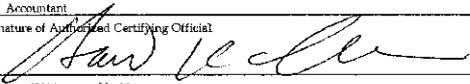


FINANCIAL STATUS REPORT
(Long Form)

1. Federal Agency and Organization Element to Which Report is Submitted Detail Commission	2. Federal Grant or Other Identifying Number Assigned By Federal Agency 0001-DC1999H Detail Commission Grant	OMB Approval No. 0348-0039	Page 1 of 1
3. Division of Energy, DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT 333 West Fourth Avenue, Ste 220, Anchorage, AK 99501-2341			
4. Employer Identification Number 92-6061185	5. Recipient Account Number or Identifying Number AR 55119-03 AR 56271 with PJ187575000	6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7. Basis <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual
8. Funding/Grant Period (See instructions) From: (Month, Day, Year) April 3, 1998	To: (Month, Day, Year) December 31, 1998	9. Period Covered by this Report From: (Month, Day, Year) June 30, 1999	To: (Month, Day, Year) September 30, 1999
10. Transactions:			
	I	II	III
	Previously Reported	This Period	Cumulative
a. Total outlays	0.00	671,527.23	671,527.23
b. Refunds, rebates, etc.	0.00	0.00	0.00
c. Program income used in accordance with this deduction alternative	0.00	0.00	0.00
d. Net outlays (Line a, less the sum of lines b and c)	0.00	671,527.23	671,527.23
Recipient's share of net outlays, consisting of:			
e. Third party (in-kind) contributions	0.00	0.00	0.00
f. Other federal awards authorized to be used to match this award	0.00	0.00	0.00
g. Program income used in accordance with the matching or cost sharing alternative	0.00	0.00	0.00
h. All other recipient outlays not shown on lines e, f or g STATE MATCH	0.00	360,116.48	360,116.48
i. Total recipient share of net outlays (Sum of lines e, f, g and h)	0.00	360,116.48	360,116.48
j. Federal share of net outlays (line d less line i)	0.00	311,410.75	311,410.75
k. Total unliquidated obligations			4,867,951.13
l. Recipient's share of unliquidated obligations			312,241.52
m. Federal share of unliquidated obligations			4,555,709.61
n. Total federal share (sum of lines j and m)			4,867,120.36
o. Total federal funds authorized for this funding period			16,500,000.00
p. Unobligated balances of federal funds (line o minus line n)			11,632,879.64
Program Income, consisting of:			
q. Disbursed program income shown on lines c and/or g above			0.00
r. Disbursed program income using the additional alternative			0.00
s. Undisbursed program income			0.00
t. Total program income realized (Sum of lines q, r and s)			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 in 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 Hanjoo Cho Accountant		Telephone (Area code, number and extension) (907) 269-4332	
Signature of Authorized Certifying Official 		Date Report Submitted 11/2/99	

Previous Editions not Usable

Standard form 269 (REV 4-88)
 Prescribed by OMB Circular A-102 and A-110

**REQUEST FOR ADVANCE
OR REIMBURSEMENT**

Approved by office of Management and Budget No. 80-R0183

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1 of 1

Denali Commission

1. TYPE OF PAYMENT REQUESTED	a. "x" one, or both boxes		2. BASIS OF REQUEST
	<input checked="" type="checkbox"/> ADVANCE	<input type="checkbox"/> REIMBURSEMENT	
	b. "x" the applicable box		
	<input type="checkbox"/> FINAL	<input checked="" type="checkbox"/> PARTIAL	<input type="checkbox"/> ACCRUAL

3. FEDERAL SPONSORING AGENCY AND ORGANIZATIONAL ELEMENT TO WHICH THIS REPORT IS SUBMITTED
Denali Commission

4. FEDERAL GRANT OR OTHER IDENTIFYING NUMBER ASSIGNED BY FEDERAL AGENCY
0001-DC1999-11

5. PARTIAL PAYMENT REQUEST NUMBER FOR THIS REQUEST

6. EMPLOYER IDENTIFICATION NUMBER 92-6001185	7. RECIPIENT'S ACCOUNT NUMBER OR IDENTIFYING NUMBER AR 55119-02 AR 56271 with PJ 15612, 15641, 15642, 15643, 15644	8. PERIOD COVERED BY THIS REQUEST	
		FROM (month, day, year) 7/1/99	TO (month, day, year) 9/30/99

