  |
|---------------------------------------------------------------------------------------------|--|
| <i>If a QSA was involved or assisted with this assessment, describe the role performed:</i> |  |
|---------------------------------------------------------------------------------------------|--|

|                                                              |                     |
|--------------------------------------------------------------|---------------------|
| <i>Signature of Duly Authorized Officer of QSA Company</i> ↑ | <i>Date:</i>        |
| <i>Duly Authorized Officer Name:</i>                         | <i>QSA Company:</i> |

**Part 3d. Internal Security Assessor (ISA) Involvement (if applicable)**

|                                                                                                                                |  |
|--------------------------------------------------------------------------------------------------------------------------------|--|
| <i>If an ISA(s) was involved or assisted with this assessment, identify the ISA personnel and describe the role performed:</i> |  |
|--------------------------------------------------------------------------------------------------------------------------------|--|

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<sup>1</sup> Data encoded in the magnetic stripe or equivalent data on a chip used for authorization during a card-present transaction. Entities may not retain full track data after transaction authorization. The only elements of track data that may be retained are primary account number (PAN), expiration date, and cardholder name.

<sup>2</sup> The three- or four-digit value printed by the signature panel or on the face of a payment card used to verify card-not-present transactions.

<sup>3</sup> Personal identification number entered by cardholder during a card-present transaction, and/or encrypted PIN block present within the transaction message.

## Part 4. Action Plan for Non-Compliant Requirements

Select the appropriate response for “Compliant to PCI DSS Requirements” for each requirement. If you answer “No” to any of the requirements, you may be required to provide the date your Company expects to be compliant with the requirement and a brief description of the actions being taken to meet the requirement.

*Check with your acquirer or the payment brand(s) before completing Part 4.*

| PCI DSS Requirement* | Description of Requirement                                                             | Compliant to PCI DSS Requirements<br>(Select One) |                          | Remediation Date and Actions<br>(If “NO” selected for any Requirement) |
|----------------------|----------------------------------------------------------------------------------------|---------------------------------------------------|--------------------------|------------------------------------------------------------------------|
|                      |                                                                                        | YES                                               | NO                       |                                                                        |
| 2                    | Do not use vendor-supplied defaults for system passwords and other security parameters | <input type="checkbox"/>                          | <input type="checkbox"/> |                                                                        |
| 8                    | Identify and authenticate access to system components                                  | <input type="checkbox"/>                          | <input type="checkbox"/> |                                                                        |
| 9                    | Restrict physical access to cardholder data                                            | <input type="checkbox"/>                          | <input type="checkbox"/> |                                                                        |
| 12                   | Maintain a policy that addresses information security for all personnel                | <input type="checkbox"/>                          | <input type="checkbox"/> |                                                                        |

\* PCI DSS Requirements indicated here refer to the questions in Section 2 of the SAQ.

