

Compensation of Hospital Employees



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

Calendar Year: 2014 Entity Name: Sunnyside Community 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 Gallagher, John	CEO	Sunnyside Community Hospital	see attached Form 990 Schedule J part 3					0
2 Rowan, Cary	CFO	Sunnyside Community Hospital	see attached Form 990 Schedule J part 3					0
3 Van Wingerden, Arie		Sunnyside Community Hospital	139,442				17,308	156,750
4 Tubbs, Elizabeth		Sunnyside Community Hospital	130,279					130,279
5 Nguyen, Thuha N.		Sunnyside Community Hospital	119,321				25,193	144,513
6 Amos, Debbie		Sunnyside Community Hospital	120,428				8,550	128,978
7 Andersen, John		Sunnyside Community Hospital	96,602				25,193	121,795
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/f990sj.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) 763-4135
email: hos@doh.wa.gov

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART III - OTHER ADDITIONAL INFORMATION

THE CEO AND CFO WERE HIRED AND PAID THROUGH HEALTHTECH MANAGEMENT SERVICES. THE SALARIES ARE ESTABLISHED AT THE TIME OF HIRE AND PERIODICALLY THEREAFTER. IN ADDITION TO BASE SALARY, THE CEO AND CFO MAY BE ELIGIBLE FOR INCENTIVE COMPENSATION BASED ON PERFORMANCE PARAMETERS OUTLINED IN THE HOSPITAL'S CONTRACT WITH HEALTHTECH MANAGEMENT SERVICES AND APPROVED BY THE HOSPITAL BOARD. THE MOST RECENT YEAR IN WHICH THIS PROCESS OCCURED WAS 2014. THE MANAGEMENT FEE PAID IN 2014 WAS \$888,391.