

Calendar Year: 2021 Entity Name: King Country Public Hospital District No. 2								
			(B) Breakdown of W-2 and/or 1099 MISC Compensation					
(A)Employee Name (who does not have direct patient care responsibilities)	Indicate if Lead Administrator	Hospital if applicable	(i) Base Compensation	(ii) Bonus & Incentive Compensation	(iii) Other Reportable Compensation	(C) Retirement and Deferred Compensation	(D)Non- Taxable Benefits	(E) Total
<sup>1</sup> Jeff Tomlin	Х		824,795			164,464	16,581	1,005,840
<sup>2</sup> Tina Mycroft			491,913			75,610	23,310	590,833
<sup>3</sup> Christopher Bredeson			501,451		25,000	62,847	27,578	616,876
<sup>4</sup> Mary Shepler			342,799			42,403	16,479	401,681
<sup>5</sup> Robert Malte					625,799			625,799
6								0
7								0
8								0
9								0
10								0
11								0
12								0
13								0
14								0
15								0
Add Additional lines as need	ed		1 1		l			

Notes:

2,160,958

345,324 83,948

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