

FINANCIAL STATUS REPORT
(Long Form)

(Follow instructions on the back)

1. Federal Agency and Organizational Element to Which Report is Submitted Department of Education		2. Federal Grant or Other Identifying Number Assigned By Federal Agency S349A050031		OMB Approval No 0348-0039	Page of 1 1 pages
3. Recipient Organization (Name and complete address, including ZIP code) The University of Texas at Brownsville; 80 Fort Brown; Brownsville, TX 78520					
4. Employer Identification Number 74-2759269		5. Recipient Account Number or Identifying Number 22-3-1-450340-4200		6. Final Report <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
7. Basis <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual					
8. Funding/Grant Period (See instructions) From: (Month, Day, Year) 9/1/2005		To: (Month, Day, Year) 8/31/2008		9. Period Covered by this Report From: (Month, Day, Year) 9/1/2005	
To: (Month, Day, Year) 8/31/2006					
10. Transactions:					
		I Previously Reported	I This Period	III Cumulative	
a. Total outlays			2,014,864.68	2,014,864.68	
b. Refunds, rebates, etc.				0.00	
c. Program income used in accordance with the deduction alternative				0.00	
d. Net outlays (Line a, less the sum of lines b and c)		0.00	2,014,864.68	2,014,864.68	
Recipient's share of net outlays, consisting of:					
e. Third party (in-kind) contributions			1,007,432.34	1,007,432.34	
f. Other Federal awards authorized to be used to match this award				0.00	
g. Program income used in accordance with the matching or cost sharing alternative				0.00	
h. All other recipient outlays not shown on lines e, f or g				0.00	
i. Total recipient share of net outlays (Sum of lines e, f, g and h)		0.00	1,007,432.34	1,007,432.34	
j. Federal share of net outlays (line d less line i)		0.00	1,007,432.34	1,007,432.34	
k. Total unliquidated obligations					
l. Recipient's share of unliquidated obligations					
m. Federal share of unliquidated obligations					
n. Total Federal share (sum of lines j and m)				1,007,432.34	
o. Total Federal funds authorized for this funding period				4,812,227.00	
p. Unobligated balance of Federal funds (Line o minus line n)				3,804,794.66	
Program income, consisting of:					
q. Disbursed program income shown on lines c and/or g above				0.00	
r. Disbursed program income using the addition 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 checked="" type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed			
		b. Rate 8%	c. Base 908,802.99	d. Total Amount 72,704.23	e. Federal Share 72,704.23
12. Remarks. Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.					
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 Yolanda De la Riva, Director of Business Affairs				Telephone (Area code, number and extension) (956) 882-7242	
Signature of Authorized Certifying Official 				Date Report Submitted September 25, 2007	

FINANCIAL STATUS REPORT

(Long Form)

(Follow instructions on the back)

1 Federal Agency and Organizational Element to Which Report is Submitted Department of Education		2 Federal Grant or Other Identifying Number Assigned By Federal Agency S349A050031			OMB Approval No. 0348-0039	Page of 1 1 pages
3 Recipient Organization (Name and complete address, including ZIP code) The University of Texas at Brownsville, 80 Fort Brown, Brownsville, TX 78520						
4 Employer Identification Number 74-2759269		5 Recipient Account Number or Identifying Number 22-3-1-450340-4200		6 Final Report <input type="checkbox"/> Yes <input type="checkbox"/> No		7 Basis <input type="checkbox"/> Cash <input type="checkbox"/> Accrual
8 Funding/Grant Period (See instructions) From: (Month, Day, Year) 9/1/2005		To: (Month, Day, Year) 8/31/2006		9 Period Covered by this Report From (Month, Day, Year) 9/1/2006		To: (Month, Day, Year) 8/31/2007
10 Transactions				I Previously Reported	I This Period	III Cumulative
a Total outlays				2,014,864.68	4,016,038.34	6,030,903.02
b Refunds, rebates, etc.				0.00	0.00	0.00
c Program income used in accordance with the deduction alternative				0.00	0.00	0.00
d Net outlays (Line a less the sum of lines b and c)				2,014,864.68	4,016,038.34	6,030,903.02
Recipient's share of net outlays, consisting of:						
e Third party (in-kind) contributions				1,007,432.34	2,008,019.00	3,015,451.34
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				0.00	0.00	0.00
i Total recipient share of net outlays (Sum of lines e, f, g and h)				1,007,432.34	2,008,019.00	3,015,451.34
j Federal share of net outlays (line d less line i)				1,007,432.34	2,008,019.34	3,015,451.68
k Total unliquidated obligations						0.00
l Recipient's share of unliquidated obligations						0.00
m Federal share of unliquidated obligations						0.00
n Total Federal share (sum of lines j and m)						3,015,451.68
o Total Federal funds authorized for this funding period						4,812,227.00
p Unobligated balance of Federal funds (Line o minus line n)						1,796,775.32
Program Income, consisting of:						
q Disbursed program income shown on lines c and/or g above						0.00
r Disbursed program income using the addition 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 checked="" type="checkbox"/> Provisional <input type="checkbox"/> Predetermined <input type="checkbox"/> Final <input type="checkbox"/> Fixed				
		b Rate 8%	c Base 1,682,845.10	d Total Amount 134,627.61	e Federal Share 134,627.61	
12. Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation						
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 Yolanda de la Riva, Director of Business Affairs				Telephone (Area code, number and extension) 956-882-7644		
Signature of Authorized Certifying Officer 				Date Report Submitted November 26, 2007		