



e-FILING REPORT COVER SHEET

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REPORT NAME: Budget of Expenditures Report for 2016

COMPANY NAME: Idaho Power Company

DOES REPORT CONTAIN CONFIDENTIAL INFORMATION? No Yes

If yes, please submit only the cover letter electronically. Submit confidential information as directed in OAR 860-001-0070 or the terms of an applicable protective order.

If known, please select designation: RE (Electric) RG (Gas) RW (Water) RO (Other)

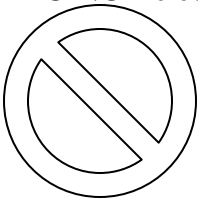
Report is required by: OAR 860-027-0005  
Statute Revised 757.105  
Order  
Other

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

If yes, enter docket number:

List applicable Key Words for this report to facilitate electronic search:

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- Annual Fee Statement form and payment remittance or
- OUS or RSPF Surcharge form or surcharge remittance or
- Any other Telecommunications Reporting or
- Any daily safety or safety incident reports or
- Accident reports required by ORS 654.715

**Please file the above reports according to their individual instructions.**



**LISA D. NORDSTROM**  
Lead Counsel  
[lnordstrom@idahopower.com](mailto:lnordstrom@idahopower.com)

March 30, 2016

Public Utility Commission of Oregon  
Filing Center  
201 High Street SE, Suite 100  
P.O. Box 1088  
Salem, Oregon 97301

Re: Idaho Power Company's Budget of Expenditures Report for the Year 2016

Attention Filing Center:

Idaho Power Company herewith transmits for electronic filing its Budget of Expenditures Report for the Year 2016.

If you have any questions, please call me at 208-388-5825.

Very truly yours,

A handwritten signature in black ink that reads "Lisa D. Nordstrom".

Lisa D. Nordstrom

LDN:kkt

Enclosures

cc: Ken Petersen

BUDGET OF EXPENDITURES REPORT FOR THE YEAR 2016

GENERAL INSTRUCTIONS

1. BUDGET OF EXPENDITURES REPORT MUST BE SUBMITTED BY ALL UTILITIES OPERATING WITHIN THE STATE OF OREGON IN ACCORDANCE WITH OREGON REVISED STATUTES 757.105 AND 759.100.
2. THE BUDGET OF EXPENDITURES REPORT SHOULD BE FILLED OUT IN DUPLICATE AND ONE COPY RETURNED TO THE PUBLIC UTILITY COMMISSION OF OREGON, 550 CAPITOL ST NE, SALEM, OR 97310-1380, BY NOVEMBER 1<sup>ST</sup> OF THE YEAR PRECEDING THAT FOR WHICH THE REPORT IS MADE.
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 TYPEWRITTEN ON 8 1/2" X 11" WHITE PAPER OF A QUALITY COMPARABLE TO THIS FORM AND SECURELY ATTACHED TO THE INNER MARGIN. ATTACHMENT BY PAPER CLIP IS NOT SUFFICIENT.
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

IDAHO POWER COMPANY

ADDRESS OF PRINCIPAL OFFICE 1221 WEST IDAHO STREET		CITY BOISE	STATE ID	ZIP CODE 83702
ADDRESS OF PRINCIPAL OFFICE IN OREGON (IF OTHER THAN ABOVE)		CITY	STATE	ZIP CODE
STATE OF INCORPORATION IDAHO	DATE OF INCORPORATION 6/30/89	TYPE OF ORGANIZATION IF NOT INCORPORATED		DATE ORGANIZED

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

ELECTRIC -- IDAHO and OREGON

DIRECTORS AT DATE OF BUDGET			
NAME OF DIRECTOR	CITY AND STATE OF RESIDENCE	LENGTH OF TERM	TERM EXPIRES
DARREL T. ANDERSON	BOISE, ID	1 YEAR	MAY 19, 2016
THOMAS E. CARLILE	BOISE, ID	1 YEAR	MAY 19, 2016
RICHARD J. DAHL	KAILUA, HI	1 YEAR	MAY 19, 2016
RONALD W. JIBSON	NORTH SALT LAKE, UT	1 YEAR	MAY 19, 2016
JUDITH A. JOHANSEN	SCOTTSDALE, AZ	1 YEAR	MAY 19, 2016
DENNIS L. JOHNSON	EAGLE, ID	1 YEAR	MAY 19, 2016
J. LAMONT KEEN	BOISE, ID	1 YEAR	MAY 19, 2016
CHRISTINE KING	SCOTTSDALE, AZ	1 YEAR	MAY 19, 2016
RICHARD J. NAVARRO	BOISE, ID	1 YEAR	MAY 19, 2016
ROBERT A. TINTSMAN	BOISE, ID	1 YEAR	MAY 19, 2016

