

# Compensation of Hospital Employees

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



Calendar Year: 2013  
 Entity Name: MORTON GENERAL HOSPITAL

(A) Employee Name (who does not have direct patient care responsibilities)	Indicate if Lead Administrator	Hospital if applicable	(B) Breakdown of W-2 and/or 1099 MISC Compensation			(C) Retirement and Deferred Compensation	(D) Non- Taxable Benefits	(E) Total
			(i) Base Compensation	(ii) Bonus & Incentive Compensation	(iii) Other Reportable Compensation			
1 DEARTH, RONALD	Y	MGH	205,994	10,000		9,944	225,938	
2 COURNYER, TIMOTHY		MGH	130,388			9,944	140,332	
3 ANDERSEN, JERRI		MGH	102,269			5,974	108,243	
4 ANDERSON, ROY		MGH	95,921			9,944	105,865	
5 WALTER, MITCH		MGH	88,958			5,974	94,932	
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/990si.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)