

# Compensation of Hospital Employees



DOH 422-092/CHS 257 (REV 08/01/2012)

Calendar Year: 2013 Entity Name: Olympic Medical Center			(B) Breakdown of W-2 and/or 1099 MISC Compensation			(C) Retirement and Deferred Compensation	(D) Non-Taxable Benefits	(E) Total
(A) Employee Name (who does not have direct patient care responsibilities)	Indicate if Lead Administrator	Hospital if applicable	(i) Base Compensation	(ii) Bonus & Incentive Compensation	(iii) Other Reportable Compensation			
1 Lewis, Eric	Yes	Olympic Medical Center	180,070	0	1,792	12,104	19,897	213,863
2 Kennedy, Robert Scott	No	Olympic Medical Center	175,989	0	75	8,799	14,325	199,188
3 Rukstad, Julie	No	Olympic Medical Center	151,986	0	0	10,639	11,921	174,546
4 Newman, Richard	No	Olympic Medical Center	135,512	0	9,382	9,486	11,306	165,686
5 Wall, Lorraine	No	Olympic Medical Center	133,182	0	100	9,220	7,376	149,879
6								0
7								0
8								0
9								0
10								0
11								0
12								0
13								0
14								0
15								0

Add Additional lines as needed

Notes:

Please refer to IRS Form 990 and Schedule J for definitions of types of compensation

Form 990 Schedule J <http://www.irs.gov/pub/irs-pdf/i990sj.pdf>

If the five highest paid employees do not include the lead administrator, please report compensation information for the lead administrator on line 1, and for the five highest paid employees without patient care responsibilities on lines 2 through 6.

Please submit compensation information to DOH either by mail, fax or email to the following address:

Washington State Department of Health

Center for Health Statistics/Hospital and Patient Data Section

MS: 47814

Olympia, WA 98504-7814

Fax: (360) 753-4135

email: [hos@doh.wa.gov](mailto:hos@doh.wa.gov)