

Compensation of Hospital Employees



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

Calendar Year: 2014		Entity Name: Providence St. Peter 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 Medrice Coluccio	X		434,139	1,836,169	17,500	110,230	12,008	2,410,046
2 Jeffery Robert			252,208	40,123	22,015	27,888	18,433	360,667
3 Paul Wilkinson			233,944	36,599	17,500	27,714	7,936	323,693
4 Denise Marroni			225,908	29,520	0	21,080	15,481	291,989
5 Michelle James			186,376	16,610	8,573	22,236	7,601	241,396
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: Tax law requires that, when the Supplemental Executive Retirement Plan vests, the entire balance is reported as Taxable in the year of vesting.

The amount reported in (B)(ii) related to this vesting event for Medrice Coluccio is \$1,647,518.

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