U.S. Election	Assista	nce Commis	sion		ON		ımber: 3265-0022 res 04/30/2025
		FEDERA	L FINAN (EACF	CIAL REPC	DRT		
1. Federal Agency and O	rg. Element to	Which Report is Subm		Federal Grant or Other Id To report multiple grants, use		Assigned	l By Fed. Agency
U.S. Election Assistance C				4C-ELSEC22CA			
3. Recipient Organization	n (Name and co	omplete address includin					
Recipient Organization California Secretary of Sta							
Street1: 1500 11TH ST							
Street2:							
City:				ounty:			
SACRAMENTO			S	ACRAMENTO		1	
State: CA						Provin	ce:
Country: United States				ip 5: 5814		Zip +4 5701	:
						6. Rep	ort Type
4- 11F1				Recipient Account Number	r or Identifying N	0	uarterly
4a. UEI D9BXBJ9ZDNU8		4b. EIN 946001347		nber <i>Fo report multiple grants, use</i>	FFR Attachment)	O Se	mi-Annual
			E	7643B1		🖸 💽 Ar	inual
						OFi	
7. Basis of Accounting		8. Project/Grant Peri	od			9. Reporting Period End Date (<i>Month, Day, Year</i>)	
Cash		From: 03/23/2018	T): 0/30/2099		l'.	
C Accrual		03/23/2018		// 30/2099		09/30/2	2022
10. TRANSACTIONS (Use lines a-c for single of	r multiple gran	t reporting)				Cumu	lative
Federal Cash: (To report	t multiple grant	ts, also use FFR attachn	nent)			1	
a. Cash Receipts							\$79,328,610.0
b. Cash Disbursement	s						\$46,752,972.3
c. Cash on hand <i>(line a</i>	n minus b)						\$32,575,637.6
Federal Expenditures an	_	Balance: Do not comp	lete this section if repo	rting on multiple awards.			
d. Total Federal funds						\$79,328,610.0	
e. Federal share of exp						\$46,752,972.3	
f. Federal share of unli		-				\$0.0	
g. Total Federal share							\$46,752,972.3
h. Unobligated balance Recipient Share: Do not			ultiple awards				\$32,575,637.6
i. Total recipient share	-	ection if reporting on m	unpre uwaras.				\$10,681,891.0
j. Recipient share of ex	-					\$9,516,646.0	
j. Recipient share of expenditures k. Remaining recipient share to be provided <i>(line i minus j)</i>					\$1,165,245.0		
Program Income: Do no	t complete this	section if reporting on 1	nultiple awards.			1	
l. Total Federal progra	m income earı	ned					\$0.0
m. Program income expended in accordance with the deduction alternative				\$0.0			
n. Program Income expended in accordance with the addition alternative				\$0.0			
o. Unexpended progra	m income <i>(line</i>	e l minus line m and line	e n)				\$0.0
Federal Interest:							
p. Total Federal interest earned				\$1,233,281.8			
q. Federal interest expenditures					\$0.0		
r. Remaining Federal interest to be expended (line p minus q)						\$1,233,281.8	
1. Indirect Expense							
а. Туре	b. Rate	c. Period From	Period To	d. Base	e. Amount Charg	ged	f. Federal Share
	0.00%			\$0.00		\$0.00	\$0.0

g. Total	\$0.00	\$0.00		\$0.00	
12. Remarks:	12. Remarks:				
a. State Interest Earned: Enter the current year amount earned (not cumulative)			\$0.00		
b. State Interest Expended: Enter the current year amount expended (not cumulat			\$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		А	nount	Delete	
e. 1			\$0.00		
		Total:		\$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, com plete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objective s set forth in the terms and conditions of the Federal award. I am aware that any false, fictitious, or fraudulen t information, or the omission of any material fact, may subject me to criminal, civil or administrative penalti es for fraud, false statements, false claims or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Section s 3729-3730 and 3801-3812).

a. Typed or Printed Name and Title of Authorized Certifying Official Fan Yang	c. Telephone (Area code, number and extension)
	d. Email address fyang@sos.ca.gov
b. Signature of Authorized Certifying Official	e. Date Report Submitted (Month, Day, Year) 12/22/2022

