FINANCIAL STATUS REPORT

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	**0129-DC-2004-I16**	**0348-0038**	1	1

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

Alaska Power & Telephone Company
193 Otto Street
P.O. Box 3222
Port Townsend, WA 98368-0922

4. Employer Identification Number	5. Recipient Account Number or Identifying Number	6. Final Report	7. Basis
92-0153693		☐ 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)
December 1, 2003	**June 30, 2008**	**January 1, 2007**	**March 31, 2007**

10. Transactions Report the transactions for the budget period - not the whole project	I Previously Reported	II This Period	III Cumulative
a. Total outlays	$5,057,630	$688,366	$5,745,996
b. Recipient share of outlays	$3,314,214	$631,204	3,945,418
c. Federal share of outlays	1,743,416	57,162	1,800,578
d. Total unliquidated obligations			0
e. Recipient share of unliquidated obligations			0
f. Federal share of unliquidated obligations			0
g. Total federal share (Sum of lines c and f)			1,800,578
h. Total Federal funds authorized for this funding period			2,000,000
i. Unobligated balance of Federal funds (Line h minus line g)			$199,422

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
	13.500%	$5,062,551	$683,444	$235,590

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governin 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	Telephone (Area code, number and extension)
Karl B. Wood, Senior Regulatory Accountant	(360) 385-1733, ext. 128 karl.w@aptalaska.com
Signature of Authorized Certifying Official	**Date Report Submitted**
ACCEPTED	April 27, 2007

ENTERED