

FINANCIAL STATUS REPORT



1. Federal Agency and Organizational Element to Which Report is Submitted Denali Commission		2. Federal Grant or Other Identifying Number Assigned By Federal Agency 0073-DC-2002-126		OMB Approval No. 0348-0038	Page 1	of 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 92-0153693		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) April 1, 2002		To: (Month, Day, Year) December 31, 2006		9. Period Covered by this Report From: (Month, Day, Year) October 1, 2006		To: (Month, Day, Year) December 31, 2006
10. Transactions Report the transactions for the budget period - not the whole project				I Previously Reported	II This Period	III Cumulative
a. Total outlays				\$583,237	\$43,624	\$626,861
b. Recipient share of outlays						0
c. Federal share of outlays				\$583,237	\$16,763	600,000
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)						600,000
h. Total Federal funds authorized for this funding period						600,000
i. Unobligated balance of Federal funds (Line h minus line g)						\$0
11. Indirect Expense						
a. Type of Rate (Place "X" in appropriate box) <input type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input checked="" type="checkbox"/> Final <input type="checkbox"/> Fixed						
b. Rate 18.203%		c. Base \$531,036		d. Total Amount \$96,665		e. Federal Share \$93,640
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation. 11b Shows different than previously reported. This multi-year project has had indirect expenses applied at three different rates over its life. The total amount is what was actually applied and the rate calculated.						
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 Karl B. Wood, Senior Regulatory Accountant				Telephone (Area code, number and extension) (360) 385-1733, ext. 128 karl.w@aptalaska.com		
Signature of Authorized Certifying Official 				Date Report Submitted January 30, 2007		

ACCEPTED

ENTERED