



e-FILING REPORT COVER SHEET

COMPANY NAME:

DOES REPORT CONTAIN CONFIDENTIAL INFORMATION? No Yes If yes, submit a redacted public version (or a cover letter) by email. Submit the confidential information as directed in OAR 860-001-0070 or the terms of an applicable protective order.

Select report type: RE (Electric) RG (Gas) RW (Water) RT (Telecommunications)
RO (Other, for example, industry safety information)

Did you previously file a similar report? No Yes, report docket number:

Report is required by: OAR
Statute
Order

Note: A one-time submission required by an order is a compliance filing and not a report (file compliance in the applicable docket)

Other
(For example, federal regulations, or requested by Staff)

Is this report associated with a specific docket/case? No Yes, docket number:

List Key Words for this report. We use these to improve search results.

Send the completed Cover Sheet and the Report in an email addressed to PUC.FilingCenter@state.or.us

Send confidential information, voluminous reports, or energy utility Results of Operations Reports to PUC Filing Center, PO Box 1088, Salem, OR 97308-1088 or by delivery service to 201 High Street SE Suite 100, Salem, OR 97301.



BUDGET OF EXPENDITURES REPORT FOR THE YEAR 2020

GENERAL INSTRUCTIONS

1. A Budget of Expenditures Report must be submitted by all utilities operating within the State of Oregon in accordance with Oregon Revised Statute 757.105.
2. The Budget of Expenditures Report should be completed and filed with the Public Utility Commission of Oregon Filing Center. Complete the e-Filing Report Cover Sheet found at: http://www.puc.state.or.us/eFiling/eReports/efiling_report_cover_sheet_FM050.pdf. Email both the report and cover sheet to PUC.FilingCenter@state.or.us no later than March 31st.
3. Each section should be completed fully and accurately. Where the words "None" or "Not Applicable" truly and completely state the fact, they should be given as the answer.
4. Any additional statements or explanatory remarks should be included in the email as an attachment in Microsoft Word document format or text-searchable PDF.
5. Expenditures should be referenced by the applicable account number of the Uniform System of Accounts, adopted by the Commission, and to which the utility is subject.
6. All entries should be typewritten or made with permanent ink.
7. Report all amounts in whole dollars only, omit cents.

FULL NAME OF UTILITY Cascade Natural Gas Corporation				
ADDRESS OF PRINCIPAL OFFICE 8113 W. Grandridge Blvd		CITY Kennewick	STATE WA	ZIP CODE 99336
ADDRESS OF PRINCIPAL OFFICE IN OREGON (IF OTHER THAN ABOVE)		CITY	STATE	ZIP CODE
STATE OF INCORPORATION Washington	DATE OF INCORPORATION January 2, 1953	TYPE OF ORGANIZATION IF NOT INCORPORATED Incorporated		DATE ORGANIZED

STATE THE CLASSES OF UTILITY AND OTHER SERVICES FURNISHED BY THE UTILITY IN EACH STATE IN WHICH THE UTILITY OPERATES

Natural Gas Distribution in Washington and Oregon

DIRECTORS AT DATE OF BUDGET			
NAME OF DIRECTOR	CITY AND STATE OF RESIDENCE	LENGTH OF TERM	TERM EXPIRES
David L. Goodin	Bismarck, ND	1 Year	*** Directors are re-elected at Cascade's Annual meeting
Nicole A. Kivisto	Bismarck, ND	1 Year	
Daniel S. Kuntz	Bismarck, ND	1 Year	
Jason L. Vollmer	Bismarck, ND	1 Year	

CONFIDENTIAL

Annual Salary and Other Compensation of Officers and Retired Executives

Next 5 Pages

DONATIONS AND MEMBERSHIPS

INSTRUCTIONS: List all donations and membership expenditures proposed to be made by the utility during the coming year and the accounts to be charged. Give the name of each organization to whom a payment is to be made except that items less than \$1000 may be consolidated by category stating the number of organizations included. Group expenditures under headings such as:

1. Contributions to and memberships in charitable organizations
2. Organizations of the utility industry
3. Technical and professional organizations
4. Commercial and trade organizations
5. All other organizations and kinds of donations and contributions

List by type and group the accounts charged. Report whole dollars only. Provide a total for each group.

