

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) MD20101001 |
|--|--|

3. Recipient Organization (Name and complete address including Zip code)

MARYLAND STATE BOARD OF ELECTIONS
151 WEST ST STE 200, ANNAPOLIS, MD 214012852

| | | | | |
|-----------------|---------|---|--|--|
| 4a. DUNS Number | 4b. EIN | 5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment) | 6. Report Type <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Final | 7. Basis of Accounting <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual |
|-----------------|---------|---|--|--|

| | |
|---|--|
| 8. Project/Grant Period (Month, Day, Year) From: March 28, 2018 To: September 30, 2019 | 9. Reporting Period End Date (Month, Day, Year) September 30, 2020 |
|---|--|

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 | \$15,010,079.00 |
| b. Cash Disbursements | \$15,010,079.00 |
| c. Cash on Hand (line a minus b) | \$0.00 |

(Use lines d-o for single grant reporting)

Federal Expenditures and Unobligated Balance:

| | |
|--|-----------------|
| d. Total Federal funds authorized | \$15,010,079.00 |
| e. Federal share of expenditures | \$3,916,466.00 |
| f. Federal share of unliquidated obligations | \$0.00 |
| g. Total Federal share (sum of lines e and f) | \$3,916,466.00 |
| h. Unobligated balance of Federal funds (line d minus g) | \$11,093,613.00 |

Recipient Share:

| | |
|--|----------------|
| i. Total recipient share required | \$1,942,461.00 |
| j. Recipient share of expenditures | \$353,185.00 |
| k. Remaining recipient share to be provided (line i minus j) | \$1,589,276.00 |

Program Income:

| | |
|---|-------------|
| l. Total Federal share of program income earned | \$32,927.00 |
| m. Program income expended in accordance with the deduction alternative | \$0.00 |
| n. Program income expended in accordance with the addition alternative | \$30,608.00 |
| o. Unexpended program income (line l minus line m and line n) | \$2,319.00 |

| 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:
 State current interest earned: \$17,021.87

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 Holland, Shelly Director of Budget & Finance | c. Telephone (Area code, number, and extension) d. Email Address |
| b. Signature of Authorized Certifying Official Holland, Shelly | e. Date Report Submitted (Month, Day, Year) January 26, 2021 |

Standard Form 425
 OMB Approval Number: 4040-0014
 Expiration Date: 02/28/2022

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 : MD20101001

Recipient Organization : MARYLAND STATE BOARD OF ELECTIONS
151 WEST ST STE 200, ANNAPOLIS, MD 214012852:

DUNS Number :

DUNS Status when Certified :

EIN :

Reporting Period End Date : September 30, 2020

Status :

Remarks :

Federal Agency Review

Reviewer Name :

Phone # :

Email :

Review Date :

Review Comments :

EAC Progress Report

Response ID:85 Data

1. Login

Please enter your userword and password to begin the Progress Narrative. If you require assistance or have any questions, please contact grants@eac.gov

2. Verification

3. EAC Progress Report

1. State or Territory:

Maryland

2. Grant Number:

MD20101001-01

3. Report:

Annual (Oct 1 - Sept 30)

4. Grant:

Please select only one.

Election Security

5. Reporting Period Start Date

10/01/2019

6. Reporting Period End Date

09/30/2020

9. Recipient Organization:

Organization Name

Maryland State Board Of Elections

Street Address

151 West Street, 2nd Floor

City

Annapolis

State

MD

Zip

21401

4. Progress and Narrative

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

Training: The Maryland State Board of Elections (SBE) conducted a table top exercise during the Biennial Conference. The table top exercise had approximately 282 participants including Local Board of Election staff, Board Members, MD National Guards and staff from other organizations. The table top model was developed by the Belfer Center for Science and International Affairs at Harvard's Kennedy School of Government.

Communication: KO Public Affairs, LLC developed a strategy, message and timeline to educate the public about election related information. The public relation team developed a media strategy to assist with responding to media inquiries and interviews related to the 2020 elections.

Voting Systems: SBE purchased Cradlepoint routers to be used at early voting centers and during election day for voter registration. Routers were necessary for ensure network connectivity with the MDVOTERS database for Same Day Registration.

Election Security Consultants: SBE awarded a contract for a Chief Information Security Officer and Information Security Specialist to review all systems in the Agency. The Election Security Team are in the process of developing security plan for each system. The Election Security Team developed and they are maintaining a Risk Analysis for the agency's systems. The Election Security Consultants conducted a cyber security penetration testing for SBE's environment prior to the 2020 general

election. SBE procured a Social Media IT defense services for the 2020 General Election. The purpose of the Social Media IT defense services detected and prevented social media misinformation, impersonation and other surface web manipulations / attacks on US election.

12. 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.

SBE did not have any significant changes implemented differently than described in the original Program Narrative.

18. 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.

No issues were encountered for SBE.

15. Provide a description of any security training conducted.

Otherwise enter N/A.

Training: The Maryland State Board of Elections (SBE) conducted a table top exercise during the Biennial Conference. The table top exercise had approximately 282 participants including Local Board of Election staff, Board Members, MD National Guards and staff from other organizations. The table top model was developed by the Belfer Center for Science and International Affairs at Harvard's Kennedy School of Government.

SBE IT Director received Certified Information System Auditor CISA training and Certified Information Security Manager CISM training. SBE Database Specialist received SQL training for MDVOTERS database.

16. 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.

N/A

17. Match (if applicable):

Describe how you are meeting the matching requirement.

Otherwise enter - match not required.

No match dollars were spent in FY20. The matching requirement will be met by existing budget authority.

SBE total match is \$1,942,461. As of FY20, SBE has spent \$353,185.

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

Otherwise enter N/A.

No articles of voting equipment purchased during this period.

5. Expenditures

20. Current Period Amount Expended and Unliquidated Obligations

GRANT COST CATEGORIES

| | Federal | Match |
|---------------------------------|----------------|-------|
| Voting Equipment and Processes: | \$0.00 | |
| Post-Election Auditing: | \$0.00 | |
| Voter Registration Systems: | \$313,802.00 | |
| Cyber Security: | \$892,024.00 | |
| Communications: | \$62,998.00 | |
| Total | \$3,823,960.00 | |
| Office Expense | \$887.00 | |
| Voting Systems | \$2,529,394.00 | |
| Bank Fee | \$15,801.00 | |
| Training | \$9,055.00 | |

OMB CONTROL NUMBER: 3265-0020

6. Certification

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

First Name

Shelly

Last Name

Holland

Title

Director of Budget & Finance

Phone Number

Email Address

Signature of Certifying Official:

A handwritten signature in black ink, appearing to read 'Shelly Holland', written in a cursive style.

Signature of: Shelly Holland

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.
