

Calendar Year: 2021 Entity Name: Virginia Mason Medical Center								
			(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
¹ Ketul Patel			1,306,982	1,791,306	466,883	19,375	11,599	3,596,145
² Gary Kaplan			1,285,162	844,618	236,541	12,453	23,715	2,402,489
³ Katerie Chapman	Y		552,058	87,467	20,400	13,460	33,057	706,442
⁴ William Poppy			114,574	0	402,289	0	16,609	533,472
⁵ Craig Goodrich			363,714	37,516	4,686	13,460	24,167	443,543
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