



Compliance Audit Report Public Version

**Confidential Information (including
Privileged and Critical Energy Infrastructure
Information) – Has Been Removed**

**E. I. du Pont Nemours and Company
NCR09008
August 4-5, 2009**

September 4, 2009

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EXECUTIVE SUMMARY

This final compliance audit report is the public version. Confidential information (including privileged and critical energy infrastructure information) has been redacted from this report. The full final compliance audit report was submitted to the audited entity and NERC.

E. I. du Pont Nemours and Company (E.I. du Pont) was audited on August 4-5, 2009 for compliance with the requirements contained in the currently mandatory and enforceable reliability standards in the 2009 NERC Compliance Monitoring and Enforcement Program (CMEP) that are applicable to E.I. du Pont's registered functions. E.I. du Pont is registered with SERC Reliability Corporation (SERC) as a Generator Operator (GOP). Nine standards were selected and identified to E.I. du Pont as subject to review during this audit. The audit focused on documents and other evidence provided to SERC by the staff of E.I. du Pont, and did not include any evidence obtained through system observation or inspection. The findings of the audit are based on the state of compliance and current mitigation activity at the time of the audit, and do not reflect past compliance activities or activities that will be completed in the future.

There were no open or recently closed mitigation plans for the audit team to review.

E.I. du Pont staff was requested to provide valid evidence of meeting each and every applicable requirement and sub-requirement contained in each standard that had been previously identified by SERC Compliance staff to E.I. du Pont as subject to this audit. E.I. du Pont staff responded by providing evidence in the form of reports, procedures, studies, and other documents. E.I. du Pont staff then cited specific portions of the evidence that demonstrated compliance. This evidence and the citations were documented and evaluated by the audit team to assess the level of compliance. If all of the requirements and sub-requirements of an audited standard were met, then E.I. du Pont would be judged as compliant. Likewise, if any of the requirements or sub-requirements were not fully met, then E.I. du Pont would be as judged to have a possible violation of the standard. A score of 100% is required for compliance.

The audit team found E.I. du Pont to be in compliance with all of the NERC Reliability Standards in the audit scope.

AUDIT PROCESS

The compliance audit process steps are detailed in the NERC CMEP. The NERC CMEP generally conforms to the United States Government Accountability Office Government Auditing Standards, and other generally accepted audit practices.

Objectives

All registered entities are subject to audit for compliance with all reliability standards applicable to the functions for which the registered entity is registered.¹ The audit objectives are:

- Independently review E.I. du Pont's compliance with the requirements of the reliability standards that are applicable to E.I. du Pont based on the E.I. du Pont registered functions.
- Validate compliance with applicable reliability standards from the NERC 2009 Implementation Plan list of actively monitored standards.

¹ North American Electric Reliability Corporation CMEP, paragraph 3.1, Compliance Audits

- Validate evidence of self-reported violations and previous self-certifications, confirm compliance with other requirements of the reliability standard, and review the status of associated mitigation plans.
- Document E.I. du Pont's compliance culture.

Scope

The scope of E.I. du Pont's audit included all monitored standards that are in the NERC 2009 CMEP. Based on the confirmed registration of E.I. du Pont, the nine reliability standards previously identified were the focus of the compliance audit.

Note: For the 2009 compliance program, the monitoring period for the compliance audit will generally be the lesser of: 1) Date of registration to current date; 2) Date of last audit or spot check to current date; or, 3) June 25, 2007 (Qualifying Facility) to current date. The monitoring period is not limited to the time period for which penalties and sanctions are assessed.

Confidentiality and Conflict of Interest

Code of conduct documentation for the regional entity staff was provided to E.I. du Pont in advance of the audit. Work history and conflict of interest forms submitted by each audit team member were provided to E.I. du Pont. E.I. du Pont was given an opportunity to object to an audit team member on the basis of a possible conflict of interest or the existence of other circumstances that could interfere with the audit team member's impartial performance of duties. E.I. du Pont accepted the audit team member participants with no objections.

On-site Audit

E.I. du Pont was contacted by letter on February 10, 2009 by SERC staff. The letter provided E.I. du Pont with their initial notification of their upcoming audit in 2009, and the desire to schedule audit dates that would be acceptable to both parties. SERC staff then provided formal acknowledgement of the scheduled audit dates and requested that E.I. du Pont both verify their currently registered functions, and complete and return an attached Pre-Audit Survey, within 30 days.

