**SECRETARY OF STATE, IOWA**  
State Capitol Rm 105, Des Moines, IA 50319  

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**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  

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**8. Project/Grant Period (Month, Day, Year)**  
From: March 28, 2018  
To: September 30, 2099  
**9. Reporting Period End Date (Month, Day, Year)**  
March 31, 2021  

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**10. Transactions**  
Cumulative  

### Federal Cash (To report multiple grants separately, also use FFR Attachment):  
- a. Cash Receipts: $9,786,086.00  
- b. Cash Disbursements: $2,682,064.83  
- c. Cash on Hand (line a minus b): $7,104,021.17  

### Federal Expenditures and Unobligated Balance:  
- d. Total Federal funds authorized: $9,786,086.00  
- e. Federal share of expenditures: $2,682,064.83  
- f. Federal share of unliquidated obligations: $9,321.89  
- g. Total Federal share (sum of lines e and f): $2,691,386.72  
- h. Unobligated balance of Federal funds (line d minus g): $7,094,699.28  

### Recipient Share:  
- i. Total recipient share required: $1,274,500.73  
- j. Recipient share of expenditures: $0.00  
- k. Remaining recipient share to be provided (line i minus j): $1,274,500.73  

### Program Income:  
- 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): $170,790.99  

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**11. Indirect Expense**  
<table>
<thead>
<tr>
<th>a. Type</th>
<th>b. Rate</th>
<th>c. Period From</th>
<th>Period To</th>
<th>d. Base</th>
<th>e. Amount Charged</th>
<th>f. Federal Share</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

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

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**Basnet, Samita**  
Accountant 3  

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**Basnet, Samita**  
Accountant 3  

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**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 : IA20101001
Recipient Organization : SECRETARY OF STATE, IOWA
  State Capitol Rm 105, Des Moines, IA 50319 :

DUNS Number :
DUNS Status when Certified : ACTIVE (as of 04/30/2021)
EIN :
Reporting Period End Date : March 31, 2021
Status : Report Certified/Pending Agency Approval
Remarks : Please provide the following information:

  State interest earned (current fiscal year): $207.33
  State interest expended (current fiscal year): $0.00
  Program income earned (current fiscal year): $0.00
  Program income earned breakdown (current fiscal year): $ Source: e.g. Sale of
  registration list
  Program income expended (current fiscal year): $0.00

Federal Agency Review

Reviewer Name :
Phone # :
Email :
Review Date :
Review Comments :
3. EAC Progress Report

1. State or Territory:
   Iowa

2. Grant Number:
   IA20101001

3. Report:
   Semi-Annual (Oct 1 - March 31)

4. Grant:
   Please select only one.
   Election Security

5. Reporting Period Start Date
   10/01/2020

6. Reporting Period End Date
   03/31/2021

7. Recipient Organization:

   Organization Name
   Iowa Secretary Of State

   Street Address
   321 E 12th Street

   City
4. Progress and Narrative

8. Describe in detail what happened during this reporting period and explain how you implemented the approved grant activities.

The majority of funds expended during this reporting period were spent on cybersecurity needs such as staffing, assessments, monitoring, and the purchase of technology updates or upgrades.

Funds were also expended on communications costs to educate voting on Iowa's voting processes and to provide posters to each of Iowa's USPS locations regarding deadlines for returning absentee ballots.

Finally, funds were expended on election administration needs such as additional staffing to complete our felon database review project and review materials related to accessibility. Funds were also expended on education and training.

9. 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.

Otherwise enter N/A.

N/A

10. 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.

Otherwise enter N/A.

N/A

11. Provide a description of any security training conducted.

Otherwise enter N/A.

Beginning in October 2020, the have conducted monthly phishing assessments for all counties and the Iowa Secretary of State's Office.

12. Subgrants (if applicable):

Describe how you made funds available to local jurisdictions.

Provide a description of the major categories of subgrant activities local voting districts will accomplish with the funds.

Otherwise enter N/A.

In February 2021 we made available to the counties a HAVA cyber grant. Each county is eligible to receive $10,000, and
during the reporting period we have issued $81629.40 combined total to nine counties. This grant is for improving election cybersecurity and addressing technology gaps.

13. Match (if applicable):

Describe how you are meeting the matching requirement.

Otherwise enter - match not required.

Iowa is currently in the process of replacing its statewide voter registration database. At this time, state funds allocated for that project have been marked as the matching funds.

5. Expenditures


<table>
<thead>
<tr>
<th>GRANT COST CATEGORIES</th>
<th>Federal</th>
<th>Match</th>
</tr>
</thead>
<tbody>
<tr>
<td>Voting Equipment and Processes:</td>
<td>$0.00</td>
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</tr>
<tr>
<td>Post-Election Auditing:</td>
<td>$0.00</td>
<td></td>
</tr>
<tr>
<td>Voter Registration Systems:</td>
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<td></td>
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<td>Cyber Security:</td>
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<tr>
<td>Communications:</td>
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<tr>
<td>Total</td>
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<tr>
<td>Election Administration</td>
<td>$38,861.16</td>
<td></td>
</tr>
</tbody>
</table>

OMB CONTROL NUMBER: 3265-0020

6. Certification

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

First Name
Molly

Last Name
Widen

Title
Legal Counsel
Signature of Certifying Official:

Molly M. Widen

Signature of: Molly M. Widen

7. Report Submitted to EAC

Thank you, your progress report has been submitted to EAC. Please keep the PDF download of your submission as grant record.