U.S. Election Assistance Commission

a. State Interest Earned: Enter the current year amount earned (not cumulative)

OMB Number: 3265-0022 Expires 04/30/2025

FEDERAL FINANCIAL REPORT

(EACFFR)

•			(LAGI)	<u> </u>			
1. Federal Agency and Org. Element to Which Report is Submitted U.S. Election Assistance Commission 2. Federal Grant or Other Identifying Number (To report multiple grants, use FFR Attachment)				signed	By Fed. Agency		
EAC-REQPY22MI 8. Recipient Organization (Name and complete address including Zip code)							
	`	nplete address including	Zip code)				
Recipient Organization I Michigan Secretary of State							
Street1: 430 W ALLEGAN STREET	Γ						
Street2:							
City: LANSING County:							
State: MI						Provi	ace:
				Zip 5: 48933			4:
						6. Rep	ort Type
4a. UEI F772F3B8PGN1		4b. EIN 386000134	mt	Recipient Account Number oer o report multiple grants, use		C Quarterly C Semi-Annual Annual Final	
7. Basis of Accounting		8. Project/Grant Perio	od			9. Reporting Period End Date	
Cash Accrual		From: 08/16/2004	To 09/	: /30/2099		(Mont 09/30/	2020
10. TRANSACTIONS (Use lines a-c for single or multiple grant reporting)				Cumulative			
Federal Cash: (To report	multiple grants	, also use FFR attachme	nt)				
a. Cash Receipts							\$88,575,455.00
b. Cash Disbursements						\$88,575,455.00	
c. Cash on hand (line a	minus b)						\$0.00
Federal Expenditures and	l Unobligated	Balance: Do not comple	te this section if reportin	g on multiple awards.			
d. Total Federal funds authorized \$88,575,				\$88,575,455.00			
e. Federal share of expenditures					\$88,575,455.00		
f. Federal share of unliq	uidated obliga	itions				\$0.00	
g. Total Federal share (sum of line e plus line f)					\$88,575,455.00		
h. Unobligated balance	of Federal fun	ds (line d minus g)					\$0.00
Recipient Share: Do not complete this section if reporting on multiple awards.							
i. Total recipient share r	equired					\$4,690,208.00	
j. Recipient share of expenditures				\$4,690,208.00			
k. Remaining recipient share to be provided (line i minus j)				\$0.00			
Program Income: Do not complete this section if reporting on multiple awards.							
l. Total Federal program income earned					\$0.00		
m. Program income expended in accordance with the deduction alternative				\$0.00			
n. Program Income expended in accordance with the addition alternative				\$0.00			
o. Unexpended program income (line 1 minus line m and line n) \$0.00							
Federal Interest:							
p. Total Federal interest earned				\$7,735,014.49			
q. Federal interest expenditures				\$7,735,014.49			
r. Remaining Federal interest to be expended (line p minus q) \$0.00							
11. Indirect Expense							
a. Type	b. Rate	Period From	Period To	d. Base	e. Amount Charg	ed	f. Federal Share
Fixed	13.86%	10/01/2019	09/30/2020	\$1,229,876.67	\$170,4	460.91	\$168,367.89
g. Total \$1,229,876.67 \$170,460.91 \$168,367.89				\$168,367.89			
12. Remarks:							

b. State Interest Expended: Enter the current year amount expended (not cumulative)		\$0.00	
c. Program Income Earned: Enter the current year amount earned. (not cumulative)		\$0.00	
d. Program Income Expended: Enter the amount of Program Income expended in the current year (not cumulative)		\$0.00	
e. Program Income Earned Breakdown: List each source of program income individually next to each amount (federal interest earned is not program income).			
Source of program income	Amount	Delete	
Source of program income e. 1	Amount \$0.00	Delete	
		Delete \$0.00	

f. Comments: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complet e, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set fo rth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulent informat ion, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, f alse statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

a. Typed or Printed Name and Title of Authorized Certifying Official	c. Telephone (Area code, number and extension)
Certification Title	d. Email address
	e. Date Report Submitted (Month, Day, Year) 08/19/2022

Report Attachment (For reporting multiple grants)

14. List Information below for each grant covered by this report.		
Federal Grant Number	Recipient Account Number	Cumulative Federal Cas h Disbursement
		\$0.00
	TOTAL (Should correspond to the amount on Line 10b on Page 1)	\$0.00

