

## APPA Joint Action Agency Salary Survey 2025

### Background

This survey is conducted annually to produce the Public Power Joint Action Agency Salary Survey Report, which will be published Q3 2025. Only joint action agencies that have full-time staff are eligible to complete this survey. For example, if your agency is run by a consultant or a utility general manager part-time, please do not complete this survey. This survey also includes questions on benefits in order to provide public power utilities with a clearer benchmarking metric for total compensation.

All joint action agencies are eligible to receive a free copy of the report.

The survey can be previewed and downloaded [here](#).

[Job descriptions can be viewed and downloaded here.](#) All new jobs added this year are highlighted in yellow.

The deadline for submissions is **July 24, 2025**.

Please direct questions to Lindsey Buttel at (202) 467-2920 or [LButtel@PublicPower.org](mailto:LButtel@PublicPower.org).

### Contact Information

**1) Please confirm your eligibility for this survey. Are you a public power joint action agency with full-time staff dedicated to the agency?\***

☐ Yes

☐ No

#### IF NO IN Q1

You are not eligible to complete this survey. However, if you are a public power utility with at least 50% retail sales, you can complete the [utility salary survey](#) by July 17, 2025.

#### IF YES IN Q1

### Contact Information

**2) Joint Action Agency Name\***

---

**3) City\***

---

**4) Where is your joint action agency located?\***

- ☐ Alabama
- ☐ Alaska
- ☐ American Samoa
- ☐ Arizona
- ☐ Arkansas
- ☐ California
- ☐ Colorado
- ☐ Connecticut
- ☐ Delaware
- ☐ Federated States of Micronesia
- ☐ Florida
- ☐ Georgia
- ☐ Guam
- ☐ Hawaii
- ☐ Idaho
- ☐ Illinois
- ☐ Indiana
- ☐ Iowa
- ☐ Kansas
- ☐ Kentucky
- ☐ Louisiana
- ☐ Maine
- ☐ Marshall Islands
- ☐ Maryland
- ☐ Massachusetts
- ☐ Michigan
- ☐ Minnesota
- ☐ Mississippi

- ☐ Missouri
- ☐ Montana
- ☐ Nebraska
- ☐ Nevada
- ☐ New Hampshire
- ☐ New Jersey
- ☐ New Mexico
- ☐ New York
- ☐ North Carolina
- ☐ North Dakota
- ☐ Northern Mariana Islands
- ☐ Ohio
- ☐ Oklahoma
- ☐ Oregon
- ☐ Palau
- ☐ Pennsylvania
- ☐ Puerto Rico
- ☐ Rhode Island
- ☐ South Carolina
- ☐ South Dakota
- ☐ Tennessee
- ☐ Texas
- ☐ Utah
- ☐ Vermont
- ☐ Virgin Islands
- ☐ Virginia
- ☐ Washington
- ☐ Washington, D.C.
- ☐ West Virginia
- ☐ Wisconsin
- ☐ Wyoming

**5) First Name\***

---

**6) Last Name\***

---

**7) Phone Number**

**Please use format XXX-XXX-XXXX\***

---

**8) Email Address**

**Please use your email address that is associated with APPA website login credentials (if applicable)\***

---

**Operating Information**

**9) Electric operating revenue in 2024:\***

---

**10) Generation (MWh) in 2024:**

**Please only provide generation that your agency owns. If your joint action agency does not generate electricity please enter "0".\***

---

## Instructions

### PLEASE READ BEFORE COMPLETING SURVEY

1. Report annual base salary only (i.e. not including supplemental or variable cash payments such as gain sharing, bonuses, merit pay, cost-of-living or other arrangements that are not part of base salary) for incumbents in the positions listed below, as of **May 1, 2025**. If the position is paid in an hourly wage, please calculate what the position would make per year.
2. Report salaries for full-time employees only and do not provide salary ranges.
3. Refer to job descriptions provided in the PDF below. Please leave blank if no one fits the job description. Provide salary data for the employee that is the best fit for each position. If one person is responsible for two or more job categories, list that person's salary once for the most appropriate position where they spend a majority of their time. If multiple individuals are employed at a given position, please use the median of the employee salaries or hourly wages.

