

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) MN20101001				
3. Recipient Organization (Name and complete address including Zip code) Secretary Of State, Minnesota 100 Rev Martin Luther King Jr, Saint Paul, MN 551550001									
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 type="checkbox"/> Cash <input checked="" 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	
<i>(Use lines a-c for single or combined multiple grant reporting)</i>									
Federal Cash (To report multiple grants separately, also use FFR Attachment):									
a. Cash Receipts								\$14,014,282.00	
b. Cash Disbursements								\$1,101,579.25	
c. Cash on Hand (line a minus b)								\$12,912,702.75	
<i>(Use lines d-o for single grant reporting)</i>									
Federal Expenditures and Unobligated Balance:									
d. Total Federal funds authorized								\$14,014,282.00	
e. Federal share of expenditures								\$1,101,579.25	
f. Federal share of unliquidated obligations								\$0.00	
g. Total Federal share (sum of lines e and f)								\$1,101,579.25	
h. Unobligated balance of Federal funds (line d minus g)								\$12,912,702.75	
Recipient Share:									
i. Total recipient share required								\$1,820,033.96	
j. Recipient share of expenditures								\$167,712.87	
k. Remaining recipient share to be provided (line i minus j)								\$1,652,321.09	
Program Income:									
l. Total Federal share of program income earned								\$331,461.54	
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)								\$331,461.54	
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 Interest Earned: \$5591.74									
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 Black, Bert (Bibi) General Counsel						c. Telephone (Area code, number, and extension) d. Email Address			
b. Signature of Authorized Certifying Official Black, Bert (Bibi)						e. Date Report Submitted (Month, Day, Year) December 29, 2020			

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

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(Additional Page)

Federal Agency & Organization : ELECTION ASSISTANCE COMMISSION

Federal Grant ID : MN20101001

Recipient Organization : Secretary Of State, Minnesota
100 Rev Martin Luther King Jr, Saint Paul, MN 551550001:

DUNS Number

DUNS Status when Certified

EIN

Reporting Period End Date : September 30, 2020

Status : Awarding Agency Approval

Remarks : State Interest Earned: \$5591.74
State Interest Expended: \$0
Program Income Earned: \$0
Program Income Earned Breakdown: N/A
Program Income Expended: \$0

Federal Agency Review

Reviewer Name :

Phone # :

Email :

Review Date :

Review Comments :

EAC Progress Report

Response ID:116 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:

Minnesota

2. Grant Number:

MN20101001-01

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

7. DUNS/UEI:

8. EIN:

9. Recipient Organization:

Organization Name

Office Of The Secretary Of State

Street Address

180 State Office Building, 100 Rev. R. Martin Luther King, Jr. Boulevard

City

Saint Paul

State

MN

Zip

55155

4. Progress and Narrative

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

Information in response to this question is being prepared and will be updated later.

11. Provide a timeline and description of project activities funded to meet HAVA requirements. Provide an analysis of how such activities conform to the submitted State Plan or Program Narrative as applicable.

Information in response to this question is being prepared and will be updated later.

12. Describe any significant changes to your program during the course of the project, or if the project was implemented differently than described in your original State Plan or Program Narrative.

Otherwise enter - no significant changes during this period.

Information in response to this question is being prepared and will be updated later.

13. Describe any favorable developments which enabled meeting time schedules and objectives sooner or at less cost than anticipated or producing more or different beneficial results than originally planned.

Otherwise enter N/A.

Information in response to this question is being prepared and will be updated later.

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 - No articles of voting equipment purchased during this period.

No articles of voting equipment purchased during this period.

15. Provide a description of any security training conducted and the number of participants.

Otherwise enter - no security training conducted during this period.

"During the period between 01 October, 2019 and 30 September, 2020, the Election Security Cyber Navigator attached to the Minnesota Office of Secretary of State executed two separate lines of effort related to training Minnesota county and local elections and IT officials on election-related cyber security.

In the first initiative, separate and specific training was conducted with elections and IT leadership and their team members from each of Minnesota's 87 counties. These sessions were conducted either in-person (pre-pandemic), or virtually (Zoom-style, post March 2020), with content focused on spear phishing risks and vulnerabilities, foreign adversary tactics, techniques and procedures (TTPs), mitigation assistance available from state, federal, and non-profit partners, and reporting processes

and procedures in the event of compromise. This content was further augmented throughout the reporting period with frequent e-mailed alerts and notices related to specific adversary cyber activity.

Separately, more broad group training webinar sessions and tabletop exercise participation opportunities were made available to Minnesota county and local election officials. In February, 2020 (in advance of Minnesota's 03 March Presidential Nominating Primary election), two separate webinar sessions were conducted. These featured content presented by local officials from the U.S. Department of Homeland Security, the Cybersecurity and Infrastructure Security Agency (CISA), the FBI, and Minnesota's state IT agency. Topics emphasized specific observed foreign adversary cyber activity, and what steps local officials could take to prepare and defend their network environments. In July, 2020, Minnesota county and local elections and IT officials were invited to participate in the CISA-sponsored "Tabletop the Vote" tabletop exercise, conducted remotely online. Training in this forum emphasized collaborative processes and mechanisms for securing elections systems and personnel from cyber threats."

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.

The required match was met by in-kind expenditures for election security in the amount of \$167,712.87, a direct appropriation of \$163,000 into the HAVA Account by the Minnesota Legislature in Laws 2019, 1st Special Session, Chapter 10, Article 1, Section 6 (b), and a direct appropriation of \$1,477,901 into the HAVA Account by the Minnesota Legislature in Laws 2020, Chapter 77, Section 3, subdivision 2. The entire match has now been met.

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 appropriate. Address each issue separately in its own section, and describe whether and how the issues were resolved. Also, briefly discuss the implications of any unresolved issues or concerns.

Otherwise enter - no issues encountered.

Information in response to this question is being prepared and will be updated later.

19. Upcoming Activities:

Provide a timeline and description of upcoming activities.

Information in response to this question is being prepared and will be updated later.

5. Expenditures

20. Current Period Amount Expended and Unliquidated Obligations

GRANT COST CATEGORIES

	Federal	Match
Voting Equipment:	\$0.00	\$0.00
Post-Election Auditing:	\$0.00	\$0.00
Voter Registration Systems:	\$210,790.76	\$0.00
Cyber Security:	\$542,621.91	\$0.00
Communications:	\$98,034.74	\$0.00
Total	\$851,447.41	\$0.00
Others (describe) Accessibility	\$202,962.56	\$0.00

OMB CONTROL NUMBER: 3265-0020

6. Certification

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

First Name

Bert (Bibi)

Last Name

Black

Title

General Counsel

Phone Number

Email Address

Signature of Certifying Official:



Signature of: Bibi Black

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.