U.S. ELECTION ASSISTANCE COMMISSION

Cyber and Physical Security

Voter Education

OMB CONTROL No.: 3265-0022 Expiration Date: 04/30/2025

\$0.00

\$0.00

Progress Report Section I: Cover Page				
	formation			
1. State or Territory Michigan Secretary of State	2. Federal Grant or Other Identifying Number Assigned by Federal Agency EAC-REQPY22MI			
3. Grant Type:				
© 101				
251				
Election Security				
Other [e.g., CARES]				
Describe Other				
Report In	formation			
4. Report Type:				
☐ Semi-Annual				
Annual C				
© Final				
O Other				
Describe Other				
5. Report Period				
Start Date (Month, Day, Year) 10/01/2019	End Date (Month, Day, Year) 09/30/2020			
Section II: Progre	ess and Narrative			
Instructions: Reports due for the period ending March 31 should describe the activi ber 30 should cover the previous 12- month period. Final reports should cover the en Additional guidance can be found on our website: https://www.eac.gov/payments-an	ntire performance period from the start of the grant.			
EAC grants reports will be made publicly available. Therefore, your report narrativ	ve should:			
* Be written in clear, concise, and plain language * Not include sensitive confidential information				
6. Describe in detail what happened during this reporting period and explain how yo				
Plan/Program Narrative. (Note: Your activities should align with your category experesponse as applicable.)	enditures in Section IV and you may use those categories as headings in your			
Check if no activity during this reporting period.				
The Department completed the modernization of the QVF system to function more effectively and to better assist the statewide election community. The Department also expand ed the functionality and use of the Michigan Elections eLearning Center, the online training portal serving the needs of Michigan's 1,600 county and local clerks and their staff members involved in local election administration to conduct remote training throughout the year. This year's enhancements included further integration of the QVF with online voter registration, expanded voter-look up features utilizing QVF data such as absent voter ballot application status, permanent absent voter application list status, an online absent voter ballot application, expansion of server and CPU capacity to handle increased usage of QVF during peak times, implementation of multifactor authentication, improvements to clerk ability to track absent voter ballot status, continued laptop computer purchases for local jurisdictions and overall preparation for the upcoming 2020 election cycle. All of the activities fall under our state plan objective of development of applications to improve the administration of federal elections and train election officials.				
7. Provide a description of any training conducted, including security training.				
Check if no training was conducted during this reporting period.				
In order to obtain access to Qualified Voter File, all users must complete training which is	ncludes a 25-minute security training module.			
8. Report on the number and type of articles of voting equipment obtained with the funds. Include the amount expended on the expenditure chart.				
Check if no voting equipment purchased during this reporting period.				
2 accessible voting devices were purchased with Section 251 funds during this reporting period.				
9. Subgrants (if applicable)				
Check if no subgrants were made during this reporting period.				
Describe the activities carried out by your subgrantees during the reporting period.				
10. Provide a breakdown of aggregate sub-award expenditures across major categories. If you do not have expenses for a particular category please populate the field with \$0.00 Total expenses will automatically calculate. Please verify totals prior to submission.				
Category	Subaward Federal Expenditures			
Voting Equipment	\$0.00			
Voting Processes	\$0.00			
Voter Registration Systems	\$0.00			
Election Auditing	\$0.00			

Accessibility			\$0.00			
Other:			\$0.00			
Total			\$0.00			
11. Match (if applicable)						
Check if match not required.						
Describe how you are meeting or have met the matching requirem Match has already been met. Minimum required grant match is \$4,661		ch expenditures from the fund totale	1 \$4,690,208.			
Section Sect	ion III: Cha	allenges and Chan	ges			
12. Issues Encountered						
enter in the major meter statement at thing that reporting p	Check if no major issues encountered during this reporting period.					
Describe how and whether the issues were resolved. Also, briefly	discuss the implica	ations of any unresolved issues or	concerns.			
13. Describe any significant changes to your program during the redevelopments that improved program efficiency and/or service deli		cluding changes to your original S	tate Plan/Program Narrative or favorable			
Check if no significant changes were made during this report	ting period.					
Se	ction IV: E	xpenditures				
		-				
14. Fill out the table below with both the Federal and State Match expenditures for the current reporting period. Include federal and state interest expenditures and wr ite-in any cost areas that do not fit into the predefined program categories. Subaward expense totals identified in section #10 should also be populated and rolled into the appropriate expense categories for #14. If you do not have expenses for a particular category please populate the field with \$0.00 Total expenses will automatically cal culate. Please verify totals prior to submission.						
Expenditures should be consistent with the your financial reports. (EAC uses the diffe		-				
te current period expenditures).			•			
Categories	1	Federal	State Match			
Voting Equipment		\$7,030.00	\$0.00			
Voting Processes		\$40,424.11	\$0.00			
Voter Registration Systems						
Election Auditing		\$0.00	\$0.00			
Cyber and Physical Security		\$0.00	\$0.00			
Voter Education		\$9,033.87	\$0.00			
Accessibility		\$0.00	\$0.00			
Other Single Audit		\$17,079.00	\$0.00			
TOTAL		\$1,405,274.56	\$2,093.00			
			Ψ2,073.00			
Section V: Final Assessment						
The final progress report is your opportunity to share the significant successes of your project and present information about the results your project achieved. The report should cover the entire period of performance.						
15. Self-Assessment - Assess whether the goals set out in your State plan/Narrative were met as intended during the grant program. Highlight any needs that were not met or ongoing/under resourced areas for future consideration.						
16. Impact and Achievements - Describe how this grant program impacted elections in your state/territory. Highlight your accomplishments and successes. The Department funded additional training for Department staff operating the eLearning Center to expand the training opportunities available to local election officials using the site. The Department moved the entirety of its election procedure training online by expanding use of electronic curricula functions. The Department also shifted to online training for the use of the Qualified Voter File system through eLearning. The system also has expanded resources allowing clerks to track their status and completion of training materials required for accreditation and also allows the Bureau to verify that individuals have completed training required for access to election information and the Qualified Voter File e. The Department also continues to maintain other training-related software that allows for additional online technical assistance for statewide election officials, including systems that allow for interactive online assistance and training on both an individual (one-on-one) and group level.						
17. Lessons Learned - Describe any lessons learned during the grant that may be replicated, expanded and/or help others. The expansion of the e-Learning system was particularly important given the inability to conduct in-person training events for the majority of 2020 and will continue to be used in the future.						
Section VI: Certification						
18. Name and Contact of the authorized certifying official.						
First and Last Name		Title				

19. Signature of Certifying Official