## U.S. Election Assistance Commission

0.00%

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

\$0.00

\$0.00

\$0.00

# **FEDERAL FINANCIAL REPORT** (EACFFR)

1. Federal Agency and Org. Element to Which Report is Submitted U.S. Election Assistance Commission			2. Federal Grant or Other Identifying Number Assigned By Fed. Agency (To report multiple grants, use FFR Attachment)				
				EAC-ELSEC22IL			
3. Recipient Organization	(Name and co	omplete address includin	ng Zip code)				
Recipient Organization I Illinois State Board Of Elect							
Street1: 2329 S Macarthur Blvd							
Street2:							
City: Springfield				County: SANGAMON			
State: IL					I	Province:	
Country: United States				<b>Zip 5:</b> 62704	2	Zip +4:	
<b>4a. UEI</b> ULFQDS9JKNH7		4b. EIN 376002057	(	5. Recipient Account Numbe umber To report multiple grants, use E7650B1	r or Identifying N	6. Report Type  Quarterly Semi-Annual Annual Final	
7. Basis of Accounting		8. Project/Grant Perio	od			O. Reporting Period End Date	
Cash Accrual		From: 03/23/2018		Γο: 09/30/2099		(Month, Day, Year) 09/30/2022	
10. TRANSACTIONS (Use lines a-c for single or	multiple gran	t reporting)	'-			Cumulative	
Federal Cash: (To report	nultiple grant	s, also use FFR attachm	nent)				
a. Cash Receipts						\$30,276,158.0	
b. Cash Disbursements						\$13,230,367.0	
c. Cash on hand (line a	minus b)					\$17,045,791.0	
Federal Expenditures and		Balance: Do not compl	lete this section if rep	orting on multiple awards.			
d. Total Federal funds authorized					\$30,276,158.0		
e. Federal share of expenditures						\$13,230,367.00	
f. Federal share of unliquidated obligations						\$0.00	
g. Total Federal share (sum of line e plus line f)						\$13,230,367.00	
h. Unobligated balance						\$17,045,791.0	
Recipient Share: Do not c		ection if reporting on m	ultiple awards.				
i. Total recipient share required					\$4,070,389.00		
					\$4,070,389.0		
k. Remaining recipient						\$0.0	
Program Income: Do not			nultiple awards.			<b>#0.0</b>	
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	l minus line m and line	? n)			\$0.0	
Federal Interest:							
p. Total Federal interes	t earned					\$725,023.0	
q. Federal interest expenditures					\$725,023.00		
r. Remaining Federal in	terest to be e	xpended (line p minus q	<i>ν</i>			\$0.0	
1. Indirect Expense a.	b.	c.		d.	e.	f.	
Type	Rate	Period From	Period To	Base	Amount Charge	II .	

g. Total	\$0.00	\$0	0.00	\$0.00
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 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 c	urrent year (not cum	ılative)		\$0.00
e. Program Income Earned Breakdown: List each source of program income individual	ly next to each amour	t (federal interest ear	ned is not program in	come).
Source of program income			Amount	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 Eric Bolinger	c. Telep	hone (Area code, num	ber and extension)	
Certification Title		l address r@elections.il.gov		
b. Signature of Authorized Certifying Official	e. Date 02/09/20	Report Submitted (Mo )23	onth, Day, Year)	

