

Compensation of Hospital Employees



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

Calendar Year: 2015		Entity Name: University of Washington Medical Center							
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	ZIENIEWICZ, STEPHEN P	1/1--8/23/2015	UWMC	414,708	0	1,307	29,276	13,379	458,670
	AUSTIN, GEOFF R.	8/24--12/31/2015	UWMC	110,456	0	766	8,400	5,049	124,672
2	PARKER, GRACE E.		UWMC	295,116	0	1,742	26,500	11,807	335,164
3	RILEY, PATRICIA E		UWMC	254,746	0	1,742	25,750	10,308	292,545
4	ANGIULO, CINDY LOU		UWMC	231,668	0	1,742	23,555	13,683	270,647
5	HERRMAN, JENNIFER M.		UWMC	220,141	0	1,742	17,016	14,893	253,792
									0
									0
									0
									0
									0
									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