On May 9, 2009, SERC staff forwarded an Audit Detail Letter to E.I. du Pont, again confirming the scheduled audit dates and confirming E.I. du Pont's registered functions within SERC. The Audit Detail Letter also provided E.I. du Pont with notice of the Standards in Audit Scope, Proposed Audit Schedule, Audit Team Roster (with industry affiliations), and requested that E.I. du Pont Subject Matter Experts (SMEs) responsible for and knowledgeable of compliance submittals be available for interview during the audit. In addition to the Audit Detail Letter, E.I. du Pont was provided with a Non-Disclosure Agreement Signature Verification for audit team members, a list of Documentation and Evidence Requirements, and Questionnaires/Reliability Standard Auditor Worksheets (QRSAs) for each standard to be audited.

Interviews with SMEs were requested, in conjunction with documented evidence, to provide the audit team with additional information or clarification as a basis for professional judgment when validating compliance with reliability standards.

Methodology

A team of auditors was identified and conducted the audit of E.I. du Pont. The standards were grouped and scheduled for review to make the most efficient use of E.I. du Pont staff's time. The Audit Team Leader (ATL) initiated dialogue on each standard requirement, and then requested compliance evidence. This evidence, and E.I. du Pont's staff response, were both documented. E.I. du Pont staff was requested to show valid evidence of meeting each applicable requirement and sub-requirement contained in the nine standards that had been

previously identified by SERC to E.I. du Pont as subject to this audit. E.I. du Pont staff responded by providing evidence in the form of reports, procedures, studies, and other documents. E.I. du Pont staff would then cite specific portions of the evidence that demonstrated compliance.

This evidence, and the citations, were documented by the audit team scribe on the QRSAs and evaluated by the audit team for the level of compliance and agreement with the requirement. Discrepancies between the requirement and the evidence provided were the subject of dialogue among the team members and E.I. du Pont staff members, until it was determined whether each requirement was met by the evidence offered.

Once all the evidence was presented and discussed, if E.I. du Pont did not provide sufficient evidence to support a finding of compliance, then a possible violation would be identified by the team and E.I. du Pont staff would be informed.

Audit Overview

The audit team arrived at the E.I. du Pont offices at 2:20 PM, August 4, 2009. At 2:50 PM, August 4, 2009 the ATL, began the session with an opening presentation. He reviewed the NERC compliance plan for 2009 in general, and how it applied to E.I. du Pont specifically. The ATL introduced and reviewed the standards to be covered in the audit, and addressed both the expectations of E.I. du Pont staff, and the quality of evidence to be presented. The ATL also covered the basic procedure for the audit, and the bounding rules of conduct. E.I. du Pont staff made a brief presentation describing E.I. du Pont's corporate structure and compliance program. The staff of E.I. du Pont was introduced, and general housekeeping matters explained.

Audit

The audit team initially reviewed the registration status of E.I. du Pont with entity staff to verify applicability of each standard. Each standard's review began with a recitation of each requirement. E.I. du Pont staff then presented evidence supporting requirement compliance, or cited evidence previously provided to the audit team. The evidence was reviewed and discussed until the team reached agreement on the evidence. By audit team consensus, a determination of compliance was reached for each of the requirements and communicated to E.I. du Pont staff before proceeding to the next requirement. At that point, the team scribe would record the evidence presented to satisfy the requirement and the team's recommendation on that requirement, using the QRSAs.

The review of all applicable standards was completed at 12:39 PM, August 5, 2009 and the audit team met to review and discuss the findings. Following these discussions, the scribe collected all notes and evidence as needed and began to finalize the QRSAs.

Exit Briefing

The ATL presented an exit briefing to the assembled audit team and entity staff at 1:00 PM, August 5, 2009. This was followed by an informal response and questions from the E.I. du Pont staff. The exit briefing summarized the team's preliminary conclusions, including any items of potential noncompliance or possible violation with supporting information, areas of concern, any added information required, and the expected timeline for review and issuance of the audit report.