NAME OF ORGANIZATION, CITY AND STATE	ACCOUNT NUMBER	TOTAL AMOUNT	AMOUNT ASSIGNED TO OREGON
<u>Contributions to/Membership in Charitable Organizations</u>			
Various agencies participating in Cascade's Winter Help Fund	426.1	50,000	12,475
MDU Resources Foundation	426.1	100,000	31,188
Various Second Harvest	426.1	7,500	1,871
Misc. Under \$ 1,000	880/921	<u>2,500</u>	<u>4,616</u>
Total		160,000	39,920
<u>Organizations of the Industry</u>			
American Gas Association			
Association of WA Business	401/426/930	118,000	29,441
Bend Chamber	401/930	31,100	7,759
Cleantech Alliance	401/930	7,500	1,871
Edison Electric Institute	401/930	2,600	649
Grandridge Business Park	401/930	3,000	749
Home Builders Assoc	401/921	10,000	2,495
KEDA	401/908	8,000	1,996
Northwest Gas Association	401/930	2,500	624
Oregon Business & Industry	401/930	55,000	13,723
Snake River Econ Dev	401/930	1,300	324
Sustainable Connections	401/930	1,000	250
Tri City Development Council	401/908	5,000	1,248
Tri City Regional Chamber	401/930	10,000	2,495
Western Energy Dues	401/930	15,000	3,743
Misc. Under \$ 1,000	401/930	10,000	2,494
	401/930/426/908	<u>2,000</u>	<u>498</u>
Total			
<u>Economic Development</u>			
Ed Co		282,000	70,359
EDASC			
Misc. Under \$ 1,000	426	2,500	624
	426	7,500	1,871
Total	426	<u>39,000</u>	9,731
	426	49,000	12,226
<u>Professional Organization Dues</u>			
NACES International			
Tri-City Regional Chamber			
MGP Consortium	401/921	2,000	499
North American Energy Standard	401/921	1,100	274
Misc. Under \$ 1,000	401/921	2,500	624
	401/921	7,500	1,871
Total	401/921/908/880	<u>1,000</u>	<u>250</u>
		14,100	3,518

EXPENDITURES FOR PENSIONS OR A TRUST TO PROVIDE PENSIONS

INSTRUCTIONS: List all proposed payments to persons or trusts to provide pensions for employees and officers. Show all administrative and actuarial costs for formal pension plan. Give a brief description of the plan and show charges for current service costs, past service costs, and future service costs. Report whole dollars only.

PENSION FUND PAYMENTS MADE TO	ACCOUNT NUMBER	TOTAL AMOUNT	AMOUNT ASSIGNED TO OREGON
<p>Cascade Natural Gas Corporation Retirement Trust-Non-Service Costs (The amount shown represents the estimated accrual for fiscal year 2020, as developed by our actuary, under the provisions of SFAS No. 87. Funding amounts are not yet known).</p>	<p>926 5195</p>	<p>-198,487</p>	<p>-49,523</p>
<p>Postretirement Medical Benefits Plan-Non-Service Costs (The amount shown represents the estimated accrual for fiscal year 2020, as developed by our actuary, under the provisions of SFAS No. 87. Funding amounts are not yet known).</p>	<p>926 5196</p>	<p>-501,699</p>	<p>-125,174</p>
<p>Postretirement Medical Benefits Plan-Service Costs (The amount shown represents the estimated accrual for fiscal year 2020, as developed by our actuary, under the provisions of SFAS No. 87. Funding amounts are not yet known).</p>	<p>926 5198</p>	<p>30,831</p>	<p>7,692</p>
<p>Cascade Natural Gas Corporation Retirement Savings Plan and Trust (401(k))</p>	<p>926 5197</p>	<p>2,664,000</p>	<p>664,668</p>
<p>Supplemental Executive Retirement Plan (The amount shown represents the estimated accrual for fiscal year 2020, as developed by our actuary, under the provisions of SFAS No. 87. Funding amounts are not yet known).</p>	<p>926 5921</p>	<p>614,184</p>	<p>153,239</p>

POLITICAL ADVERTISING

INSTRUCTIONS: List all proposed payments for advertising the purpose of which is to aid or defeat any measure before the people or to promote or prevent the enactment of any national, state, district, or municipal legislation. Give the specific purpose of such advertising, when and where to be placed, and the account or accounts to be charged. Report who dollars only.

None

POLITICAL CONTRIBUTIONS

INSTRUCTIONS: List all proposed payments or contributions to persons and organizations for the purpose of aiding or defeating any measure before the people or to promote or prevent the enactment of any national, state, district, or municipal legislation. The purpose of all contributions or payments should be clearly explained. Report whole dollars only.