ANNUAL SALARY AND OTHER COMPENSATION OF OFFICERS AND RETIRED EXECUTIVES

INSTRUCTIONS: COMPLETE THE INFORMATION REQUESTED FOR EACH ACTIVE AND RETIRED EXECUTIVE OFFICER. AN EXECUTIVE OFFICER'S SALARY AND OTHER COMPENSATION PAID BY AN AFFILIATED COMPANY SHOULD ALSO BE SHOWN. AN EXECUTIVE OFFICER DIRECTS OR CONTROLS THE POLICIES AND BUSINESS OF THE UTILITY OR IS ENTRUSTED OR CHARGED WITH ADMINISTRATIVE DUTIES TO CARRY THOSE POLICIES INTO EFFECT. ALL PROPOSED CHANGES IN POSITION AND SALARIES OF EXECUTIVE OFFICERS FROM THE PREVIOUS BUDGET OF EXPENDITURES REPORT OR SUPPLEMENTAL BUDGETS SHOULD BE FULLY EXPLAINED, REPORT WHOLE DOLLARS ONLY.

ANNUAL SALARY AND OTHER COMPENSATION OF OFFICERS AND RETIRED EXECUTIVES

**Please see footnotes listed under the following Officers: Gregory W. Said, Lori D. Smith, and Tim Tatum**

NAME		TITLE					
Darrel T. Anderson		President and Chief Executive Officer					
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.		
1	ANNUAL SALARY	\$ 742,500	920	\$ 7,500	IDACORP		
2	OTHER COMPENSATION	AMOUNT ASSIGNED TO OREGON MEDICAL & DENTAL INSURANCE	8,639	920	87	IDACORP	
3			LIFE & DISABILITY INSURANCE	980	(1)	920	10
4		INCOME PROTECTION INSURANCE DISCOUNT ON UTILITY SERVICE PENSION PLAN		44,600	926	451	IDACORP
5			SAVINGS PLAN STOCK PURCHASE PLAN	10,494	920	106	IDACORP
6		PAID PARKING		1,880,602	(3)	920	18,996
7			INCENTIVE	44,600	926	451	IDACORP
8		OTHER BENEFITS		1,900,715	920	19,199	IDACORP
9			TOTAL OTHER COMPENSATION	44,600	926	451	IDACORP
10		PERCENT ASSIGNED TO OREGON DEFERRED COMP. IN SALARY		4.15%	(2)		
11							
12							
13							
14							
15							

## ANNUAL SALARY AND OTHER COMPENSATION OF OFFICERS AND RETIRED EXECUTIVES

NAME		TITLE			
N. Vern Porter		Vice President of Customer Operations			
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.
1	ANNUAL SALARY	\$ 142,500 114,000 28,500	101 580,590,907 901		
2	AMOUNT ASSIGNED TO OREGON MEDICAL & DENTAL INSURANCE	6,820	101		
3		5,456	580,590,907		
		1,364	901		
4	LIFE & DISABILITY INSURANCE	188 (1) 150 38	101 580,590,907 901		
5	INCOME PROTECTION INSURANCE DISCOUNT ON UTILITY SERVICE				
6					
7	PENSION PLAN	45,050	926		
8	SAVINGS PLAN STOCK PURCHASE PLAN				
9		5,300	101		
		4,240	580,590,907		
		1,060	901		
10	PAID PARKING				
11	INCENTIVE	281,265 (3)	920		
12	OTHER BENEFITS	(4)			
13	TOTAL OTHER COMPENSATION	12,308 281,265 9,846 2,462 45,050	101 920 580,590,907 901 926		
14	PERCENT ASSIGNED TO OREGON	4.15%			
15	DEFERRED COMP. IN SALARY	(2)			