9. RECIPIENT ORGANIZATION
**Division of Energy
333 West 4th Avenue, Suite 220
Anchorage, AK 99501-2341**

10. PAYEE (Where check is to be sent is different than item 9)

11. COMPUTATION OF AMOUNT OF REIMBURSEMENTS/ADVANCES REQUESTED

PROGRAMS/FUNCTIONS/ACTIVITIES	(a)	(b)	(c)	TOTAL
a. Total program outlays to date (As of date) 9/30/99				671,527.23
b. Less: Cumulative program income				0.00
c. Net program outlays (line a minus line b)				671,527.23
d. Estimated net cash outlays for advance period				0.00
e. Total (Sum of lines c & d)				671,527.23
f. Non-Federal share of amount on line e				360,116.48
g. Federal share of amount on line e				311,410.75
h. Federal payments previously requested				850,000.00
i. Federal share now requested (Line g minus line h)				0.00
j. Advances required by month, when requested by Federal grantor agency for use in making prescheduled advances	1st month			
	2nd month			
	3rd month			

12. ALTERNATE COMPUTATION FOR ADVANCES ONLY

a. Estimated Federal cash outlays that will be made during period covered by the advance	
b. Less: Estimated balance of Federal cash on hand as of beginning of advance period	
c. Amount requested (Line a minus line b)	

13. I certify that to the best of my knowledge and belief the data above are correct and that all outlays were made in accordance with the grant conditions or other agreement and that payment is due and has not been previously requested.	CERTIFICATION	
	SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL Joel Neimeyer Project Coordinator	DATE REQUEST SUBMITTED
	TYPED OR PRINTED NAME AND TITLE Terri Gauthner Project Assistant	TELEPHONE (AREA CODE, NUMBER, EXTENSION) (907) 269-4640

This space for agency use

**REQUEST FOR ADVANCE
OR REIMBURSEMENT**

Approved by office of Management and Budget No. 80-R0183

Page
1 of 1

Denali Commission

1 TYPE OF PAYMENT REQUESTED	a. "x" one, or both boxes		2. BASIS OF REQUEST
	<input checked="" type="checkbox"/> ADVANCE	<input type="checkbox"/> REIMBURSEMENT	
	b. "x" the applicable box		
	<input type="checkbox"/> FINAL	<input checked="" type="checkbox"/> PARTIAL	<input type="checkbox"/> ACCRUAL

3. FEDERAL SPONSORING AGENCY AND ORGANIZATIONAL ELEMENT TO WHICH THIS REPORT IS SUBMITTED
Denali Commission

4. FEDERAL GRANT OR OTHER IDENTIFYING NUMBER ASSIGNED BY FEDERAL AGENCY
0001-DC1999-11

5. PARTIAL PAYMENT REQUEST NUMBER FOR THIS REQUEST

6. EMPLOYER IDENTIFICATION NUMBER 92-6001185	7. RECIPIENT'S ACCOUNT NUMBER OR IDENTIFYING NUMBER AR 55119-02 AR 56271 with PJ 15612, 15641, 15642, 15643, 15644	8. PERIOD COVERED BY THIS REQUEST	
		FROM (month, day, year) 7/1/99	TO (month, day, year) 11/2/99

9. RECIPIENT ORGANIZATION
**Division of Energy
333 West 4th Avenue, Suite 220
Anchorage, AK 99501-2341**

10. PAYEE (Where check is to be sent is different than item 9)

11. COMPUTATION OF AMOUNT OF REIMBURSEMENTS/ADVANCES REQUESTED

PROGRAMS/FUNCTIONS/ACTIVITIES	(a)	(b)	(c)	TOTAL
a. Total program outlays to date (As of date 11/2/99)				1,210,116.48
b. Less: Cumulative program income				0.00
c. Net program outlays (line a minus line b)				1,210,116.48
d. Estimated net cash outlays for advance period				0.00
e. Total (Sum of lines c & d)				1,210,116.48
f. Non-Federal share of amount on line e				360,116.48
g. Federal share of amount on line e				850,000.00
h. Federal payments previously requested				850,000.00
i. Federal share now requested (Line g minus line h)				0.00
j. Advances required by month, when requested by Federal grantor agency for use in making prescheduled advances	Nov-99 1st month			1,018,878.00
	2nd month			
	3rd month			

