

**Public Law 102-477
FEDERAL FINANCIAL REPORT**

(Follow form instructions)

1. Federal Agency and Organizational Element to Which Report is Submitted Office of Indian Energy and Economic Development Division of Workforce Development	2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) GTK00T10110	Page 1	of 1
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3. Recipient Organization (Name and complete address including Zip code)
 Cook Inlet Tribal Council, Inc.
 3600 San Jeronimo Drive, Anchorage, AK 99508

4a. DUNS Number 826903221	4b. EIN 92-0094184	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment) 12-2-4XXX-10/11/12	6. Report Type <input type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input checked="" type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
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8. Project/Grant Period From: (Month, Day, Year) 10/1/2009	To: (Month, Day, Year) 9/30/2012	9. Reporting Period End Date (Month, Day, Year) 9/30/2014
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10. Transactions Cumulative

(Use lines a-c for single or multiple grant reporting)

Federal Cash (To report multiple grants, also use FFR Attachment):

a. Cash Receipts	\$27,721,481.52
b. Cash Disbursements	\$27,584,867.74
c. Cash on Hand (line a minus b)	\$136,613.78

(Use lines d-o for single grant reporting)

Federal Expenditures and Unobligated Balance:

d. Total Federal funds authorized	\$27,721,481.52
e. Federal share of expenditures	\$27,584,867.74
f. Federal share of unliquidated obligations	\$0.00
g. Total Federal share (sum of lines e and f)	\$27,584,867.74
h. Unobligated balance of Federal funds (line d minus g)	\$136,613.78

Recipient Share:

i. Total recipient share required	\$0.00
j. Recipient share of expenditures	\$0.00
k. Remaining recipient share to be provided (line i minus j)	\$0.00

Program Income:

l. Total Federal program income earned	
m. Program income expended in accordance with the deduction alternative	
n. Program income expended in accordance with the addition alternative	
o. Unexpended program income (line l minus line m or line n)	

11. Indirect Expense	a. Type	b. Rate	c. Period From		Period To		d. Base		e. Amount Charged	f. Federal Share
	Fixed	29.81%	5.35%	10/1/2012	9/30/2013					
Fixed	29.90%	5.71%	10/1/2013	9/30/2014	101,611.60	92,854.79	35,683.88		35,683.88	
g. Totals:					101,611.60	92,854.79	35,683.88		35,683.88	

12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation:

13. Certification: By signing this report, I certify that it is true, complete, and accurate to the best of my knowledge. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 218, Section 1001)

a. Typed or Printed Name and Title of Authorized Certifying Official Amy Fredeen, Chief Financial Officer & EVP	c. Telephone (Area code, number and extension) 907-793-3431 d. Email address afredeen@citci.org
b. Signature of Authorized Certifying Official 	e. Date Report Submitted (Month, Day, Year) 12/30/14 14. Agency use only:

Standard Form 425
 OMB Approval Number: 0348-0061
 Expiration Date: 10/31/2011

Paperwork Burden Statement
 According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collecti

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FEDERAL FINANCIAL REPORT

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12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation: An adjustment made at 9/30/2013, resulted in an overdraw of funds. Funds were returned via payment mgmt system, reference #2049597771 on 11/04/2013.																																										
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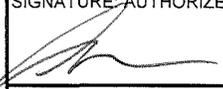
Paperwork Burden Statement

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Tribal Temporary Assistance for Needy Families (TANF) ACF – 102-477 Financial Report 12g

TRIBE NAME Cook Inlet Tribal Council, Inc.	FISCAL YEAR 2014	FISCAL YEAR 2013	Total	Employer ID Number (EIN) 92-0094184
GRANT DOCUMENT NUMBER (BIA) A13AV00172				
REPORTING ITEMS	(A) FEDERAL TFAG FUNDS	(B) Federal funds		(C) STATE CONTRIBUTED MOE FUNDS [OPTIONAL]
1. TOTAL AWARDED	-	5,428,077	5,428,077	4,026,003
2. CASH ASSISTANCE	-	-	-	3,400,298
3. OTHER ASSISTANCE EXPENDITURES	459,734	920,306	1,380,040	-
4. TOTAL NON-ASSISTANCE EXPENDITURES	11,583	13,179	24,762	-
5. ADMINISTRATION	372,136	977,888	1,350,024	625,705
6. SYSTEMS	-	-	-	
7. OTHER EXPENDITURES	812,927	1,860,324	2,673,251	
8. TRIBAL REPLACEMENT FUNDS		\$		
9. FEDERAL UNLIQUIDATED OBLIGATIONS	-			