The ATL solicited informal comments from E.I. du Pont staff, along with requesting that they fill out formal feedback forms for submission to NERC and SERC.

The ATL thanked E.I. du Pont staff for their cooperation and support of the audit process. E.I. du Pont staff expressed their appreciation of the professional manner in which the audit was conducted.

The audit team left the E.I. du Pont meeting room at 2:14 PM on August 5, 2009.

Company Profile

E.I. du Pont (parent company) operates globally by regions, and contains multiple business platforms across the regions. The E.I. du Pont facility subject to this audit is located in Orange, Texas, where the Power Business Unit has the responsibility of providing and distributing utilities to all site tenants. E.I. du Pont is the Generator Operator for the SRW Cogeneration 420-megawatt QF facility, which has two gas turbine units and one steam turbine unit, and is connected to the electric power grid at 138 kV. These units primarily provide power and steam to the site, and then excess generation is sold to the electric power market.

Audit Specifics

The compliance audit was conducted on August 4-5, 2009 at the E.I. du Pont office in Orange, Texas.

Audit Team

Audit Team Role	Title	Company
Lead	Compliance Auditor	SERC
Member	Manager of Compliance Audits	SERC
Member	Senior Compliance Auditor	SERC

E.I. du Pont Audit Participants

Title	Organization
Power Business Unit Leader	E.I. du Pont
Electrical Specialist	E.I. du Pont
Steam System Supervisor	E.I. du Pont
Support Engineer	E.I. du Pont
Production Specialist	E.I. du Pont
Administrative Assistant	SRW Cogeneration
IT Consultant	E.I. du Pont
Security Chief	E.I. du Pont
Contract Administrator	E.I. du Pont
Attorney	Sutherland Asbill & Brennan, LLP
Consultant	The Energy Group
Vice President	SRW Cogeneration
RR&U Manager	SRW Cogeneration
Operations Specialist	SRW Cogeneration
Director, Power Assets	SRW Cogeneration
Control System Manager	E.I. du Pont
Director, Regulatory Monitoring	SRW Cogeneration
Director, Operations & Maintenance	SRW Cogeneration
Power Regulatory Analyst	SRW Cogeneration

AUDIT RESULTS

The audit team reviewed documents provided by E.I. du Pont prior to the audit, as requested in the Documentation and Evidence Requirements section of E.I. du Pont's Compliance Audit Certification Letter. Review of these documents (pre-audit) helped to establish the audit team's focus during the audit. The audit team verified that E.I. du Pont did not have any open or recently closed mitigation plans.

The audit team reviewed the evidence provided by E.I. du Pont to substantiate compliance with each standard requirement. The team requested clarification and/or additional supporting and corroborating evidence, as required, to obtain sufficient and appropriate evidence to support a determination of compliance.

In instances where the evidence provided by E.I. du Pont represented multiple facilities and/or large quantities of equipment, the audit team haphazardly selected evidence samples, from the different facilities and/or equipment, to facilitate a consensus agreement of the team that E.I. du Pont is, in the team's professional judgment, satisfactorily meeting the requirements of the standard or is in possible violation of the requirement.

If the audit team determined that the evidence provided by E.I. du Pont was insufficient or inappropriate to substantiate a determination of compliance, the team immediately informed E.I. du Pont's Subject Matter Experts of this fact. Additionally, the ATL, through coordination with E.I. du Pont's audit coordinator, ensured that E.I. du Pont's management was made aware of any potential for a finding of a possible violation in each instance, and of the basis for the team's determination.

The ATL clearly identified the team's findings of compliance and basis for their findings, areas of concern, and available remedies in an exit presentation to E.I. du Pont's management on completion of the audit.

The audit team documented their review and determination of compliance of each standard requirement on QRSAs. E.I. du Pont's policies, procedures, screenshots, operator logs, audio clips, correspondence and other evidence presented, as well as auditor comments and determinations of compliance documented on the QRSAs, were used in formulating this report.

The audit team found E.I. du Pont to be in compliance with all of the NERC Reliability Standards in the audit scope. Please see Findings Table below.

