

FINANCIAL STATUS REPORT

1. Organizational Element to Which Report is Submitted Dept. of Interior: Economic Develop		2. Federal grant or Other Identifying Number assigned by Federal Agency Yr 3 of 3 Yakutat Tlingit Tribe 102-477 Plan		OMB Approved No. 0348-0038	Page of 1 1 pages
3. Recipient Organization (Name and complete Address, Including ZIP code) Yakutat Tlingit Tribe P.O. Box 418 606 Forest Hwy. 10 Yakutat, AK. 99689					
4. Employer Identification Number 9 2 0 1 7 0 7 3 5		5. Recipient Account Number of Identifying Number		6. Final Report _x_ Yes ___ No	7. Basis _x_ Cash ___ Accrual
8. Funding/Grant Period (See Instructions) From: (Month, Day, Year) April 01'12 to: March 31'15			9. Period covered by this Report From: (Month, Day, Year) April 01'14		To: (Month, Day, Year) Mar. 31, '15
10. Transactions:			I Previously Reported	II This Period	III Cumulative
a. Total Outlays			799,884	356788	1,156,672
b. Recipients share of outlays			0	0.00	0
c. Federal share of outlays			799,884	356,788	1,156,672
d. Total unliquidated obligations					0
e. Recipient share of unliquidated obligations					0
f. Federal share of unliquidated outlays					0
g. Total Federal share (sum of lines c and f)					1,156,672
h. Total Federal funds authorized for this funding period					1,156,672
i. Unobligated balance of Federal Funds this funding period					-
11. Indirect Expense	a. Type of Rate (Place "x" in appropriate box)				Carry-Forward
	Provisions	Predetermined	Final	<input checked="" type="checkbox"/> Fixed	
	b. Rate 13.2381	c. Base '14-15 272,051	d. Total Amount 71,420	e. Federal Share 71,420	
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation. CY14 Indirect not Negotiated yet. The Yakutat Tlingit Tribe operates on a Calendar year, so our Indirect cost rate run Jan. - Dec. each year.					
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 Nellie Vale, Chief Financial Officer			cc: Victoria Demmert, President Sasha Vale, 477 Director		Telephone (Area code), number and extension (907)784-3932/3238 fax: 784-3595
Signature of Authorized Certifying Official <i>Nellie Vale</i>			Bert Adams, Jr., General Manager		Date Report Submitted 07/02/15