NAME		TITLE			
Rex Blackburn		Senior Vice President and General Counsel			
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.
1	ANNUAL SALARY	\$ 356,400	920	\$ 3,600	IDACORP
2	AMOUNT ASSIGNED TO OREGON MEDICAL & DENTAL INSURANCE				
3		13,504	920	136	IDACORP
4		470 (1)	920	5	IDACORP
5	INCOME PROTECTION INSURANCE DISCOUNT ON UTILITY SERVICE				
6					
7	PENSION PLAN	44,600	926	451	IDACORP
8	SAVINGS PLAN STOCK PURCHASE PLAN				
9		10,494	920	106	IDACORP
10	PAID PARKING				
11	INCENTIVE	464,894 (3)	920	4,696	IDACORP
12	OTHER BENEFITS	(4)			
13	TOTAL OTHER COMPENSATION	489,362 44,600	920 926	4,943 451	IDACORP
14	PERCENT ASSIGNED TO OREGON	4.15%			
15	DEFERRED COMP. IN SALARY	(2)			

ANNUAL SALARY AND OTHER COMPENSATION OF OFFICERS AND RETIRED EXECUTIVES

NAME			TITLE		
Lonnie K. Krawl			Senior Vice President of Administrative Services and Chief Information Officer		
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.
1	ANNUAL SALARY	\$ 29,394	101		
		237,826	920	\$ 7,780	IDACORP
2	AMOUNT ASSIGNED TO OREGON MEDICAL & DENTAL INSURANCE	1,458	101		
3		11,797	920	386	IDACORP
4					
4	LIFE & DISABILITY INSURANCE	39 (1)	101		
		314	920	10	IDACORP
5	INCOME PROTECTION INSURANCE DISCOUNT ON UTILITY SERVICE PENSION PLAN				
7		43,775	926	1,274	IDACORP
8	SAVINGS PLAN STOCK PURCHASE PLAN				
9		1,133	101		
		9,167	920	300	IDACORP
10	PAID PARKING				
11	INCENTIVE	299,997 (3)	920	8,734	IDACORP
12	OTHER BENEFITS	(4)			
13	TOTAL OTHER COMPENSATION	2,630	101		
		321,275	920	9,430	IDACORP
		43,775	926	1,274	
14	PERCENT ASSIGNED TO OREGON DEFERRED COMP. IN SALARY	4.15%			
15		(2)			

NAME			TITLE		
Jeffrey Glenn			Vice President of Information Technology		
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.
1	ANNUAL SALARY	\$ 210,000	920		
2	AMOUNT ASSIGNED TO OREGON MEDICAL & DENTAL INSURANCE				
3		5,599	920		
4					
4	LIFE & DISABILITY INSURANCE	277 (1)	920		
5	INCOME PROTECTION INSURANCE DISCOUNT ON UTILITY SERVICE PENSION PLAN				
7		45,050	926		
8	SAVINGS PLAN STOCK PURCHASE PLAN				
9		10,600	920		
10	PAID PARKING				
11	INCENTIVE	104,950 (3)	920		
12	OTHER BENEFITS	(4)			
13	TOTAL OTHER COMPENSATION	121,426	920		
		45,050	926		
14	PERCENT ASSIGNED TO OREGON DEFERRED COMP. IN SALARY	4.15%			
15		(2)			

## ANNUAL SALARY AND OTHER COMPENSATION OF OFFICERS AND RETIRED EXECUTIVES

NAME		TITLE				
Lisa A. Grow		Senior Vice President of Operations				
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.	
1	ANNUAL SALARY	\$ 356,400	920	\$ 3,600	IDACORP	
2	OTHER COMPENSATION	AMOUNT ASSIGNED TO OREGON MEDICAL & DENTAL INSURANCE	920	36	IDACORP	
3			3,527			920
4		LIFE & DISABILITY INSURANCE	470 (1)	920	5	IDACORP
5		INCOME PROTECTION INSURANCE DISCOUNT ON UTILITY SERVICE PENSION PLAN	44,600	926	451	IDACORP
6						
8		SAVINGS PLAN	10,494	920	106	IDACORP
9		STOCK PURCHASE PLAN				
10		PAID PARKING				
11		INCENTIVE	461,358 (3)	920	4,660	IDACORP
12		OTHER BENEFITS	(4)			
13		TOTAL OTHER COMPENSATION	475,849	920	4,807	IDACORP
			44,600	926	451	
14		PERCENT ASSIGNED TO OREGON DEFERRED COMP. IN SALARY	4.15%			
15			(2)			