12. ALTERNATE COMPUTATION FOR ADVANCES ONLY

a. Estimated Federal cash outlays that will be made during period covered by the advance	
b. Less: Estimated balance of Federal cash on hand as of beginning of advance period	
c. Amount requested (Line a minus line b)	

13. I certify that to the best of my knowledge and belief the data above are correct and that all outlays were made in accordance with the grant conditions or other agreement and that payment is due and has not been previously requested.	CERTIFICATION	
	SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL Joel Neimeyer Project Coordinator	DATE REQUEST SUBMITTED
	TYPED OR PRINTED NAME AND TITLE Terri Gauthner Project Assistant	TELEPHONE (AREA CODE, NUMBER, EXTENSION) (907) 269-4640

This space for agency use

Denali Commission		10/29/99	Denali Funding	10/29/99			11/1/99	11/1/99
Item	Project	Community	Original Allocation	Revised Advance	Redirected Costs	New Costs	Additional Obligations	Additional Advance
1	15699	Noorvik:	\$300,000		\$89,091	\$10,000	\$3,600	\$102,691
2	15644	Chefornak	\$200,000	\$400,000		\$10,000	\$100,000	\$110,000
3	15747	Emmonak	\$900,000	\$0		\$10,000		\$10,000
4	15738	Napaskiak	\$200,000			\$10,000		\$10,000
5	15215	Tuntatuliak(1)	\$400,000	\$245,000	\$45,561	\$10,000		\$55,561
6		Tuntatuliak(2)	\$200,000	\$0		\$10,000	\$71,000	\$81,000
7	15728	Tanana	\$900,000	\$0		\$10,000		\$10,000
8	15685	Arctic Village	\$600,000	\$0		\$10,000		\$10,000
9	15683	Kiana	\$1,500,000	\$180,000	\$7,385	\$10,000		\$17,385
10	15650	Nikolski	\$700,000	\$0		\$10,000		\$10,000
11	15749	Upper Kalskag	\$700,000	\$0		\$10,000		\$10,000
12	15748	Lower Kalskag	\$1,100,000	\$0		\$10,000		\$10,000
13	15750	Tooksook Bay	\$1,700,000	\$0		\$10,000		\$10,000
14	15682	Port Graham	\$600,000	\$0		\$10,000		\$10,000
15	15742	Deering Electrical Upgrade	\$400,000	\$25,000		\$80,000		\$80,000
16	15756	Golovin Electrical	\$330,400			\$174,000		\$174,000
	Subtotal		\$10,400,000	\$850,000	\$193,878	\$394,000	\$171,000	\$758,878
		Next 26 sites						
1		Buckland	\$2,200,000			\$10,000		\$10,000
2		Kotlik	\$2,600,000			\$10,000		\$10,000
3		Chignik Lagoon	\$1,000,000			\$10,000		\$10,000
4		Nikolai	\$650,000			\$10,000		\$10,000
5		Takotna	\$1,500,000			\$10,000		\$10,000
6		Old Harbor	\$900,000			\$10,000		\$10,000
7		Diomede	\$1,500,000			\$10,000		\$10,000
8		Arctic Village	\$600,000			\$10,000		\$10,000
9		Venetia	\$600,000			\$10,000		\$10,000
10		Chalkyitsik	\$650,000			\$10,000		\$10,000
11		BirchCreek	\$500,000			\$10,000		\$10,000
12		Rampart	\$500,000			\$10,000		\$10,000
13		Atka	\$1,200,000			\$10,000		\$10,000
14		Tununak	\$2,100,000			\$10,000		\$10,000
15		Toksook Bay	\$2,400,000			\$10,000		\$10,000
16		Konglgnak	\$2,000,000			\$10,000		\$10,000
17		Togiak	\$3,200,000			\$10,000		\$10,000
18		Aleknagik	\$500,000			\$10,000		\$10,000
19		Port Graham	\$600,000			\$10,000		\$10,000
20		Larsen Bay**	\$1,500,000			\$10,000		\$10,000
21		CrookedCreek	\$800,000			\$10,000		\$10,000
22		Red Devil	\$700,000			\$10,000		\$10,000
23		Angoon				\$10,000		\$10,000
24		Port Protection				\$10,000		\$10,000
25		Point Baker				\$10,000		\$10,000
26		Eagle				\$10,000		\$10,000
	Subtotal		\$28,200,000			\$260,000		\$260,000
		**The \$1.5 M includes the Cannery at 130,000 gallons.						
	Total							\$1,018,878