Compensation of Hospital Employees



Calendar Year: 2019 PROVIDENCE SACRED HEART MEDICAL CENTER **Entity Name:** (B) Breakdown of W-2 and/or 1099 MISC Compensation (A)Employee Name (who does not have (ii) Bonus & (C) Retirement (D)Non-Indicate if direct patient care (iii) Other Reportable (i) Base Incentive Taxable Lead Hospital if and Deferred responsibilities) applicable Compensation Compensation **Benefits** Administrator Compensation Compensation (E) Total Χ **PEG CURRIE** 448.043 160.879 142,427 270.805 18,891 1.041.046 WILLIAM A DITTMAN JR 432.052 0 74.830 20.540 587.580 60.158 KATHERINE R TUTTLE 281,790 21,986 26,815 55,382 14,498 400,471 SHAWN E DOBBIN 252,222 32.672 2,419 67,146 16,087 370,546 SUSAN L STACEY 370,547 227,862 45,096 12.531 69,691 15,367 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

Community Health Systems/Hospital Financial and Charity Care Section

MS: 47853

Olympia, WA 98504-7853

email: hos@doh.wa.gov