NAME		TITLE				
Patrick A. Harrington		Corporate Secretary				
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.	
1	ANNUAL SALARY	\$ 191,580	920	\$ 1,950	IDACORP	
		1,470	101			
2	OTHER COMPENSATION	AMOUNT ASSIGNED TO OREGON MEDICAL & DENTAL INSURANCE	920	97	IDACORP	
3			9,564			920
		73	101			
4		LIFE & DISABILITY INSURANCE	253 (1)	920	3	IDACORP
			2	101		
5		INCOME PROTECTION INSURANCE DISCOUNT ON UTILITY SERVICE PENSION PLAN	44,305	926	448	IDACORP
6						
8		SAVINGS PLAN	10,345	920	105	IDACORP
9		STOCK PURCHASE PLAN				
			79	101		
10		PAID PARKING				
11		INCENTIVE	144,345 (3)	920	1,469	IDACORP
			1,108	101		
12		OTHER BENEFITS	(4)			
13		TOTAL OTHER COMPENSATION	164,507	920	1,674	IDACORP
		1,262	101			
		44,305	926	448		
14	PERCENT ASSIGNED TO OREGON DEFERRED COMP. IN SALARY	4.15%				
15		(2)				

ANNUAL SALARY AND OTHER COMPENSATION OF OFFICERS AND RETIRED EXECUTIVES

NAME		TITLE				
Steven R. Keen		Senior Vice President, Chief Financial Officer and Treasurer				
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.	
1	ANNUAL SALARY	\$ 376,200	920	\$ 3,800	IDACORP	
2	OTHER COMPENSATION	AMOUNT ASSIGNED TO OREGON MEDICAL & DENTAL INSURANCE	9,638	97	IDACORP	
3						
4		LIFE & DISABILITY INSURANCE	497 (1)	920	5	IDACORP
5		INCOME PROTECTION INSURANCE DISCOUNT ON UTILITY SERVICE PENSION PLAN	44,600	926	451	IDACORP
6						
7		SAVINGS PLAN	10,494	920	106	IDACORP
8		STOCK PURCHASE PLAN				
9		PAID PARKING				
10		INCENTIVE	545,402 (3)	920	5,509	IDACORP
11		OTHER BENEFITS	(4)			
12		TOTAL OTHER COMPENSATION	566,031	920	5,717	IDACORP
13			44,600	926	451	
14		PERCENT ASSIGNED TO OREGON DEFERRED COMP. IN SALARY	4.15%			
15		(2)				

NAME		TITLE				
Jeffrey L. Malmen		Vice President of Public Affairs				
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.	
1	ANNUAL SALARY	\$ 13,335	920			
		261,665	426			
2	OTHER COMPENSATION	AMOUNT ASSIGNED TO OREGON MEDICAL & DENTAL INSURANCE	661	920		
3				12,979		426
4		LIFE & DISABILITY INSURANCE	18 (1)	920		
			345	426		
5		INCOME PROTECTION INSURANCE DISCOUNT ON UTILITY SERVICE PENSION PLAN	2,185	926		
6						
7		SAVINGS PLAN	514	920		
8		STOCK PURCHASE PLAN				
9		PAID PARKING	10,086	426		
10		INCENTIVE	12,673 (3)	920		
11			248,670	426		
12		OTHER BENEFITS	(4)			
13		TOTAL OTHER COMPENSATION	13,866	920		
		2,185	926			
		314,945	426			
14	PERCENT ASSIGNED TO OREGON DEFERRED COMP. IN SALARY	4.15%				
15		(2)				



ANNUAL SALARY AND OTHER COMPENSATION OF OFFICERS AND RETIRED EXECUTIVES

NAME		TITLE				
Daniel B. Minor		Executive Vice President				
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.	
1	ANNUAL SALARY	\$ 455,400	920	\$ 4,600	IDACORP	
2	OTHER COMPENSATION	AMOUNT ASSIGNED TO OREGON MEDICAL & DENTAL INSURANCE	920	69	IDACORP	
3			6,856	920		69
4		LIFE & DISABILITY INSURANCE	601 (1)	920	6	IDACORP
5		INCOME PROTECTION INSURANCE DISCOUNT ON UTILITY SERVICE PENSION PLAN	44,600	926	451	IDACORP
6						
7		SAVINGS PLAN	10,494	920	106	IDACORP
8		STOCK PURCHASE PLAN				
9		PAID PARKING	814,011 (3)	920	8,222	IDACORP
10		INCENTIVE				
11		OTHER BENEFITS	(4)			
12		TOTAL OTHER COMPENSATION	831,962	920	8,403	IDACORP
13			44,600	926	451	
14		PERCENT ASSIGNED TO OREGON DEFERRED COMP. IN SALARY	4.15%	(2)		