Acct Number 426

\$ 0.00 Total System \$ 0.00 Oregon - for the promotion and/or evaluation of current or pending legislation

EXPENDITURES AND MAJOR CONTRACTS FOR THE PURCHASE OR SALE OF EQUIPMENT

INSTRUCTIONS: List all proposed expenditures and major contracts for the purchase or sale of equipment. Give the name and address of the person or organization with whom it is proposed to have such dealings and the account or accounts charged. Describe fully the equipment to be purchased or sold. Do not report estimates of routine construction projects. Limit the report to major contracts and expenditures. Report whole dollars only.

NAME AND ADDRESS OF PERSON OR ORGANIZATION, DESCRIPTION OF EQUIPMENT	ACCOUNT NUMBER	TOTAL AMOUNT	AMOUNT ASSIGNED TO OREGON
Vehicle Purchase and Replacement	392	2,315,000	570,000
Power Equipment Purchase and Replacement	396	<u>2,086,085</u>	<u>605,105</u>
Total 392/396		4,401,085	1,175,105
<i>Description of Vehicles/Equipment to be Purchased</i>			
2020 ½ Ton Truck (10 * \$ 35,000)	392	350,000	140,000
2020 ½ Ton Truck (1 * \$ 60,000)	392	60,000	0
2020 Cargo Vans (asst) (5 * \$ 60,000)	392	300,000	60,000
2020 ¾ Ton Truck (10 * \$ 60,000)	392	600,000	240,000
2020 Weld Truck (1 * \$ 120,000)	392	120,000	0
2020 Dump Truck (2 * \$ 130,000)	392	260,000	0
2020 Transits (3 * \$ 60,000)	392	180,000	60,000
2020 Suburban (1 * \$ 60,000)	392	60,000	0
2020 Escape (4 * \$ 35,000)	392	140,000	0
2020 Explorer (4 * \$ 35,000)	392	140,000	0
2020 Express (1 * \$ 70,000)	392	70,000	70,000
2020 4300 (1 * \$ 35,000)	392	<u>35,000</u>	<u>0</u>
Total 392		2,315,000	570,000
Skidsteer (3 * \$ 40,660)	396	121,980	121,980
Mini-Excavator (Asst) (17 * \$ 58,315)	396	991,355	291,575
Backhoe/Loaders (10 * \$ 88,275)	396	<u>882,750</u>	<u>176,550</u>
		1,996,085	59,105
All non-major contracts/expenditures 396	396	90,000	15,000
Total 396		2,086,085	605,105

EXPENDITURES TO ANY PERSON OR ORGANIZATION HAVING AN AFFILIATED INTEREST FOR SERVICES, ETC.

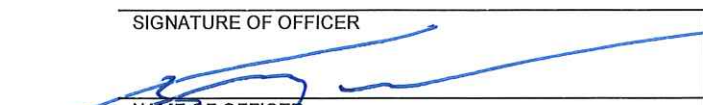
INSTRUCTIONS: Report all proposed expenditures to any person or organization having an affiliated interest for service. Advice, auditing, association, sponsoring, engineering, managing, operating, financial, legal or other services. See Oregon Revised Statutes 757.015 and 759.010 for definition of "Affiliated Interest." Give reference if such proposed expenditures have in the past been approved by the Commission. Describe the services to be received and the account or accounts to be charged. Report whole dollars only.

NAME AND ADDRESS OF PERSON OR ORGANIZATION. DESCRIPTION OF SERVICES	ACCOUNT NUMBER	TOTAL AMOUNT	AMOUNT ASSIGNED TO OREGON
MDU Resources Corporate level expenditures (Legal, Auditing, Management, etc.)	9302	5,622,414	1,402,793
Montana-Dakota Utilities and Intermountain Gas Company Utility Group Level Expenditures (Information Technology, Customer Service Center, Management, etc.)	9030/9210/ 9302	16,355,957	4,080,811

CERTIFICATION

The foregoing report must be certified by an Officer of the reporting company.

I certify that this Budget of Expenditures Report has been prepared under my direction, that I have carefully examined the report and declare it to be a complete and correct estimate of company expenditures for the coming year, to the best of my knowledge, information, and belief.

	DATE
NAME OF OFFICER	3-11-20
ERIC MARTUSCELLI	DATE
	3-11-20