FEDERAL FINANCIAL REPORT

(Follow form instructions)

Federal Agency and Organizational Element			Federal Grant or Other Identifying Number Assigned by Federal Agency Page						of	
to Which Report is Submitted			(To report multiple grants, use FFR Attachment)					1		
	•									
			ŀ							
US Department of the Interion Office of Surface Mining			S10AP16187-0001-G310						pages	
		e and complete address include	ling Zip code)							
		, Department of Environmenta								
		n Management, P.O. Box 206		17105-2063						
					s as Identifying Number	e p	6. Report Type 7. Basis of Accounting			
4a. DUNS Number 4b. EIN		5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)			0, 1	o. Hoport Typo				
			(10 teport manapie grants, aso 11 termionis)			☐ Quarterly				
						I .	D Semi-Annual			
						D Annual				
135668887		23-2632825	V120	600		X Fi		☐ Cash X A	ccrual	
8. Project/Gran	nt Period	10 1001010	1	<u> </u>			9. Reporting Period End Date			
, ,	ith, Day, Year)		To: (Month, Day, Year)			(Month, Day, Year)				
10/1/2009			9/30/2010			9/30/2010				
10. Transact			1 111111					Cumulative		
		ultiple grant reporting)								
<u> </u>			4							
		tiple grants, also use FFR At	tacnment):				1	\$10.6	646,250.29	
a. Cash Receipts							1		346,250.29	
b. Cash Disbursements c. Cash on Hand (line a minus b)							 	Ψ10,	\$0.00	
							1		40.00	
<u> </u>	for single grant									
Federal Expenditures and Unobligated Balance:								¢11 /	180 117 00	
d. Total Federal funds authorized							\$11,469,117.00 \$10,646,250.29			
e. Federal share of expenditures								\$0,00		
f. Federal share of unliquidated obligations									346,250.29	
g. Total Federal share (sum of lines e and f) h. Unobligated balance of Federal funds (line d minus g)							 	\$822,866.71		
Recipient Sh		ederar fallas fillio a milias 8)								
\vdash		ired						\$10.6	346,329.47	
i. Total recipient share required j. Recipient share of expenditures									\$10,646,329.47	
		to be provided (line i minus j)							\$0.00	
Program Inco	· T	7								
	eral program inco	me earned							\$0.00	
m. Program income expended in accordance with the deduction alternative								\$0.00		
n. Program	income expende	d in accordance with the additi	on alternative						\$0.00	
o, Unexpen	ded program inco	ome (line I minus line m or line	n)						\$0.00	
	а. Туре	b. Rate	c. Period From	Period To	d. Base	e. Amount	Charged	f. Federal Share		
11. Indirect	Fixed	29.52%	7/1/2009		5,269,300.07		497.38	1,555,497.38		
Expense	Fixed	28.00%	7/1/2010	6/30/2011	2,258,486.68	632	376.27	632,376.27		
				g. Totals:	7,527,786.75		2,187,873.65		187,873.65	
12. Remarks:	Attach any explai	nations deemed necessary or i	information requi	red by Federal	sponsoring agency in con	npliance with	governing legisl	ation:		
		this report, I certify that it is								
any faise,	fictitious, or fra	udulent information may sub	ject me to crīmi	inal, civil, or a	dministrative penalities.					
a. Typed or Pri	nted Name and T	itle of Authorized Certifying O	fficial			c. Telepho	ne (Area code, i	number and extens	ion)	
Ronald Hoy, Co	mmonwealth Acc	countant Manager				(717) 425-6781				
Central Agencia	es, Recreation & I	Protection				d, Email address				
		A				rhoy@state	•			
b. Signature of Authorized Certifying Official							e. Date Report Submitted (Month, Day, Year)			
		172	1 Wall Hold				6/3	RO/11		
		<u> </u>	WWW	474-		14. Agency	use only			
				(]					7	

Standard Form 425

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

Paperwork Burden Statement

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 collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.5 hours per response, including time for reviewing instructions,
searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other
aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0061), Washington, DC 20503.