Prior to being forwarded to SERC's Manager of Compliance Audits, or his designee, for review and approval as SERC's Final Confidential Non-Public Audit Report of E.I. du Pont, the content and accuracy of this report:

- Is reviewed and commented on by all audit team members
- Is reviewed by E.I. du Pont's management for correction and comment, and
- Is reviewed and approved by the Audit Team Leader.

Upon final disposition of any possible violations determined by the audit team, if any, and redaction of appropriate information contained herein, this report will be reviewed and approved by SERC's Vice President and Director of Compliance before being issued as SERC's Final Public Audit Report of E.I. du Pont.

Findings

Reliability Standard	Requirement	Finding
BAL-001-0a	R1.	N/A
BAL-001-0a	R2.	N/A
BAL-001-0a	R3.	N/A
BAL-001-0a	R4.	N/A
BAL-002-0	R1.	N/A
BAL-002-0	R2.	N/A
BAL-002-0	R3.	N/A
BAL-002-0	R4.	N/A
BAL-002-0	R5.	N/A
BAL-002-0	R6.	N/A
BAL-003-0a	R1.	N/A
BAL-003-0a	R2.	N/A
BAL-003-0a	R3.	N/A
BAL-003-0a	R4.	N/A
BAL-003-0a	R5.	N/A
BAL-003-0a	R6.	N/A
BAL-004-0	R1.	N/A
BAL-004-0	R2.	N/A
BAL-004-0	R3.	N/A
BAL-004-0	R4.	N/A
BAL-005-0b	R1.	N/A
BAL-005-0b	R2.	N/A
BAL-005-0b	R3.	N/A
BAL-005-0b	R4.	N/A
BAL-005-0b	R5.	N/A
BAL-005-0b	R6.	N/A
BAL-005-0b	R7.	N/A
BAL-005-0b	R8.	N/A
BAL-005-0b	R9.	N/A
BAL-005-0b	R10.	N/A
BAL-005-0b	R11.	N/A
BAL-005-0b	R12.	N/A
BAL-005-0b	R13.	N/A
BAL-005-0b	R14.	N/A
BAL-005-0b	R15.	N/A
BAL-005-0b	R16.	N/A
BAL-005-0b	R17.	N/A
BAL-006-1	R1.	N/A
BAL-006-1	R2.	N/A
BAL-006-1	R3.	N/A

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Critical Energy Infrastructure Information) – Has Been Removed

BAL-006-1	R4.	N/A
BAL-006-1	R5.	N/A
CIP-001-1	R1.	Compliant
CIP-001-1	R2.	Compliant
CIP-001-1	R3.	Compliant
CIP-001-1	R4.	Compliant
CIP-002-1 through CIP-009-1		N/A
COM-001-1	R1.	N/A
COM-001-1	R2.	N/A
COM-001-1	R3.	N/A
COM-001-1	R4.	N/A
COM-001-1	R5.	N/A
COM-001-1	R6.	N/A
COM-002-2	R1.	Compliant
COM-002-2	R2.	N/A
EOP-001-0	R1.	N/A
EOP-001-0	R2.	N/A
EOP-001-0	R3.	N/A
EOP-001-0	R4.	N/A
EOP-001-0	R5.	N/A
EOP-001-0	R6.	N/A
EOP-001-0	R7.	N/A
EOP-002-2	R1.	N/A
EOP-002-2	R2.	N/A
EOP-002-2	R3.	N/A
EOP-002-2	R4.	N/A
EOP-002-2	R5.	N/A
EOP-002-2	R6.	N/A
EOP-002-2	R7.	N/A
EOP-002-2	R8.	N/A
EOP-002-2	R9.	N/A
EOP-003-1	R1.	N/A
EOP-003-1	R2.	N/A
EOP-003-1	R3.	N/A
EOP-003-1	R4.	N/A
EOP-003-1	R5.	N/A
EOP-003-1	R6.	N/A
EOP-003-1	R7.	N/A
EOP-003-1	R8.	N/A
EOP-004-1	R1.	N/A
EOP-004-1	R2.	N/A
EOP-004-1	R3.	N/A
EOP-004-1	R4.	N/A

