FINANCIAL STATUS REPORT

(Short Form)

(Follow instructions on the back)

RECEIVED MAR - 6 2006 DENALI COMMISSION

1. Federal Agency and Organizational Element to Which Report is Submitted	2. Federal Grant or Other Identifying Number Assigned By Federal Agency	OMB Approval No.	Page of	
Denali Commission	0140-DC-2004-I25	0348-0038	1	1 pages

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

Kwaan Electric Transmission Intertie Cooperative, Inc.
PO Box 35466 Juneau, AK 99803

4. Employer Identification Number	5. Recipient Account Number or Identifying Number	6. Final Report	7. Basis
20-1473466		☐ Yes ☑ No	☐ Cash ☑ Accrual

8. Funding/Grant Period *(See instructions)* From: (Month, Day, Year)	To: (Month, Day, Year)	9. Period Covered by this Report From: (Month, Day, Year)	To: (Month, Day, Year)
7/1/2004	12/31/2006	10/1/2005	12/31/2005

10. Transactions:	I Previously Reported	II This Period	III Cumulative
a. Total outlays	10,410,655.81	6,214,492.28	16,625,148.09
b. Recipient share of outlays	2,118,957.00		2,118,957.00
c. Federal share of outlays	8,291,698.81	6,214,492.28	14,506,191.09
d. Total unliquidated obligations			599,286.10
e. Recipient share of unliquidated obligations			404,987.62
f. Federal share of unliquidated obligations			194,298.48
g. Total Federal share *(Sum of lines c and f)*			14,700,489.57
h. Total Federal funds authorized for this funding period			14,700,489.57
i. Unobligated balance of Federal funds *(Line h minus line g)*			0.00

11. Indirect Expense	a. Type of Rate *(Place "X" in appropriate box)* ☐ Provisional ☐ Predetermined ☐ Final ☐ Fixed			
	b. Rate	c. Base	d. Total Amount	e. Federal Share

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

The amount of $10,410,655.81 previously reported through the database as federal outlay mistakenly included the recipient's share of $2,118,957.

13. Certification: **I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.**

Typed or Printed Name and Title	Telephone (Area code, number and extension)
Constance Hulbert, Secretary	907-463-6313
Signature of Authorized Certifying Official	**Date Report Submitted**
Constance Hulbert	March 6, 2006

NSN 7540-01-218-4387 269-202 Standard Form 269A (Rev. 7-97)
Prescribed by OMB Circulars A-102 and A-110

ACCEPTED