No. C 184875		Due no later than Oct 31, 2015 Annual Report Form 1. Mailing Address: Correct in this box if needed. KNIFE RIVER CORPORATION - NORTHWEST BONNIE M SCHALL 1150 WEST CENTURY AVENUE BISMARCK ND 58503 USA		2. Registered A	2. Registered Agent and Address (NO PO BOX)			
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE				C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705 3. New Registered Agent Signature:*				
4. Corporations: Enter Na	mes and Busin	ess Addresses of Presi	dent, Secretary, and Directors. Treasure	er (optional).				
Office Held	Name		Street or PO Address	City	State	Country	Postal Code	
TREASURER DIRECTOR DIRECTOR PRESIDENT SECRETARY DIRECTOR	NANCY K CH DAVID C BA PAUL K SAN BRIAN R GR PAUL K SAN NANCY K CH	RNEY IDNESS LAY IDNESS	1150 WEST CENTURY AVENUE 1150 WEST CENTURY AVENUE 1200 WEST CENTURY AVENUE 32260 OLD HIGHWAY 34 1200 W CENTURY AVE 1150 WEST CENTURY AVENUE	BISMARCK BISMARCK BISMARCK TANGENT BISMARCK BISMARCK	ND ND ND OR ND ND	USA USA USA USA USA USA	58503 58503 58503 97389 58503 58503	
5. Organized Under the Laws of: OR C 184875		6. Annual Report mus Signature: Nancy k Name (type or prin			09/25/2015 Treasurer			
Processed 09/25/2015 * Electronically provided signatures are accepted as original signatures.								