

COMMONWEALTH OF KENTUCKY
BEFORE THE PUBLIC SERVICE COMMISSION

In the Matter of:

ELECTRONIC APPLICATION OF KENTUCKY)
UTILITIES COMPANY FOR AN ADJUSTMENT OF ITS) CASE NO.
ELECTRIC RATES AND FOR CERTIFICATES OF) 2016-00370
PUBLIC CONVENIENCE AND NECESSITY)

ELECTRONIC APPLICATION OF LOUISVILLE GAS AND)
ELECTRIC COMPANY FOR AN ADJUSTMENT OF ITS) CASE NO.
ELECTRIC AND GAS RATES AND FOR CERTIFICATES) 2016-00371
OF PUBLIC CONVENIENCE AND NECESSITY)

COMMISSION STAFF'S FOURTH REQUEST FOR INFORMATION
TO KENTUCKY UTILITIES COMPANY AND LOUISVILLE GAS AND ELECTRIC
COMPANY

Kentucky Utilities Company and Louisville Gas and Electric Company ("KU/LG&E"), pursuant to 807 KAR 5:001, are to file with the Commission an original and six copies in paper medium and an electronic version of the following information. The information requested herein is due within ten days of the date of this request. Responses to requests for information in paper medium shall be appropriately bound, tabbed and indexed. Each response shall include the name of the witness responsible for responding to the questions related to the information provided.

Each response shall be answered under oath or, for representatives of a public or private corporation or a partnership or association or a governmental agency, be accompanied by a signed certification of the preparer or the person supervising the preparation of the response on behalf of the entity that the response is true and

accurate to the best of that person's knowledge, information, and belief formed after a reasonable inquiry.

KU/LG&E shall make timely amendment to any prior response if they obtain information which indicates that the response was incorrect when made or, though correct when made, is now incorrect in any material respect. For any request to which KU/LG&E fail or refuse to furnish all or part of the requested information, they shall provide a written explanation of the specific grounds for their failure to completely and precisely respond.

Careful attention shall be given to copied material to ensure that it is legible. When the requested information has been previously provided in this proceeding in the requested format, reference may be made to the specific location of that information in responding to this request. When applicable, the requested information shall be separately provided for total company operations and jurisdictional operations. When filing a paper containing personal information, KU/LG&E shall, in accordance with 807 KAR 5:001, Section 4(10), encrypt or redact the paper so that personal information cannot be read.

1. Refer to the Application, Filing Requirement 807 KAR 5:001, Section 16(8)(g). Using the attached spreadsheets as a guide, respond in Excel workbook format with all columns and rows unprotected and accessible. Provide the following yearly salary and benefit information for each corporate officer and as a group in total by category of Directors, Managers, Supervisors, Exempt, Non-Exempt, Union, and Non-Union Hourly for the years 2013 through 2016, the base period and the test period (in gross dollars—not hourly or monthly rates).

- a. Regular salary or pay.
- b. Overtime pay.
- c. Excess vacation payout.
- d. Standby/Dispatch pay.
- e. Bonus and incentive pay.
- f. Any other forms of incentives (may include stock options or forms of deferred compensation).

g. Other amounts paid and reported on the employees' W-2 (specify).

h. Healthcare benefit cost for employees.

(1) Amount paid by employer.

(2) Amount paid by employee.

i. Dental benefits cost for employees.

(1) Amount paid by employer.

(2) Amount paid by employee.

j. Vision benefits cost for employees.

(1) Amount paid by employer.

(2) Amount paid by employee.

k. Life insurance cost for employees.

(1) Amount paid by employer.

(2) Amount paid by employee.

l. Accidental death and disability benefits.

(1) Amount paid by employer.

(2) Amount paid by employee.

- m. Defined Contribution – 401(k) or similar plan cost for employees.

Provide the amount paid by employer.

- n. Defined Benefit Retirement cost for employees.

- (1) Amount paid by employer.

- (2) Amount paid by employee.

- o. Cost of any other benefit available to an employee (specify).

2. For each item of benefits listed in Item 1 above where an employee is required to pay part of the cost, provide a detailed explanation as to how the employee contribution rate was determined.

