### **FEDERAL FINANCIAL REPORT**

(Follow form instructions)

Federal Agency and Organizational Element to Which Report is Submitted						Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment)				
ELECTIO	N ASSISTAN	ICE CON	MISSION			3	, (	1 3	, ,	
				including Zip code)						
4a. UEI		4b.	FIN	5 Recipient Account N	umber or Ider	ntifvina Num	per 6 Pen	ort Type	7. Basis of Accounting	
4a. 0L1		75.	LIIN	(To report multiple gran	nort multiple grants, use FFR Attachment)			✓ Cash		
								mi-Annual nual	☐ Accural	
8. Project/G	rant Period (Mo	onth, Day,	Year)				9. Reportir	ng Period End D	ate (Month, Day, Year)	
From: <b>March 28, 2018</b>				To: September 30, 2099			March 31, 2022			
10. Transac	•			, ,		'			Cumulative	
(Use lines a	-c for single or	combined	multiple grant repo	orting)						
Federal Cas	sh (To report r	nultiple g	rants separately,	also use FFR Attachmer	nt):					
a. Cash R	Receipts								\$41,431,856.00	
b. Cash D	isbursements								\$21,560,530.36	
c. Cash o	n Hand (line a	minus b)							\$19,871,325.64	
(Use lines d	o for single gr	ant reportii	ng)							
Federal Exp	enditures and	d Unobliga	ated Balance:							
d. Total F	ederal funds a	uthorized							\$41,431,856.00	
	I share of expe								\$21,560,530.36	
	share of unliqu								\$0.00	
g. Total F	ederal share (s	sum of line	s e and f)						\$21,560,530.36	
h. Unoblig	gated balance	of Federal	funds (line d minus	s g)					\$19,871,325.64	
Recipient S	hare:									
i. Total recipient share required							\$5,363,824.00			
· ·	nt share of exp								\$2,333,444.72	
		hare to be	provided (line i mir	nus j)					\$3,030,379.28	
Program In			<del> </del>						<b>\$740.005.50</b>	
	ederal share of								\$710,335.50	
				deduction alternative					\$0.00	
	•			addition alternative					\$0.00	
			ine I minus line m a		d. Base		o Amous	t Charged	\$710,335.50 f. Federal Share	
Expense	а. туре	b. Rate	C. Fellou Floiii	reliou 10	u. base		e. Amour	nt Charged	I. Federal Strate	
				g. Totals:		\$0.00		\$0.00	\$0.00	
12. Remarks	s: Attach any e	xplanation	s deemed necessa	ry or information required	l by Federal s	ponsoring ag	gency in co	mpliance with g	overning legislation:	
"Please p	rovide the fol	lowing inf	ormation:							
expenditure	es, disbursem	ents and	cash receipts are	ne best of my knowledge for the purposes and in to criminal, civil, or adm	tent set forth	in the awa	d docum	ents. I am awar	e that any false,	
a. Typed or Printed Name and Title of Authorized Certifying Official							c. Telephone (Area code, number, and extension)			
Zebrowsl	ki Stavisky, I	Kristen				d. E	mail Addr	ess		
	ction Officia									
	of Authorized		Official			е. С	e. Date Report Submitted (Month, Day, Year)			
Zebrowsi	ki Stavisky, I	Kristen				Δ.	oril 13, 20	122		
						Star	dard Form 42			

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

Expiration Date: 02/28/2025

## FEDERAL FINANCIAL REPORT

(Additional Page)

Federal Agency & Organization

**ELECTION ASSISTANCE COMMISSION** 

Federal Grant ID

**Recipient Organization** 

UEI

**UEI Status when Certified** 

EIN

Reporting Period End Date

Status Remarks Awarding Agency Approval

"Please provide the following information:

State interest earned (current fiscal year): \$0 State interest expended (current fiscal year): \$0 Program income earned (current fiscal year): \$0

Program income earned breakdown (current fiscal year): \$0 Source: n/a

Program income expended (current fiscal year): \$0

"

## **Federal Agency Review**

Reviewer Name

Phone #

Email

**Review Date** 

**Review Comments** 

Report Status: Awarding Agency Approval Page 2 of 2 Printed Date: Jul 26, 2022

1. Login

Please enter the username and password provided by the EAC to begin the Progress Report. If you require assistance have any questions, please contact Grants@eac.gov.						
2. Verification						
3. EAC Progress Report						
1. State or Territory:						
New York						
2. Grant Number:						
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						

1. 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.)

The New York State Board of Election (NYSBOE) has continued its efforts in the implementation of our ARMOR plan developed in 2018. ARMOR stands for "Assess the Risk, Remediate Vulnerabilities, Monitor on-going Operations and Respond to incidents". The NYSBOE has continued its work in strengthening the State and County Boards of Elections cybersecurity infrastructure by continuing intrusion detection, managed security services, annual cyber hygiene training requirements,

administering statewide tabletop exercises, daily pre-election operation center statewide calls, and through our Secure Elections Center implemented cyber regulation.

2. 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.

N/A

#### 3. 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

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

The State Board of Elections provided a cyber security update at the annual New York State Election Commissioners Association conference in March. The SBOE's Secure Elections Center presented on cyber security regulations, new cyber security reporting tools, and gave an overview of potential external cyber threats from Ukraine and Russia.

#### 5. Subgrants:

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

Yes

6. Describe the activities carried out by your subgrantees during the reporting period.

The NYSBOE created a \$9 million dollar Elections Cybersecurity Remediation grant program to allocate funding directly to our 62 Board of Elections. Each Board of Election had a comprehensive, uniform risk assessment performed by NYSBOE in 2018-2019. The NYSBOE worked with each County Board to develop and approve a cybersecurity risk remediation plan. The grant funds support Counties in implementing their specific cybersecurity risk remediation plan.

Provide a breakdown of aggregate subawards expenditures across major categories.

Security: \$6,224,028.51 Total: \$6224028.51

7. Match:

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

The New York State Legislature appropriated the required 20% match.

8. 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

9. Current Period Amount Expended and Unliquidated Obligations

# **GRANT COST CATEGORIES - FEDERAL** Cyber Security:: \$6224029 Total: \$6224029 Comments: 10. GRANT COST CATEGORIES - MATCH Cyber Security:: \$443108 Total: \$443108 Comments: 7. Expenditures 11. Confirm Total Grant Expenditure Amounts Federal: \$6,224,028.51 Match: \$443,107.92 Total: \$6667136.43 **OMB CONTROL NUMBER: 3265-0020** 8. Certification Name and Contact of the authorized certifying official of the recipient. **First Name** Kristen **Last Name** Zebrowski Stavisky Title Co-Executive Director **Phone Number Email Address** 12. Add another contact to send a copy of submission confirmation and edit link? Yes 13. **First Name** Jennifer **Last Name**

Wilson

Title

Deputy Director, Public Information Office

**Email Address** 

**Signature of Certifying Official:** 



Signature of: Kristen Zebrowski Stavisky

## 9. Report Submitted to EAC



Thank you. Your Semi-Annual (Oct 1 - March 27) progress report for Election Security has been submitted to the EAC. Please keep the PDF download of your submission as grant record.