NAME		TITLE				
Tessia Park		Vice President of Power Supply				
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.	
1	ANNUAL SALARY	\$ 29,062 190,938	101 920			
2	OTHER COMPENSATION	AMOUNT ASSIGNED TO OREGON MEDICAL & DENTAL INSURANCE	101			
3			915 6,011	101 920		
4		LIFE & DISABILITY INSURANCE	38 (1) 252	101 920		
5		INCOME PROTECTION INSURANCE DISCOUNT ON UTILITY SERVICE PENSION PLAN	45,050	926		
6						
7		SAVINGS PLAN	1,400 9,200	101		
8		STOCK PURCHASE PLAN				
9		PAID PARKING	170,995 (3)	920		
10		INCENTIVE				
11		OTHER BENEFITS	(4)			
12		TOTAL OTHER COMPENSATION	2,353	101		
13			186,458	920		
14			45,050	926		
15		PERCENT ASSIGNED TO OREGON DEFERRED COMP. IN SALARY	4.15%	(2)		

## ANNUAL SALARY AND OTHER COMPENSATION OF OFFICERS AND RETIRED EXECUTIVES

NAME		TITLE				
Ken W. Petersen		Vice President, Controller and Chief Accounting Officer				
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.	
1	ANNUAL SALARY	\$ 244,510	920	\$ 490	IDACORP	
2	OTHER COMPENSATION	AMOUNT ASSIGNED TO OREGON				
3		MEDICAL & DENTAL INSURANCE	3,930	920	8	IDACORP
4		LIFE & DISABILITY INSURANCE	323 (1)	920	1	IDACORP
5		INCOME PROTECTION INSURANCE				
6		DISCOUNT ON UTILITY SERVICE				
7		PENSION PLAN	44,960	926	90	IDACORP
8		SAVINGS PLAN				
9		STOCK PURCHASE PLAN	10,579	920	21	IDACORP
10		PAID PARKING				
11		INCENTIVE	193,920 (3)	920	389	IDACORP
12		OTHER BENEFITS	(4)			
13		TOTAL OTHER COMPENSATION	208,752 (4)	920	419	IDACORP
			44,960	926	90	
14	PERCENT ASSIGNED TO OREGON	4.15%				
15	DEFERRED COMP. IN SALARY	(2)				

NAME		TITLE				
Gregory W. Said		Vice President of Regulatory Affairs				
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.	
1	ANNUAL SALARY	\$ 75,000	920			
2	OTHER COMPENSATION	AMOUNT ASSIGNED TO OREGON				
3		MEDICAL & DENTAL INSURANCE	2,397	920		
4		LIFE & DISABILITY INSURANCE	99 (1)	920		
5		INCOME PROTECTION INSURANCE				
6		DISCOUNT ON UTILITY SERVICE				
7		PENSION PLAN	17,213	926		
8		SAVINGS PLAN				
9		STOCK PURCHASE PLAN	4,050	920		
10		PAID PARKING				
11		INCENTIVE	60,291 (3)	920		
12		OTHER BENEFITS	(4)			
13		TOTAL OTHER COMPENSATION	66,837 (4)	920		
			17,213	926		
14	PERCENT ASSIGNED TO OREGON	4.15%				
15	DEFERRED COMP. IN SALARY	(2)				

Gregory W. Said will retire effective May 01, 2016.

## ANNUAL SALARY AND OTHER COMPENSATION OF OFFICERS AND RETIRED EXECUTIVES

NAME		TITLE								
Lori D. Smith		Vice President and Chief Risk Officer								
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.					
1	ANNUAL SALARY	\$ 60,463	920	\$ 2,038	IDACORP					
2	OTHER COMPENSATION									
3						AMOUNT ASSIGNED TO OREGON MEDICAL & DENTAL INSURANCE	828	920	28	IDACORP
4						LIFE & DISABILITY INSURANCE	80 (1)	920	3	IDACORP
5						INCOME PROTECTION INSURANCE	13,876	926	468	IDACORP
6						DISCOUNT ON UTILITY SERVICE				
7						PENSION PLAN				
8						SAVINGS PLAN	3,265	920	110	IDACORP
9						STOCK PURCHASE PLAN				
10						PAID PARKING	48,623 (3)	920	1,639	IDACORP
11						INCENTIVE				
12						OTHER BENEFITS	(4)			
13						TOTAL OTHER COMPENSATION	52,796	920	1,780	IDACORP
							13,876	926	468	
14	PERCENT ASSIGNED TO OREGON	4.15%								
15	DEFERRED COMP. IN SALARY	(2)								

Lori D. Smith will retire effective April 01, 2016.

