Movement Assessment Technologies

April 25, 2025

--- Covered List Software Incapability[1] ---

Device (model name):	Muscle Meter
Grantee:	Movement Assessment Technologies
FCC ID:	2BOZE-MUSCLEMETER

Device features:

Operating System (as applicable):	N/A	
Storage Capacity (hard drive or other permanent memory storage):	N/A	
Is installation of third-party software possible?	☐ YES	☒ NO
Does the device have an internet connection?	☐ YES	☒ NO
Can the device connect to a PC?	☐ YES	☒ NO

Chipset/module information:

Chipset / module part number:	Memory size (MB)
2977	N/A

Minimum system requirements Kaspersky as of December 3, 2024

Android	Memory: 120 MB	Disc space: unknown	Processor speed: unknown
MacOS	Memory: 2000 MB	Disc space: 2200 MHz	Processor speed: unknown
Windows	Memory: 1000 MB	Disc space: 1000 MB	Processor speed: 1 GHz
Linux	Memory: 1000 MB	Disc space: 1000 MHz	Processor speed: 1 GHz

Based on the review of the above factsheet(s) and device features, the device

☒ cannot support installation of any cybersecurity or anti-virus software on the covered list.
☐ potentially can operate with any cybersecurity or anti-virus software on the covered list –
additional 3rd party proof is provided to demonstrate compliance with requirements as of
2.911(d)5(i),(ii) – page 2 of this document applies.

Signature:	
Name:	Stephen King
Title/Position:	Owner

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[1] List of minimum requirements to implement covered list software – if the EUT does not have capability to install Kaspersky under the given configuration. Page 2 must also be handed in.

Note: If the device is capable of running Kaspersky software, at least one document must be provided from a third party showing that the Kaspersky software is not present on the device. This could include the results of a software scan, a screen capture of the device software register or other objective evidence that proves the Kaspersky software is not on the device. Please follow options listed on page 2.

63_Compliance proof covered list-

Movement Assessment Technologies

- Options to provide of compliance with covered list software requirements -

Please fill in as applicable and provide additional proof as requested:

| 1 | Has the client signed an attestation stating the device is incapable of running the Kaspersky software (page 1)?

* YES – no more proof needed – 2-5 do not apply > N/A
** NO – more proof must be provided (item 2-5 must be answered) | ☒ YES* | ☐ NO** | | |

| 2 | Did the test lab or other 3rd party other than the certification body and applicant provide a list of software installed on the device and is there no evidence of Kaspersky software being installed?

***YES – please:
Insert File Name:
Insert 3rd Party Name: | ☐ YES*** | ☐ NO | ☒ N/A |

| 3 | Have the results of a software scan been provided showing that Kaspersky software is not installed on the device?

***YES – please:
Insert File Name:
Insert 3rd Party Name: | ☐ YES*** | ☐ NO | ☒ N/A |

| 4 | Has any other objective evidence that Kaspersky software is not installed on the device been provided?

***YES – please:
Insert File Name:
Insert 3rd Party Name: | ☐ YES*** | ☐ NO | ☒ N/A |

| 5 | Has at least one of the above items been shown as a YES?

**** NO – applicant failed to provide sufficient proof – application filing is rejected. | ☒ YES | ☐ NO**** | | |

Note:
Files containing confidential operational details can be kept long-term confidential on applicant's request.