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EOP-004-1	R5.	N/A
EOP-005-1	R1.	N/A
EOP-005-1	R2.	N/A
EOP-005-1	R3.	N/A
EOP-005-1	R4.	N/A
EOP-005-1	R5.	N/A
EOP-005-1	R6.	N/A
EOP-005-1	R7.	N/A
EOP-005-1	R8.	N/A
EOP-005-1	R9.	N/A
EOP-005-1	R10.	N/A
EOP-005-1	R11.	N/A
EOP-006-1	R1.	N/A
EOP-006-1	R2.	N/A
EOP-006-1	R3.	N/A
EOP-006-1	R4.	N/A
EOP-006-1	R5.	N/A
EOP-006-1	R6.	N/A
EOP-008-0	R1.	N/A
EOP-009-0	R1.	N/A
EOP-009-0	R2.	N/A
FAC-001-0	R1.	N/A
FAC-001-0	R2.	N/A
FAC-001-0	R3.	N/A
FAC-002-0	R1.	N/A
FAC-002-0	R2.	N/A
FAC-003-1	R1.	N/A
FAC-003-1	R2.	N/A
FAC-003-1	R3.	N/A
FAC-003-1	R4.	N/A
FAC-008-1	R1.	N/A
FAC-008-1	R2.	N/A
FAC-008-1	R3.	N/A
FAC-009-1	R1.	N/A
FAC-009-1	R2.	N/A
FAC-010-1	R1.	N/A
FAC-010-1	R2.	N/A
FAC-010-1	R3.	N/A
FAC-010-1	R4.	N/A
FAC-010-1	R5.	N/A
FAC-011-1	R1.	N/A
FAC-011-1	R2.	N/A
FAC-011-1	R3.	N/A

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FAC-011-1	R4.	N/A
FAC-011-1	R5.	N/A
FAC-013-1	R1.	N/A
FAC-013-1	R2.	N/A
FAC-014-1	R1.	N/A
FAC-014-1	R2.	N/A
FAC-014-1	R3.	N/A
FAC-014-1	R4.	N/A
FAC-014-1	R5.	N/A
FAC-014-1	R6.	N/A
INT-001-3	R1.	N/A
INT-001-3	R2.	N/A
INT-003-2	R1.	N/A
INT-004-2	R1.	N/A
INT-004-2	R2.	N/A
INT-005-2	R1.	N/A
INT-006-2	R1.	N/A
INT-007-1	R1.	N/A
INT-008-2	R1.	N/A
INT-009-1	R1.	N/A
INT-010-1	R1.	N/A
INT-010-1	R2.	N/A
INT-010-1	R3.	N/A
IRO-001-1	R1.	N/A
IRO-001-1	R2.	N/A
IRO-001-1	R3.	N/A
IRO-001-1	R4.	N/A
IRO-001-1	R5.	N/A
IRO-001-1	R6.	N/A
IRO-001-1	R7.	N/A
IRO-001-1	R8.	Compliant
IRO-001-1	R9.	N/A
IRO-002-1	R1.	N/A
IRO-002-1	R2.	N/A
IRO-002-1	R3.	N/A
IRO-002-1	R4.	N/A
IRO-002-1	R5.	N/A
IRO-002-1	R6.	N/A
IRO-002-1	R7.	N/A
IRO-002-1	R8.	N/A
IRO-002-1	R9.	N/A
IRO-003-2	R1.	N/A
IRO-003-2	R2.	N/A

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IRO-004-1	R1.	N/A
IRO-004-1	R2.	N/A
IRO-004-1	R3.	N/A
IRO-004-1	R4.	Compliant
IRO-004-1	R5.	N/A
IRO-004-1	R6.	N/A
IRO-004-1	R7.	N/A
IRO-005-2	R1.	N/A
IRO-005-2	R2.	N/A
IRO-005-2	R3.	N/A
IRO-005-2	R4.	N/A
IRO-005-2	R5.	N/A
IRO-005-2	R6.	N/A
IRO-005-2	R7.	N/A
IRO-005-2	R8.	N/A
IRO-005-2	R9.	N/A
IRO-005-2	R10.	N/A
IRO-005-2	R11.	N/A
IRO-005-2	R12.	N/A
IRO-005-2	R13.	Compliant
IRO-005-2	R14.	N/A
IRO-005-2	R15.	N/A
IRO-005-2	R16.	N/A
IRO-005-2	R17.	N/A
IRO-006-3	R1.	N/A
IRO-006-3	R2.	N/A
IRO-006-3	R3.	N/A
IRO-006-3	R4.	N/A
IRO-006-3	R5.	N/A
IRO-006-3	R6.	N/A
IRO-014-1	R1.	N/A
IRO-014-1	R2.	N/A
IRO-014-1	R3.	N/A
IRO-014-1	R4.	N/A
IRO-015-1	R1.	N/A
IRO-015-1	R2.	N/A
IRO-015-1	R3.	N/A
IRO-016-1	R1.	N/A
IRO-016-1	R2.	N/A
MOD-006-0	R1.	N/A
MOD-006-0	R2.	N/A
MOD-007-0	R1.	N/A
MOD-007-0	R2.	N/A
MOD-010-0	R1.	N/A