NAME		TITLE								
Tim Tatum		General Manager of Regulatory Affairs								
NO.	DESCRIPTION OF COMPENSATION	PAID BY COMPANY	ACCOUNT #	PAID BY AFFILIATED CO.	NAME OF AFFILIATED CO.					
1	ANNUAL SALARY	\$ 170,000	920							
2	OTHER COMPENSATION									
3						AMOUNT ASSIGNED TO OREGON MEDICAL & DENTAL INSURANCE	8,726	920		
4						LIFE & DISABILITY INSURANCE	224 (1)	920		
5						INCOME PROTECTION INSURANCE	39,015	926		
6						DISCOUNT ON UTILITY SERVICE				
7						PENSION PLAN				
8						SAVINGS PLAN	9,180	920		
9						STOCK PURCHASE PLAN				
10						PAID PARKING	101,093 (3)	920		
11						INCENTIVE				
12						OTHER BENEFITS	(4)			
13						TOTAL OTHER COMPENSATION	119,223	920		
							39,015	926		
14	PERCENT ASSIGNED TO OREGON	4.15%								
15	DEFERRED COMP. IN SALARY	(2)								

Tim Tatum will replace Gregory W. Said as Vice President of Regulatory Affairs effective March 01, 2016.

EXPENDITURES FOR PENSIONS OR A TRUST FUND TO PROVIDE PENSIONS

INSTRUCTIONS: LIST ALL PROPOSED PAYMENTS TO PERSONS OR TO TRUSTS TO PROVIDE PENSIONS FOR EMPLOYERS 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
Pension expenditures under Trusteed Retirement Plan, originally adopted 1/1/43, as amended:			
Operating contribution	926		\$ 610,910
Construction contribution	182.3		294,410
		\$ 20,000,000	\$ 905,320
<p>The Retirement Plan of Idaho Power Company is a non-contributory trusteed plan providing, in general, benefits of 1.5% of final 5 years average earnings multiplied by the years of credited service. Effective January 1, 2011, the benefit has been reduced to 1.2% for employees hired on or after that date. The 2015 FAS 87 pension expense was \$40.2 million (\$1.8 million Oregon portion), and the estimated 2016 FAS 87 pension expense is \$43.1 million (\$2.0 million estimated Oregon portion). The 2015 service cost component was \$33.2 million, and the estimated 2016 service cost is \$32.5 million. While no minimum plan contributions are expected to be required during 2016, the Company plans to fund at least \$20 million (reflected in the table above) and may fund in excess of this amount. Contributions made in 2015 were \$39 million.</p>			
<p>Idaho Power has differing accounting methodologies between its Oregon and Idaho jurisdictions. In Oregon, pension accounting is on the accrual basis, while in Idaho it is on a cash basis. Because of the difference in timing between the two jurisdictions, Idaho Power now records the construction portion of Oregon pension expense to a regulatory asset in order to simulate the allocation of pension as an overhead cost to construction outside of the Company's fixed asset system.</p>			

## POLITICAL ADVERTISING

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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 WHOLE DOLLARS ONLY.

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NONE

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## POLITICAL CONTRIBUTIONS

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INSTRUCTIONS: LIST ALL PROPOSED PAYMENTS OR CONTRIBUTIONS TO PERSONS AND ORGANIZATIONS FOR THE PURPOSE OF ADMINISTRATION 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.

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Employee Compensation/Travel/Othr Empl Exp	\$ 1,211,416
Contract Lobbying Expense	312,000
Memberships	14,000
Political Contributions	210,000
Other	<u>32,300</u>
	<u>\$ 1,779,716</u> (1)

(1) Please note these budget amounts are paid for entirely by the Company's Shareholders.

