

FINANCIAL STATUS REPORT

(Short Form)

(Follow instructions on the back)



1. Federal Agency and Organizational Element to Which Report is Submitted Denali Commission	2. Federal Grant or Other Identifying Number Assigned By Federal Agency 0140-DC-2004-125	OMB Approval No. 0348-0038	Page of 1 1 pages
3. Recipient Organization (Name and complete address, including ZIP code) Kwaan Electric Transmission Intertie Cooperative, Inc. PO Box 35466 Juneau, AK 99801			
4. Employer Identification Number 20-1473466	5. Recipient Account Number or Identifying Number	6. Final Report <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	7. Basis <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
8. Funding/Grant Period (See instructions) From: (Month, Day, Year) 7/1/2004	To: (Month, Day, Year) 12/31/2006	9. Period Covered by this Report From: (Month, Day, Year) 1/1/2006	To: (Month, Day, Year) 3/31/2006
10. Transactions:			
	I Previously Reported	II This Period	III Cumulative
a. Total outlays	16,625,148.09	393,861.80	17,019,009.89
b. Recipient share of outlays	2,118,957.00	199,563.32	2,318,520.32
c. Federal share of outlays	14,506,191.09	194,298.48	14,700,489.57
d. Total unliquidated obligations			214,430.03
e. Recipient share of unliquidated obligations			214,430.03
f. Federal share of unliquidated obligations			0.00
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) <input type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> 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.			
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 Constance Hulbert, Secretary		Telephone (Area code, number and extension) 907-463-6313	
Signature of Authorized Certifying Official 		Date Report Submitted April 28, 2006	

ACCEPTED