STATE, LOUISIANA DEPARTMENT OF
8585 ARCHIVES AVE, BATON ROUGE, LA 708090206

1. Federal Agency and Organizational Element to Which Report is Submitted: ELECTION ASSISTANCE COMMISSION

2. Federal Grant or Other Identifying Number Assigned by Federal Agency: $0.00

3. Recipient Organization (Name and complete address including Zip code):

4a. DUNS Number: 
4b. EIN: 

5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment):

6. Report Type:
   - Quarterly
   - Semi-Annual
   - Annual
   - Final

7. Basis of Accounting:
   - Cash
   - Accrual

8. Project/Grant Period (Month, Day, Year):

   From: March 28, 2018
   To: September 30, 2099

9. Reporting Period End Date (Month, Day, Year):

   September 30, 2021

10. Transactions: Cumulative

   (Use lines a-c for single or combined multiple grant reporting)

   Federal Cash (To report multiple grants separately, also use FFR Attachment):
   a. Cash Receipts: $12,512,099.00
   b. Cash Disbursements: $0.00
   c. Cash on Hand (line a minus b): $12,512,099.00

   (Use lines d-o for single grant reporting)

   Federal Expenditures and Unobligated Balance:
   d. Total Federal funds authorized: $12,512,099.00
   e. Federal share of expenditures: $0.00
   f. Federal share of unliquidated obligations: $0.00
   g. Total Federal share (sum of lines e and f): $0.00
   h. Unobligated balance of Federal funds (line d minus g): $12,512,099.00

   Recipient Share:
   i. Total recipient share required: $1,618,997.00
   j. Recipient share of expenditures: $0.00
   k. Remaining recipient share to be provided (line i minus j): $1,618,997.00

   Program Income:
   l. Total Federal share of program income earned: $200,789.00
   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 l minus line m and line n): $200,789.00

11. Indirect Expense:

   a. Type
   b. Rate
   c. Period From
   d. Period To
   e. Base
   f. Amount Charged
   g. Totals:

   $0.00

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

   *Please provide the following information:

   13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and intent set forth in the award documents. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)

   Sanders, Laura
   Accountant Administrator

   Sanders, Laura
   January 14, 2022

Paperwork Burden Statement
According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 4040-0014. Public reporting burden for this collection of information is estimated to average 1 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: US Department of Health & Human Services, OS/OCIO/PRA, 200 Independence Ave, SW, Suite 336-E, Washington DC 20201. Attention: PRA Reports Clearance Officer
Federal Agency & Organization: ELECTION ASSISTANCE COMMISSION

Federal Grant ID
Recipient Organization

DUNS Number
DUNS Status when Certified
EIN

Reporting Period End Date: September 30, 2021
Status: Awarding Agency Approval
Remarks: "Please provide the following information:

State interest earned (current fiscal year): $
State interest expended (current fiscal year): $
Program income earned (current fiscal year): $
Program income earned breakdown (current fiscal year): $ Source: e.g. Sale of registration list
Program income expended (current fiscal year): $
"

Federal Agency Review

Reviewer Name
Phone #
Email
Review Date
Review Comments
<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>3. EAC Progress Report</strong></td>
<td></td>
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<tr>
<td><strong>1. State or Territory:</strong></td>
<td>Louisiana</td>
</tr>
<tr>
<td><strong>2. Grant Number:</strong></td>
<td>LA20101001-01</td>
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<td><strong>3. Report:</strong></td>
<td>Annual (Oct 1 - Sept 30)</td>
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<tr>
<td><strong>4. Grant:</strong></td>
<td>Election Security</td>
</tr>
<tr>
<td><strong>5. Reporting Period Start Date</strong></td>
<td>10/01/2020</td>
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<tr>
<td><strong>6. Reporting Period End Date</strong></td>
<td>09/30/2021</td>
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</tbody>
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**4. Progress and Narrative**

7. Describe in detail what happened during this reporting period and explain how you implemented the approved grant activities in accordance with your State Plan/Program Narrative. *(Note: Your activities should align with your Grant Cost Categories Table.)*

Due to state guidelines and regulations regarding Request for Proposals, the department has not yet secured a contract for the procurement of a new electronic voting system; therefore, no expenditures have been made during the reporting period ending on September 30, 2021.
8. Describe any significant changes to your program during the project, including changes to your original State Plan/Program Narrative or favorable developments that improved program efficiency and/or service delivery.

While the timeline of our Program Narrative has changed due to a delay in securing a contract for the procurement of a new voting system, the objectives presented in the project narratives are still valid. The RFP was released on January 27, 2021. However, the department withdrew the RFP on March 3, 2021, after questions arose regarding the applicability of Direct Recording Electronic (DRE) voting machine technology and how it impacts the level of competition for the solicitation.

Currently, the department is working with the Louisiana Legislature to help clarify these matters of law and ensure the citizens of LA receive the highest level of competition in this important procurement.

9. Issues Encountered:

Describe all major issues that arose during the implementation of the project and the reasons why established goals were not met, if applicable. Address each issue separately and describe whether and how the issues were resolved. Also, briefly discuss the implications of any unresolved issues or concerns.

The only major issue the department has experienced is securing a contract for the procurement of a new voting system. As mentioned above, the department is working through this process, and we expect progress soon.

10. Provide a description of any training conducted, including security training.

N/A

11. Subgrants:

Did your office provide subawards to local jurisdictions during this reporting period?

No

12. Match:

Describe how you are meeting or have met the matching requirement.

The State of Louisiana has secured the match which will help fund the acquisition through purchase or lease of a new voting system.

13. Report on the number and type of articles of voting equipment obtained with the funds. Include the amount expended on the expenditure table.

N/A

5. Expenditures


GRANT COST CATEGORIES - FEDERAL

- Voting Equipment and Processes: $0
- Post-Election Auditing: $0
- Voter Registration Systems: $0
- Cyber Security: $0
- Voter Education/Communications: $0
Accessibility: : $0
Staffing: : $0
Training: : $0
Subgrants: : $0
Indirect Costs (If applicable, FFR Line 11): : $0
Unliquidated Obligations (If applicable, FFR Line 10f): : $0
Other (Specify below) : $0
Other (Specify below) : $0
Other (Specify below) : $0
Total : $0
Comments:

15. GRANT COST CATEGORIES - MATCH
Voting Equipment and Processes: : $0
Post-Election Auditing: : $0
Voter Registration Systems: : $0
Cyber Security: : $0
Voter Education/Communications: : $0
Accessibility: : $0
Staffing: : $0
Training: : $0
Subgrants: : $0
Indirect Costs (If applicable, FFR Line 11): : $0
Unliquidated Obligations (If applicable, FFR Line 10f): : $0
Other (Specify below) : $0
Other (Specify below) : $0
Other (Specify below) : $0
Total : $0
Comments:

7. Expenditures
16. Confirm Total Grant Expenditure Amounts
Federal : $0
Match : $0
Total : $0

OMB CONTROL NUMBER: 3265-0020

8. Certification
Name and Contact of the authorized certifying official of the recipient.

First Name
Laura

Last Name
Sanders
17. Add another contact to send a copy of submission confirmation and edit link?

Signature of Certifying Official:

[Signature]

Signature of: Laura Sanders

9. Report Submitted to EAC

Thank you. Your Annual (Oct 1 - Sept 30) progress report for Election Security has been submitted to the EAC. Please keep the PDF download of your submission as grant record.