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MOD-010-0	R2.	N/A
MOD-012-0	R1.	N/A
MOD-012-0	R2.	N/A
MOD-016-1	R1.	N/A
MOD-016-1	R2.	N/A
MOD-016-1	R3.	N/A
MOD-017-0	R1.	N/A
MOD-018-0	R1.	N/A
MOD-018-0	R2.	N/A
MOD-019-0	R1.	N/A
MOD-020-0	R1.	N/A
MOD-021-0	R1.	N/A
MOD-021-0	R2.	N/A
MOD-021-0	R3.	N/A
NUC-001-1	R1.	N/A
NUC-001-1	R2.	N/A
NUC-001-1	R3.	N/A
NUC-001-1	R4.	N/A
NUC-001-1	R5.	N/A
NUC-001-1	R6.	N/A
NUC-001-1	R7.	N/A
NUC-001-1	R8.	N/A
NUC-001-1	R9.	N/A
PER-001-0	R1.	N/A
PER-002-0	R1.	N/A
PER-002-0	R2.	N/A
PER-002-0	R3.	N/A
PER-002-0	R4.	N/A
PER-003-0	R1.	N/A
PER-004-1	R1.	N/A
PER-004-1	R2.	N/A
PER-004-1	R3.	N/A
PER-004-1	R4.	N/A
PER-004-1	R5.	N/A
PRC-001-1	R1.	Compliant
PRC-001-1	R2.	Compliant
PRC-001-1	R3.	Compliant
PRC-001-1	R4.	N/A
PRC-001-1	R5.	Compliant
PRC-001-1	R6.	N/A
PRC-004-1	R1.	N/A
PRC-004-1	R2.	N/A
PRC-004-1	R3.	N/A

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PRC-005-1	R1.	N/A
PRC-005-1	R2.	N/A
PRC-007-0	R1.	N/A
PRC-007-0	R2.	N/A
PRC-007-0	R3.	N/A
PRC-008-0	R1.	N/A
PRC-008-0	R2.	N/A
PRC-009-0	R1.	N/A
PRC-009-0	R2.	N/A
PRC-010-0	R1.	N/A
PRC-010-0	R2.	N/A
PRC-011-0	R1.	N/A
PRC-011-0	R2.	N/A
PRC-015-0	R1.	N/A
PRC-015-0	R2.	N/A
PRC-015-0	R3.	N/A
PRC-016-0	R1.	N/A
PRC-016-0	R2.	N/A
PRC-016-0	R3.	N/A
PRC-017-0	R1.	N/A
PRC-017-0	R2.	N/A
PRC-018-1	R1.	N/A
PRC-018-1	R2.	N/A
PRC-018-1	R3.	N/A
PRC-018-1	R4.	N/A
PRC-018-1	R5.	N/A
PRC-018-1	R6.	N/A
PRC-021-1	R1.	N/A
PRC-021-1	R2.	N/A
PRC-022-1	R1.	N/A
PRC-022-1	R2.	N/A
TOP-001-1	R1.	N/A
TOP-001-1	R2.	N/A
TOP-001-1	R3.	Compliant
TOP-001-1	R4.	N/A
TOP-001-1	R5.	N/A
TOP-001-1	R6.	Compliant
TOP-001-1	R7.	Compliant
TOP-001-1	R8.	N/A
TOP-002-2	R1.	N/A
TOP-002-2	R2.	N/A
TOP-002-2	R3.	Compliant
TOP-002-2	R4.	N/A