## 11) Salaries

**Please provide annual base salary data and the corresponding number of employees for fulltime positions. Round to the nearest whole dollar amount and do not provide a salary range.**

[Job descriptions can be reviewed here.](#)

### Administration

	Salary	# of Employees in Position
General Manager / Chief Executive Officer		
Assistant General Manager / Chief Operating Officer		
Administrative Assistant		
Executive Assistant		
Human Resources Director		

Office Administrator		
----------------------	--	--

**Accounting and Finance**

	Salary	# of Employees in Position
Chief Financial Officer		
Chief Accountant / Controller		
Accountant I		
Accountant II		
Accountant III		

**Engineering**

	Salary	# of Employees in Position
Chief Engineer		
Engineer I		
Engineer II		
Engineer III		
Supervisory Engineer		

**Government Affairs and Communications**

	Salary	# of Employees in Position
Compliance Manager		

Communications Director		
Communications Coordinator		
General Counsel		
Government Affairs Director		

**Energy Operations**

	<b>Salary</b>	<b># of Employees in Position</b>
Energy Procurement and Portfolio Manager / Resource Planner		
Energy Services Director		
Load Forecaster		
Markets Manager		
Power System Operator		
Safety Director		
Scheduler		
Supply / Demand Planning Director		

**Information Systems**

	<b>Salary</b>	<b># of Employees in Position</b>
Cybersecurity Analyst		
Information Systems Manager		
Information Technology Director		

**Technical and Operations**

	Salary	# of Employees in Position
Field Technician		
Journeyman Lineworker		
Plant Superintendent		

**Member Services**

	Salary	# of Employees in Position
Business Analyst / Data Analyst		
Economic Development Manager		
Energy Services Representative		
Member Services Director		

**Salary Related Policies and Benefits**

**12) How many full-time staff are employed by your organization?**

---

**13) What percentage is your organization's projected increase in salaries in the 2025 budget? If your organization does not plan to offer an increase, please enter 0.**

---

**14) What percentage is your organization's projected increase in salaries in the 2026 budget? If your organization does not plan to offer an increase, please enter 0.**

---



**15) Is your work environment operating in a fully in-office, hybrid, or fully remote setting?**

☐ In-office

☐ Hybrid

☐ Remote

**IF HYBRID IN Q15**

**16) How many days a week are employees required to be in the office? If your organization has a unique arrangement, please describe your hybrid arrangement in the "other" box.**

☐ 1 day

☐ 2 days

☐ 3 days

☐ 4 days

☐ Other (please specify): \_\_\_\_\_

**17) Below are some other alternative work arrangements that some organizations might offer to employees. Please check all of the options that your organization offers to employees. If your organization follows another scenario, please describe it in the "other" box.**

☐ Compressed work schedule (allows an employee to work 35-40 hours in fewer than five (5) workdays)

☐ 4-day work week

☐ Flex time (can work alternative hours during the workday)

☐ Other (please specify): \_\_\_\_\_

☐ Do not offer alternative work arrangements

**18) Below is a list of benefits that some joint action agencies provide for their employees. From the list below, please select all of the benefits that your joint action agency provides for your employees.**

**Leave-based benefits:**

**Please check the box if you offer this type of benefit. For each benefit you offer, please provide the minimum number of days (typically for newer employees) and maximum number of days (typically for employees who have been at the utility for longer) that each benefit includes.**

	<b>Click Here if Your Organization Offers This Benefit</b>	<b>Minimum Number of Days During First Year of Employment</b>	<b>Maximum Number of Days</b>
Total Paid Time Off (PTO typically replaces other types of leave such as annual leave, sick leave, personal leave, and bereavement leave).			
Vacation days			
Sick Days			
Parental Leave			
Bereavement Leave			
Other			

**If "other" leave-based benefits, please specify:**

---

**19) Insurance benefits:**

**Please check the box if you offer this benefit. For each benefit that you offer, please provide the percent of premiums that you cover for your employees, if applicable. If your organization has multiple plans, please include information for the plan that covers the employee only, and not employee plus spouse family plans.**

	<b>Click Here if Your Organization Offers This Benefit</b>	<b>Please Provide the Percent of Premiums You Cover for Your</b>

		<b>Employees, if Applicable</b>
Health Insurance		
Vision Insurance		
Dental Insurance		
HSA Employer Contribution		
Life Insurance		
Short-term disability		
Long-term disability		
Other		

If "other" insurance benefits, please specify:

---

**20) Retirement, pension, and financial planning benefits:**  
Please check the box if you offer this benefit.

	<b>Click Here if Your Organization Offers This Benefit</b>	<b>Please Provide the Percent Contribution from the Employer</b>
401(k), 401(a), 457, or 457(b)		
Pension		
Financial Planning		
Other		

If "other" retirement, pension, or financial planning benefits, please specify:

---

**21) Which month does your organization's fiscal year begin? Please note that APPA will use this question to help inform what time of year to conduct this survey.**

( ) January

( ) February

- ☐ March
- ☐ April
- ☐ May
- ☐ June
- ☐ July
- ☐ August
- ☐ September
- ☐ October
- ☐ November
- ☐ December

**22) Is there anything else you would like to share or any feedback you have about the Joint Action Agency Salary Survey? This can include feedback on the survey, additional job titles you would like to see included in the future, etc.**

---

**23) Are you ready to submit your response? \***

- ☐ Yes
- ☐ No

**Thank you for taking our survey. Your organization will receive a complimentary salary survey report when all data have been calculated.**