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	OMB CONTROL No.: 3265-0022				
	Expiration Date: 04/30/2025				
	ss Report				
Section I:	Section I: Cover Page				
	nformation				
1. State or Territory California Secretary of State	2. Federal Grant or Other Identifying Number Assigned by Federal Agency EAC-ELSEC22CA				
3. Grant Type:					
Q 101					
© 251 © Election Security					
O ther [e.g., CARES]					
Describe Other					
Report	information				
4. Report Type:					
C Semi-Annual					
Annual					
C Final C Other					
Describe Other					
5 Depart Davied					
5. Report Period Start Date (Month, Day, Year)	End Date (Month, Day, Year)				
10/01/2021	09/30/2022				
Section II: Progr	ess and Narrative				
Instructions: Reports due for the period ending March 31 should describe the au tember 30 should cover the previous 12- month period. Final reports should cov Additional guidance can be found on our website: https://www.eac.gov/payment					
EAC grants reports will be made publicly available. Therefore, your report nam * Be written in clear, concise, and plain language * Not include sensitive confidential information	ative should:				
6. Describe in detail what happened during this reporting period and explain ho Plan/Program Narrative. (Note: Your activities should align with your category response as applicable.)	w you implemented the approved grant activities in accordance with your State expenditures in Section IV and you may use those categories as headings in your				
Check if no activity during this reporting period.					
tion of cyber security safeguards and associated infrastructure enhancements to prote vement of the administration of elections through the implementation of vote centers through the training of counties on accessibility requirements and mitigations and pro-	nburse California counties in the form of county contracts to support county implementa ct against cyber risks and vulnerabilities, (2) reimburse California counties for the impro and associated voting process enhancements; and (3) support polling place accessibility viding support to counties to improve accessibility of polling places.				
7. Provide a description of any training conducted, including security training.					
Check if no training was conducted during this reporting period.					
allowed to submit claims for reimbursement for the implementation of cyber security d vulnerabilities. As a condition of receiving funds under the contract, counties must ning must include cyber security best practices, including how to recognize a phishin n, and avoiding dangerous applications. HAVA staff ensured that for any claims of re	o California's 58 counties in prior reporting periods. Under these contracts, counties are safeguards and associated infrastructure enhancements to protect against cyber risks an conduct a security assessment and conduct security awareness training for all staff. Trai g email, creating and maintaining strong passwords, utilizing multi-factor authenticatio imbursement during the reporting period, the appropriate cyber security training took pl bility training of counties on accessibility requirements and mitigations was provided to				
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.					
1 Big bell Alert System HAVA Equipment Purchase for Polling/ Voting Locations 1 S ssible Voting Booths and Accessories 1 Election Network Upgrade Horizontal Cat6 &	Safety Yellow Delineator for ADA Parking, Curbside Voting 1 Inclusion Solutions Acce				
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 per California counties were reimbursed for cyber security enhancements, implementing oters, and purchasing voting equipment.	iod. vote centers to improve the administration of elections, improving the accessibility for v				

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 fi eld with \$0.00 Total expenses will automatically calculate. Please verify totals prior to submission.

Category

Voting Equipment	\$115,943.02	
Voting Processes	\$215,157.71	
Voter Registration Systems	\$0.00	
Election Auditing	\$0.00	
Cyber and Physical Security	\$50,000.00	
Voter Education	\$0.00	
Accessibility	\$11,599.20	
Other:	\$0.00	
Total	\$392,699.93	
11. Match (if applicable)		

Check if match not required.

Describe how you are meeting or have met the matching requirement. California authorized \$46.1 million in the FY 20-21 state General Fund budget to satisfy the match requirement.

Section Section III: Challenges and Changes

12. Issues Encountered

Check if no major issues encountered during this reporting period.

Describe how and whether the issues were resolved. Also, briefly discuss the implications of any unresolved issues or concerns.

13. Describe any significant changes to your program during the reporting period, including changes to your original State Plan/Program Narrative or favorable developments that improved program efficiency and/or service delivery.

Check if no significant changes were made during this reporting period.

Note: Receipt of new grant amount \$5,826,224, plus state match amount of \$1,165,245 is reflected on this FFR. No expenditures are planned for these funds until FY 23-24. 2018 Election Security \$34,558,874 2020 Election Security \$38,943,512 2022 Election Security \$5,826,224 (New Grant) Total \$79,328,610 Regarding Grant Match: Match previously reported. Additionally, no expenditures are planned for the additional state funds of \$1,165,245 until FY 23-24.

Section IV: Expenditures

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 an d write-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 roll ed 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 aut omatically calculate. Please verify totals prior to submission.

Expenditures should be consistent with the activities described in your narrative and with the amounts i n your financial reports. (EAC uses the difference between your current and previous period FFR to ca lculate current period expenditures).

Categories	Federal	State Match
Voting Equipment	\$115,943.02	\$0.00
Voting Processes	\$215,157.71	\$0.00
Voter Registration Systems	\$0.00	\$0.00
Election Auditing	\$0.00	\$0.00
Cyber and Physical Security	\$50,000.00	\$0.00
Voter Education	\$0.00	\$0.00
Accessibility	\$11,599.20	\$0.00
Other	\$0.00	\$0.00
TOTAL	\$392,699.93	\$0.00

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. Th e 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.

17. Lessons Learned - Describe any lessons learned during the grant that may be replicated, expanded and/or help others.

Section VI: Certification

18. Name and Contact of the authorized certifying official.

First and Last Name Jessica Arriola Godina	Title HAVA Coordinator
	Email Address jgodina@sos.ca.gov
19. Signature of Certifying Official	