Confidential Information (including Privileged and
Critical Energy Infrastructure Information) – Has Been Removed

TOP-002-2	R5.	N/A
TOP-002-2	R6.	N/A
TOP-002-2	R7.	N/A
TOP-002-2	R8.	N/A
TOP-002-2	R9.	N/A
TOP-002-2	R10.	N/A
TOP-002-2	R11.	N/A
TOP-002-2	R12.	N/A
TOP-002-2	R13.	Compliant
TOP-002-2	R14.	Compliant
TOP-002-2	R15.	Compliant
TOP-002-2	R16.	N/A
TOP-002-2	R17.	N/A
TOP-002-2	R18.	Compliant
TOP-002-2	R19.	N/A
TOP-003-0	R1.	Compliant
TOP-003-0	R2.	Compliant
TOP-003-0	R3.	Compliant
TOP-003-0	R4.	N/A
TOP-004-2	R1.	N/A
TOP-004-2	R2.	N/A
TOP-004-2	R3.	N/A
TOP-004-2	R4.	N/A
TOP-004-2	R5.	N/A
TOP-004-2	R6.	N/A
TOP-005-1	R1.	N/A
TOP-005-1	R2.	N/A
TOP-005-1	R3.	N/A
TOP-005-1	R4.	N/A
TOP-006-1	R1.	N/A
TOP-006-1	R2.	N/A
TOP-006-1	R3.	N/A
TOP-006-1	R4.	N/A
TOP-006-1	R5.	N/A
TOP-006-1	R6.	N/A
TOP-006-1	R7.	N/A
TOP-007-0	R1.	N/A
TOP-007-0	R2.	N/A
TOP-007-0	R3.	N/A
TOP-007-0	R4.	N/A
TOP-008-1	R1.	N/A
TOP-008-1	R2.	N/A
TOP-008-1	R3.	N/A
TOP-008-1	R4.	N/A

Confidential Information (including Privileged and
Critical Energy Infrastructure Information) – Has Been Removed

TPL-001-0	R1.	N/A
TPL-001-0	R2.	N/A
TPL-001-0	R3.	N/A
TPL-002-0	R1.	N/A
TPL-002-0	R2.	N/A
TPL-002-0	R3.	N/A
TPL-003-0	R1.	N/A
TPL-003-0	R2.	N/A
TPL-003-0	R3.	N/A
TPL-004-0	R1.	N/A
TPL-004-0	R2.	N/A
VAR-001-1	R1.	N/A
VAR-001-1	R2.	N/A
VAR-001-1	R3.	N/A
VAR-001-1	R4.	N/A
VAR-001-1	R5.	N/A
VAR-001-1	R6.	N/A
VAR-001-1	R7.	N/A
VAR-001-1	R8.	N/A
VAR-001-1	R9.	N/A
VAR-001-1	R10.	N/A
VAR-001-1	R11.	N/A
VAR-001-1	R12.	N/A
VAR-002-1	R1.	N/A
VAR-002-1	R2.	N/A
VAR-002-1	R3.	N/A
VAR-002-1	R4.	N/A
VAR-002-1	R5.	N/A

Compliance Culture

The audit team assessed E.I. du Pont's Internal Compliance Program in conjunction with the audit. Evidence reviewed in assessing the program included: E.I. du Pont's Compliance Pre-Audit Survey, NERC and Regional Reliability Standard Compliance Program and Implementation Policy document, compliance staff organizational charts, interviews with E.I. du Pont staff, and observation of staff responses in preparation for and during the audit.

Four factors that characterize a vigorous and effective compliance program are: active engagement and leadership by a company's senior management; preventive measures appropriate to the individual circumstances of the company; promptly detecting, stopping, and reporting a violation; and, ultimately fixing the problem and working to avoid future possible violations.

SERC recognizes that there isn't one standard formula for an effective compliance program, and that there will be variations in each company's program and culture based on countless factors, including the size and age of the company, as well as the nature and extent of its business. Ultimately what matters are the results, and whether the compliance program worked as it should.

The audit team determined that E.I. du Pont's Internal Compliance Program documents, and their staff's demonstrated compliance culture, indicate a relatively effective compliance culture.