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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 PROJECT. 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
GSU (Hells Canyon Complex - First Unit Replacement)	101	\$ 520,000	\$ 22,152
GSU (Hells Canyon Complex - Third Unit Replacement)	101	\$ 776,897	\$ 33,096
Generator Rewind (Bliss #3 Coils)	101	\$ 400,000	\$ 17,040
Generator Rewind (Hells Canyon #3 Coils)	101	\$ 1,000,000	\$ 42,600
Turbine Runner (Upper Malad)	101	\$ 364,050	\$ 15,509
Turbine Runner Unit #3 (Brownlee)	101	\$ 3,237,500	\$ 137,918
Turbine Runner Unit #3 Wicket Gates (Brownlee)	101	\$ 838,000	\$ 35,699
Turbine Runner Unit #3 Stator Laminations (Brownlee)	101	\$ 1,400,000	\$ 59,640
Support Housings (Langley Gulch)	101	\$ 950,000	\$ 40,470
Transitions (Langley Gulch)	101	\$ 1,070,712	\$ 45,612
Row 1 Blade (Langley Gulch)	101	\$ 886,104	\$ 37,748
Row 2 Blade (Langley Gulch)	101	\$ 835,956	\$ 35,612
Row 1 Vane (Langley Gulch)	101	\$ 956,064	\$ 40,728
Row 2 Vane (Langley Gulch)	101	\$ 729,504	\$ 31,077
Transformer (Mora Substation)	101	\$ 504,831	\$ 21,506
Series Capacitor Bank (Borah Series Capacitor Replacement)	101	\$ 1,051,146	\$ 44,779
Series Capacitor Bank (Kinport Series Capacitor Replacement)	101	\$ 457,020	\$ 19,469
Transformer (Midpoint)	101	\$ 915,000	\$ 38,979
Transformer (Meridian Substation)	101	\$ 220,000	\$ 9,372
Transformer (Huntington Wind Integration)	101	\$ 1,330,818	\$ 56,693
Transformer (Simcoe Solar Integration)	101	\$ 448,533	\$ 19,108
Note: Idaho Power Company has no proposed major contracts for the sale of equipment.			
Percent assigned to Oregon 4.26%			
Allocation of Plant to Oregon			
		\$ 18,892,135	\$ 804,807

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 SERVICES, ADVICE, AUDITING, ASSOCIATING, SPONSORING, ENGINEERING, MANAGING, OPERATING, FINANCIAL, LEGAL OR OTHER SERVICES, SEE OREGON REVISED STATUTES 757.015 AND D759.010 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
<p>The following proposed expenditures will be charged to IDACORP, Inc. IPC receives reimbursement for all expenses incurred on behalf of its affiliates.</p>			
<p>*WORK ORDER CHARGES (SALARIES):</p>			
<p>Human Resources Admin Benefits Employment Compensation &amp; Payroll CFO Admin Corporate Tax Investor Relations Corporate Controller Treasury Services Manager Cash Management Business Unit Finance Support Financial Accounting &amp; Reporting Strategic Analysis External Reporting Audit Services Legal Conduct &amp; SOX Program Manager GM Compliance, Risk, and Security Insurance Services Executive Corporate Accounting Entries Total</p>	<p>417 (amounts are credited out of 417 and charged to IDACORP)</p>	<p>\$ 6,920 4,070 4,511 4,950 25,763 17,881 6,162 645 2,123 78,544 8,540 15,946 7,145 14,667 16,604 23,377 2,469 3,871 2,230 12,744 <u>8,680</u> <u>\$267,842</u></p>	
<p>*These proposed expenditures represent a combination of estimates of direct charges and allocations of salaries of Idaho Power employees for work that they perform for IDACORP. The list is broken down by the employee's cost center. These amounts also include salaries paid to the employees listed in the "Annual Salary and Other Compensation of Officers and Retired Executives" section.</p>			

CERTIFICATION

THE FOREGOING REPORT MUST BE CERTIFIED BY THE CHIEF ACCOUNTING OFFICER AND BY THE PRESIDENT OR OTHER CHIEF OFFICER OF THE REPORTING COMPANY.

WE CERTIFY THAT THIS BUDGET OF EXPENDITURES REPORT HAS BEEN PREPARED UNDER OUR DIRECTION; THAT WE 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 OUR KNOWLEDGE, INFORMATION, AND BELIEF.

SIGNATURE OF PRESIDENT OR OTHER CHIEF OFFICER 	DATE 3/29/16
SIGNATURE OF CHIEF ACCOUNTING OFFICER 	DATE 3/29/16



**DONATIONS AND MEMBERSHIPS**

INSTRUCTIONS: LIST ALL DONATIONS PROPOSED TO BE MADE BY THE UTILITY DURING THE COMING YEAR AND THE ACCOUNTS TO BE CHARGED. GIVE THE NAME, CITY AND STATE OF EACH ORGANIZATION TO WHOM A DONATION IS TO BE MADE.