THIS IS TO CERTIFY THAT THE INFORMATION REPORTED ON ALL PARTS OF THIS FORM IS ACCURATE AND TRUE TO THE BEST OF MY KNOWLEDGE

SIGNATURE: AUTHORIZED TRIBAL OFFICIAL 	SUBMITTAL: TYPED [X] NEW [] Amended	Amy Fredeen Chief Financial Officer & EVP
DATE SUBMITTED: 12/31/14		

*Tribes must fill in Column (B) if it is subject to a penalty and corresponding reduction in its Tribal Family Assistance Grant (TFAG).

Data for lines 10 to 12 will be completed by the Federal Awarding Agency

REPORTING ITEMS	(A) FEDERAL TFAG FUNDS	(B) TRIBAL FUNDS [OPTIONAL]*		(C) STATE CONTRIBUTED MOE FUNDS [OPTIONAL]
10. TOTAL EXPENDITURES ON ASSISTANCE	\$	\$		\$
11. TOTAL EXPENDITURES	\$	\$		\$
12. FEDERAL UNOBLIGATED BALANCES	\$			

 Optional
 No Response Necessary

Tribal Temporary Assistance for Needy Families (TANF) ACF - 102-477 Financial Report 12g

TRIBE NAME Cook Inlet Tribal Council, Inc.	FISCAL YEAR 2014	FISCAL YEAR ENDING DATE	Employer ID Number (EIN) 92-0094184
GRANT DOCUMENT NUMBER (BIA) A13AV00172			

REPORTING ITEMS	(A) FEDERAL TFAG FUNDS	(B) TRIBAL FUNDS [OPTIONAL]*	(C) STATE CONTRIBUTED MOE FUNDS [OPTIONAL]
1. TOTAL AWARDED	\$5,591,317	\$	\$4,187,482.09
2. CASH ASSISTANCE	\$429,557	\$	\$3,482,161.05
3. OTHER ASSISTANCE EXPENDITURES	\$996,306	\$	\$0.00
4. TOTAL NON-ASSISTANCE EXPENDITURES	\$55,632	\$	\$0.00
5. ADMINISTRATION	\$1,036,904	\$	\$705,321.04
6. SYSTEMS	\$0	\$	\$0.00
7. OTHER EXPENDITURES	\$2,082,397	\$	\$0.00
8. TRIBAL REPLACEMENT FUNDS		\$	
9. FEDERAL UNLIQUIDATED OBLIGATIONS	\$0		

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SIGNATURE: AUTHORIZED TRIBAL OFFICIAL 	SUBMITTAL: [X] NEW [] REVISED	TYPED Amy Fredeen Chief Financial Officer & EVP
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10. TOTAL EXPENDITURES ON ASSISTANCE	\$	\$	\$
11. TOTAL EXPENDITURES	\$	\$	\$
12. FEDERAL UNOBLIGATED BALANCES	\$		

 Optional
 No Response Necessary

FY14 P.L. 102-477 Annual Report

Cook Inlet Tribal Council, by authorizing signature, CERTIFIES to the following:

None of the funds in the approved budget which originated in Section 401 or Title IIB of the Job Training Partnership Act were used in violation of the Act's prohibition on the use of funds for economic development activities (Section 141(q)).

None of the funds in the approved budget which originated in Section 401 or Title IIB of the Job Training Partnership Act were used in violation of the Act's restriction on assisting employer relocations (Section 141 (c)).

Program income was not earned.

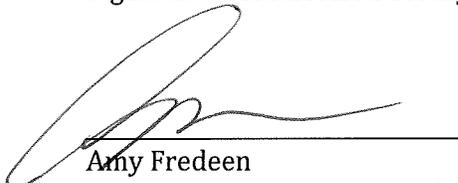
No refunds or rebates were received.

\$1,409,041 was budgeted for Tribal TANF administrative costs

\$430,657 was budgeted for other administrative costs

Child Care and Development Funds were used for appropriate Child Care Development related activities.

Signature of Authorized Certifying Officer:



Amy Fredeen

Executive Vice President and Chief Financial Officer

12/31/14
Date