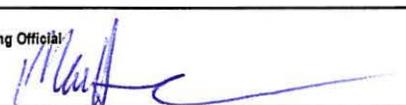


**PUBLIC LAW 102-477
FINANCIAL STATUS REPORT
(Follow instructions provided)**

1. Federal Agency and Organizational Element to Which Report is Submitted BUREAU OF INDIAN AFFAIRS	2. Federal Grant or Other Identifying Number Assigned By Federal Agency	OMB Approval No. 1076-0135	Page 1	of 1	pages 1
3. Recipient Organization (Name and complete address, including ZIP code) ALEUTIAN PRIBILOF ISLANDS ASSOCIATION, INC. 1131 East International Airport Road ANCHORAGE, AK 99518-1408					
4. Employer Identification Number 92-0073013	5. Recipient Account Number or Identifying Number	6. Final Report <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7. Basis <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual		
8. Funding/Grant Period (See Inst) From: (Month, Day, Year) 10/01/12	To: (Month, Day, Year) 09/30/15	9. Period Covered by this Report From: (Month, Day, Year) 10/01/13	To: (Month, Day, Year) 09/30/14		
10. Transactions:		I Previously Reported	II This Period	III Cumulative	
a. Total Outlays		469,566.26	438,133.71	907,699.96	
b. Recipient share of outlays				0.00	
c. Federal share of outlays		469,566.26	438,133.71	907,699.96	
d. Total unliquidated obligations				0.00	
e. Recipient share of unliquidated obligations					
f. Federal share of unliquidated obligations				0.00	
g. Total Federal share (Sum lines c and f)				907,699.96	
h. Total Federal funds authorized for this funding period				946,702.39	
i. Unobligated balance of Federal funds (Line h minus line g)				39,002.43	
11. Indirect Expense	a. Type of Rate (Place "x" in appropriate box) <input checked="" type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed				
	b. Rate 36.80%/52.9%/36.7%/47%	c. Base 143,949.03 / 167,767.64 / 123,943.47 / 205,016.98	d. Total Amount 52,973.24 / 83,463.80 / 44,247.82 / 96,367.98	e. Federal Share 277,032.84	
12. Remarks: See instructions, Section 12 a.-e for required attachments. Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation. Report Revised to cover the period 10/1/2012 to 9/30/2015 only					
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 Mark Hamm, Chief Financial Officer			Telephone (Area code, number and extension) (907) 276-2700		
Signature of Authorized Certifying Official 			Date Report Submitted 10/30/14		