

FEDERAL FINANCIAL REPORT

(Follow form instructions)

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 (To report multiple grants, use FFR Attachment) NM20101001
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3. Recipient Organization (Name and complete address including Zip code)
Secretary Of State, New Mexico
325 Don Gaspar Capital Ste 300, santa fe, NM 875030001

4a. UEI	4b. EIN	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
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8. Project/Grant Period (Month, Day, Year) From: March 28, 2018 To: September 30, 2019	9. Reporting Period End Date (Month, Day, Year) March 31, 2022
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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	\$7,853,131.00
b. Cash Disbursements	\$3,647,597.00
c. Cash on Hand (line a minus b)	\$4,205,534.00

(Use lines d-o for single grant reporting)

Federal Expenditures and Unobligated Balance:

d. Total Federal funds authorized	\$7,853,131.00
e. Federal share of expenditures	\$3,647,597.00
f. Federal share of unliquidated obligations	\$145,202.13
g. Total Federal share (sum of lines e and f)	\$3,792,799.13
h. Unobligated balance of Federal funds (line d minus g)	\$4,060,331.87

Recipient Share:

i. Total recipient share required	\$1,015,706.00
j. Recipient share of expenditures	\$487,700.00
k. Remaining recipient share to be provided (line i minus j)	\$528,006.00

Program Income:

l. Total Federal share of program income earned	\$248,950.00
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)	\$248,950.00

11. Indirect Expense	a. Type	b. Rate	c. Period From	Period To	d. Base	e. Amount Charged	f. Federal Share
g. Totals:					\$0.00	\$0.00	\$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)

a. Typed or Printed Name and Title of Authorized Certifying Official Baca, Nadine Chief Financial Officer	c. Telephone (Area code, number, and extension) d. Email Address
b. Signature of Authorized Certifying Official Baca, Nadine	e. Date Report Submitted (Month, Day, Year) May 13, 2022

Standard Form 425
OMB Approval Number: 4040-0014
Expiration Date: 02/28/2025

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 hour 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 FINANCIAL REPORT

(Additional Page)

Federal Agency & Organization : ELECTION ASSISTANCE COMMISSION

Federal Grant ID : NM20101001

Recipient Organization : Secretary Of State, New Mexico
325 Don Gaspar Capital Ste 300, santa fe, NM 875030001

UEI :

UEI Status when Certified :

EIN :

Reporting Period End Date : March 31, 2022

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

2021-2022 EAC Progress Report

3. EAC Progress Report

1. State or Territory:

New Mexico

2. Grant Number:

NM20101001

3. Report:

Semi-Annual (Oct 1 - March 31)

4. Grant:

Election Security

5. Reporting Period Start Date

10/01/2021

6. Reporting Period End Date

03/31/2022

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.)

During this reporting period the primary objective of NM's Elections Security Program (ESP) was to continue to strengthen election security measures by maintaining a fleet of deployed election night reporting laptops, Go-Kits and 3rd party deployed laptops. During this reporting period laptops were used in a regular local election and the municipal office election; a go-kit was deployed to a county that had been compromised. The ESP staff provides election day/night support, candidate filing support as

well as ballot management support as needed.

The state continues to install and implement secured containers for drop off ballots with the ESP supporting counties with camera configurations and video retention. The ESP placed TIDs on all state owned tabulators and established an auditing process to ensure TID placement is being documented.

The Election Security Program provides training, consulting and support for county election and IT staff. ESP personnel provide a resource to counties with no dedicated IT or RM staff. The ESP program completed RAs on 78% of the counties, using the RA, ESP staff will prioritize counties' needs for future assistance. ESP program is meeting with county managers and IT directors to educate on the Critical Infrastructure status. The ESP started facilitating quarterly IT roundtables to establish and increase election security knowledge, support county IT staff and encourage program buy in. Using CISA services the ESP also facilitated De-Escalation and physical security training, which included table top exercises to county election staff. The ESP has also provided IRP templates to counties who are in need of IRPs.

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.

Some challenges in the program this period included the agency performing county risk assessments rather than a third-party due to complications. In addition, Tandem, the vendor, is usually used for BCP Compliance, and is not security-focused; an assessment was performed for the whole agency, not just elections.

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.

N/A

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

The SOS continues to ensure that staff has cybersecurity training. The ESP uses phishing tests to ensure that staff is able to detect, therefore prevent phishing attacks. Using CISA services we have facilitated security training to county BOE and IT staff. We have provided De-escalation and physical security training, which included table top exercises to county election staff at election school. We also are facilitating counties with IRP and DR development.

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 SOS secured 2 appropriations to meet the match requirement by obtaining special appropriations of \$300,000 for the election security program and \$100,000 for a server refresh in this reporting period. These secured appropriations were not spent during the period.

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

Voting equipment included go-kits, additional laptops for counties and other miscellaneous equipment.

5. Expenditures

14. Current Period Amount Expended and Unliquidated Obligations

GRANT COST CATEGORIES - FEDERAL

Voting Equipment and Processes: : \$343097

Voter Registration Systems: : \$846031

Staffing: : \$210539

Other (Specify below) : \$2805

Other (Specify below) : \$11344

Cyber Security: : \$1025

Total : \$1414841

Comments: Other Costs are: Line 1: Travel costs associated with HAVA-related projects such as the Ballot Box Project. Such costs include mileage, fuel, lodging and per diem. Line 2: Miscellaneous office-related expenditures critical to functionality of the Agency as it relates to the HAVA. Such expenditures include office supplies, asset tags, IT costs for the Election Security program, and rental of storage space for temporary storage of HAVA-funded ballot boxes and camera systems for all NM counties.

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

Total : \$0

Comments: Match was secured but not expended as of the reporting period.

7. Expenditures

16. Confirm Total Grant Expenditure Amounts

Federal : \$1414841

Match : \$0

Total : \$1414841

OMB CONTROL NUMBER: 3265-0020

8. Certification

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

First Name

Nadine

Last Name

Baca

Title

CFO

Phone Number

Email Address

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

Yes

18.

First Name

Justin

Last Name

O'Shea

Title

Contracts and Assets Manager

Email Address

Signature of Certifying Official:



Signature of: Nadine Baca

9. Report Submitted to EAC



Thank you. Your Semi-Annual (Oct 1 - March 31) progress report for Election Security has been submitted to the EAC. Please keep the PDF download of your submission as grant record.