3. a. Provide, for each salaried position that receives Salary Overtime, the employee title and basis for overtime eligibility for that position.

b. Provide a detailed description of the employee pay category "Standby Pay." Provide also each employee title and the employee responsibilities for each employee title which receives Standby Pay. Include an explanation in the response if the Standby Pay amounts vary by employee.

c. Explain how a salaried employee can receive both Salary Overtime and Standby Pay.

4. Provide a listing of all health care plan categories, dental plan categories, and vision plan categories available to corporate officers individually and to groups defined as Directors, Managers, Supervisors, Exempt, Non-Exempt, Union, and Non-Union Hourly employees, i.e., single, married no dependents, single parent with dependents, family, etc. Include the associated employee contribution rates and

employer contribution rates of the total premium cost for each category, and each plan's deductible(s) amounts.

5. Provide a listing of all life insurance plan categories available to corporate officers individually and to groups defined as Directors, Managers, Supervisors, Exempt, Non-Exempt, Union, and Non-Union Hourly employees. Include the associated employee contribution rates and employer contribution rates of the total premium cost for each plan category.

6. Provide a listing of all retirement plans categories available to corporate officers individually, and to groups defined as Directors, Managers, Supervisors, Exempt, Non-Exempt, Union, and Non-Union Hourly employees. Include the associated employee contribution rates, if any, and employer contribution rates of the total premium cost for each plan category.

7. Refer to the Commission's January 24, 2017 Order in a Duke Energy Kentucky, Inc. proceeding, Case No. 2016-00289,¹ page 15, wherein the Commission expressed its concerns about the increasing number of utility demand-side management ("DSM") programs and the associated increase in costs to ratepayers. Given the Commission's concerns expressed in that case, identify each DSM program currently offered by KU/LG&E.

8. For each DSM program identified above, provide:
- a. The annual cost per program for the past three years;
 - b. The projected annual costs for the next two years; and

¹ Electronic Application of Duke Energy Kentucky, Inc. to Amend its Demand Side Management Programs (Ky. PSC Jan. 24, 2017).

c. The Total Resource Cost cost-benefit analysis, along with the supporting calculations.



Talina R. Mathews
Executive Director
Public Service Commission
P.O. Box 615
Frankfort, KY 40602

DATED APR 03 2017

cc: Parties of Record

Case No. 2016-00370
Case No. 2016-00371

APPENDIX

APPENDIX TO AN ORDER OF THE KENTUCKY PUBLIC SERVICE
COMMISSION IN CASE NOS. 2016-00370 and 2016-00371 DATED

APR 03 2017

Kentucky Utilities Company
CONFIDENTIAL - Case NO: 2016-00370
Salary & Benefit Data by Employee -

Year =>

Employee Name	Title	Regular	Overtime	Excess Vacation Payout	Standby	Bonus	Other	Sub-Total	Health Benefits Cost		Dental Benefits		Vision		Life Insurance		AD&D		401k		Defined Benefit Retirement		Any Other Wage, Salary, Compensation or Benefit Not Listed	Totals	
									KU	Employee	KU	Employee	KU	Employee	KU	Employee	KU	Employee	KU	Employee	KU	Employee		KU	Employee
Corporate Officers																									
<i>(Provide individually)</i>																									
Provide the Total Amount																									
Provide the KY Jurisdictional Retail Amount																									
Total Amount For All Officers																									
Total for All - KY Jurisdictional Retail Amount																									
Directors																									
<i>(Provide in Total as a Category)</i>																									
Provide the Total Amount																									
Provide the KY Jurisdictional Retail Amount																									
Managers																									
<i>(Provide in Total as a Category)</i>																									
Provide the Total Amount																									
Provide the KY Jurisdictional Retail Amount																									
Supervisors																									
<i>(Provide in Total as a Category)</i>																									
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Provide the KY Jurisdictional Retail Amount																									
Exempt																									
<i>(Provide in Total as a Category)</i>																									
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Provide the KY Jurisdictional Retail Amount																									
Non-Exempt																									
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Union																									
<i>(Provide in Total as a Category)</i>																									
Provide the Total Amount																									
Provide the KY Jurisdictional Retail Amount																									
Non-Union Hourly																									
<i>(Provide in Total as a Category)</i>																									
Provide the Total Amount																									
Provide the KY Jurisdictional Retail Amount																									
Total for All Categories																									
Total Amount																									
Total KY Jurisdictional Retail Amount																									

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