GROUP DONATIONS 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 BY 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
CONTRIBUTIONS TO AND MEMBERSHIPS IN:			
<b>1.Charitable Organizations:</b>			
<b>Culture &amp; Arts</b>			
Total Culture & Arts		\$ 20,500	
<b>Civic &amp; Community</b>			
Total Civic & Community		\$ 144,000	
<b>Educational</b>			
Total Educational		\$ 130,750	
<b>Health &amp; Human Services-Direct</b>			
Total Health & Human Services-Direct		\$ 311,000	
<b>Company Matching - Employee Community Funds (ECF)</b>			
Total Company Matching - ECF		\$ 220,000	
<b>Non-categorized</b>			
TOTAL NON-CATEGORIZED		\$ 26,900	
Total Charitable Organizations		\$ 853,150	
<b>2.Organizations of the Utility Industry:</b>			
Total Organizations of the Utility Industry		\$ 879,494	
<b>3.Technical and Professional Organizations:</b>			
Total Technical and Professional Organizations		\$ 73,825	
<b>4.Commercial and Trade Organizations:</b>			
Total Commercial and Trade Organizations		\$ 132,650	
<b>5.Other:</b>			
Unspecified Donations		\$ 100,000	
Total Other		\$ 100,000	
Summary:			
None of Account 426 is assigned to the Oregon jurisdiction.	426	\$ 853,150	
The Company allocates account 254 on a jurisdictional basis, approximately 95% to Idaho and 5% to Oregon.	254	235,200	11,760
1/3 to 100% of the items recorded to accounts 908 & 930 are removed from the Company's revenue requirement when the Company files a General Rate Case and are paid for by the Company's Shareholders, consistent with prior orders issued by the Idaho Public Utilities Commission. However, for the purposes of this report no amounts have been removed and because these are estimates the Company has allocated 4.15% of of the total estimated for accounts 908 & 930, based on functionalized wages and salaries for Oregon.	908	18,650	774
	930	932,119	38,683
Total		\$ 2,039,119	\$ 51,217

Supplemental Information - Executive Officer  
Compensation Other Than Salary

1. Life and Disability Insurance

The amount shown represents the cost of life insurance.

The Company has a self-insured short-term and long-term disability plan for all regular employees.

2. Deferred Compensation

The Company has a non-qualified, deferred compensation plan for certain of its management group, which includes all officers. The Plan provides for deferral of 50 percent of salary and/or bonuses and the account balance is distributed after the employee leaves IDACORP, or earlier if an early withdrawal is requested. Deferrals earn returns (or losses) in deemed investments, i.e., as if they had been invested in investment choices available under the Idaho Power Company Employee Savings Plan (ESP).

3. Incentive

Annual Incentive Plan:

Effective January 1, 1998, the Company implemented the Executive Incentive Plan. This incentive plan ties a portion of each executive's annual compensation to achieving certain financial and operational goals. The award opportunities for officers vary by position as a percentage of base salary ranging from 35 percent to 100 percent at target levels. This plan does not permit the payment of awards if there is no payment of awards under the employee incentive plan (a plan for non-executive employees). The amount of incentive to be paid out in 2017, for 2016 performance, has been estimated. **When filing a general rate case, this portion of officer's incentives are removed in its entirety from the revenue requirement and borne by the Company's Shareholders.**

2000 Long-Term Incentive Plan

The Company has established a long-term incentive and compensation plan that includes all officers. This plan permits the grant of various forms of awards, including incentive stock options, nonqualified stock options (NQSOs), stock appreciation rights, restricted stock units, performance units, restricted stock and performance shares (starting in 2004), and other awards. NQSOs were granted in years 2000 through 2005. In 2006 through 2016, performance shares with two separate goals, Cumulative Earnings Per Share, and relative Total Shareholder Return, were granted with three-year performance periods. In 2006 through 2016, restricted stock shares were granted with a time-based three-year restriction. The Compensation Committee of the Board of Directors has the authority to grant awards and make changes to this plan.

4. Other Benefits:

Senior Management Security Plan (SMSP)

This program provides for certain amounts of salary continuation in the event of death or retirement and to supplement existing benefits for each officer covered under this plan. It is designed so that if assumptions made to mortality expectation, policy dividends and other factors are realized, the company will recover the cost of this plan. Investments (primarily life insurance and equities) are held to informally fund this plan. The cost per individual officer is not determinable.

Physical Examination

The Company provides for annual physical examinations for all principal executive officers on an optional basis. It is estimated that the cost ranges up to \$250 for each examination taken.

Compensation Absence

The Company provides a graduated compensation absence program called Flexible Time Off (FTO) for all regular employees based on years of service. FTO is conceptually a combination of sick and vacation leave, which can be used for any purpose. Amounts accrue monthly up to a maximum. Account balances are paid at termination.