

## FINANCIAL STATUS REPORT

(Short Form)

(Follow instructions on the back)

<b>1. Federal Agency and Organizational Element to Which Report is Submitted</b> Denali Commission	<b>2. Federal Grant or Other Identifying Number Assigned By Federal Agency</b> 170-05	<b>OMB Approval No.</b> 0348-0038	<b>Page of</b> 1   1 pages
<b>3. Recipient Organization (Name and complete address, including ZIP code)</b> Alaska Village Electric Cooperative, Inc. 4831 Eagle Street, Anchorage, AK 99503-7497			
<b>4. Employer Identification Number</b> 920035763	<b>5. Recipient Account Number or Identifying Number</b>	<b>6. Final Report</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<b>7. Basis</b> <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual
<b>8. Funding/Grant Period (See instructions)</b> From: (Month, Day, Year) 2/1/2005	To: (Month, Day, Year) 12/31/2008	<b>9. Period Covered by this Report</b> From: (Month, Day, Year) 1/1/2009	To: (Month, Day, Year) 3/31/2009
<b>10. Transactions:</b>	I Previously Reported	II This Period	III Cumulative
a. Total outlays	30,117,656.00	399,160.00	30,516,816.00
b. Recipient share of outlays	1,983,029.00	14,910.00	1,997,939.00
c. Federal share of outlays	28,134,627.00	384,250.00	28,518,877.00
d. Total unliquidated obligations			
e. Recipient share of unliquidated obligations			
f. Federal share of unliquidated obligations			
g. Total Federal share (Sum of lines c and f)			28,518,877.00
h. Total Federal funds authorized for this funding period			29,534,351.00
i. Unobligated balance of Federal funds (Line h minus line g)			1,015,474.00
<b>11. Indirect Expense</b>	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
<b>12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.</b> All transactions reported on this form were either under obligation or were expended as of expiration date of award (12/31/08).			
<b>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.</b>			
Typed or Printed Name and Title Meera Kohler, President and CEO		Telephone (Area code, number and extension) 907-565-5531	
Signature of Authorized Certifying Official 		Date Report Submitted May 1, 2009	

NSN 7540-01-218-4387

269-202

Standard Form 269A (Rev. 7-97)  
 Prescribed by OMB Circulars A-102 and A-111

ACCEPTED