# 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

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

# Progress Report Section I: Cover Page

Grant In	formation
1. State or Territory	2. Federal Grant or Other Identifying Number Assigned by Federal Agency EAC-ELSEC22IL
3. Grant Type:	
C 101 C 251 • Election Security C Other [e.g., CARES]	
Describe Other	
Report In	formation
4. Report Type:	
Semi-Annual Annual Final Other	
Describe Other	
5. Report Period	
Start Date (Month, Day, Year) 10/01/2021	End Date (Month, Day, Year) 09/30/2022
Section II: Progre	ess and Narrative
tember 30 should cover the previous 12- month period. Final reports should cover Additional guidance can be found on our website: https://www.eac.gov/payments-EAC grants reports will be made publicly available. Therefore, your report narra * Be written in clear, concise, and plain language * Not include sensitive confidential information	and-grants/financial-progress-reporting
6. Describe in detail what happened during this reporting period and explain how Plan/Program Narrative. (Note: Your activities should align with your category ex response as applicable.)	
Check if no activity during this reporting period.	
ort election authorities in their efforts to defend, detect, and recover from cyber-attacks level and provided grant funds to the 108 local election authorities to secure their syste porting polling place accessibility. About one third of local election authorities were a flocal election authorities have been awarded funding during the July 1, 2022 - June 3 d changes in polling places in local jurisdictions. Whether those be temporary or permicessibility of their polling places for all voters with disabilities.	the Cyber Navigator Program (CNP). The CNP was required under Illinois law to supp s. The SBE has taken a robust approach to securing the election related systems a state rms locally. The SBE also continues on using this funding towards a newer program, su awarded funding during the July 1, 2021 - June 30, 2022, grant period, and about half o 0, 2023, grant period. This funding is directed towards making positive ADA approve anent improvements, local election authorities are using these funds to improve the acc
7. Provide a description of any training conducted, including security training.	
Check if no training was conducted during this reporting period.	
esponse, and recovery through simulation of realistic scenarios exploring impacts to vo	sest practices and areas for improvement in elections incident planning, identification, roter confidence, voting operations, and the integrity of elections. In attendance were report, CNP partnered with CISA to host a virtual active shooter training for Illinois elections.
8. Report on the number and type of articles of voting equipment obtained with the	ne funds. Include the amount expended on the expenditure chart.
Check if no voting equipment purchased 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 perio	od.

During the July 1, 2021 through June 30, 2022, grant period, the SBE awarded each local jurisdiction a grant for election security based on voting age population with a \$10,000 minimum. The jurisdictions were to utilize the funding to improve the security of their election related systems, based on the recommendations provided from the required risk assessments. Additional subgrant activities included funding the required connection to the statewide voter registration database via a secure connection provided by the lllinois Century Network (ICN) and providing the funding to continue to provide the cyber navigator personnel. The SBE also awarded 33 election authorities additional funding for polling place accessibility based on the needs identified in an application and survey submitted by the individual election authority. These applications were reviewed by the ADA Coordinator and funding was granted to each election authority as needed and as available, with a total of \$1,500,000.00 for accessibility alone. In the July 1, 2022, through June 30, 2023, grant period, we have the polling place accessibility grant exclusively for subgrantees. Funding for the ICN and statewide database is still accessible via state grants. We made the transition to only use funding for the accessibility of polling places due to the growing need of voters with disabilities inability to safel

y and privately access their polling places and vote their ballots. These voters were finding it difficult to vote in voting booths that didn't have wheelchair access, gaining acc ess to buildings that didn't have ramps, and vote their ballots without needing assistance. Our motive for exclusively making this a polling place accessibility grant for subgra ntees, was to make sure we give election authorities the resources to help voters with disabilities have the exact same voting experience as someone without a disability.

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	Subaward Federal Expenditures		
Voting Equipment	\$0.00		
Voting Processes	\$0.00		
Voter Registration Systems	\$0.00		
Election Auditing	\$0.00		
Cyber and Physical Security	\$4,325,495.96		
Voter Education	\$0.00		
Accessibility	\$766,930.50		
Other:	\$0.00		
Total	\$5,092,426.46		
11. Match (if applicable)			

Check if match not required.	

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

The state match requirement has already been met

## **Section Section III: Challenges and Changes**

### 12. Issues Encountered

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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.

For the July 1, 2021, to June 30, 2022, grant period, additional funding for polling place accessibility was made available for 33 local election authorities, along with the elec tion security funding. For the July 1, 2022, to June 30, 2023, grant period, polling place accessibility funding is the only funding offered for subgrantees. We had half of the jurisdictions apply and receive funding for this type of grant. We made the change from having both grant options to just the polling place accessibility grant because of the g rowing need for individuals with disabilities to safety enter the polling place and have the ability to vote privately within the confines of their precinct. A lot of polling place s throughout these jurisdictions do not have ADA accessible polling place and do not have the funding to accommodate voters with disabilities. With this grant, we hope eac h jurisdiction is able to give every voter the same equal voting experience, no matter the specific needs of that voter.

### **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).* 

Federal	State Match	
\$0.00	\$0.00	
\$0.00	\$0.00	
\$0.00	\$0.00	
\$0.00	\$0.00	
\$4,325,495.96	\$0.00	
\$0.00	\$0.00	
\$766,930.50	\$0.00	
\$55,162.98	\$0.00	
\$5,147,589.44	\$0.00	
	\$0.00 \$0.00 \$0.00 \$0.00 \$4,325,495.96 \$0.00 \$766,930.50 \$55,162.98	

### 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

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 Abby Beaty	Title			
Phone Number  Email Address Abeaty@elections.il.gov				
19. Signature of Certifying Official				