Compensation of Hospital Employees



Calendar Year:	2021					2		-
Entity Name: (A)Employee Name (who does not have direct patient care responsibilities)	Ocean Beach Hospital		(B) Breakdown of W-2 and/or 1099 MISC Compensation			-16-9-10 		
	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 Larry Cohen	CEO		230,729	33,442	14,410	17,786	17,262	313,629
2 Brenda Sharkey			173,898	1,078			17,262	192,237
³ Beth Hash			91,483	1,284	7,538	11,201	17,262	128,767
⁴ Julie Oakes			101,382	1,216		11,406	17,262	131,266
⁵ Deborah Persian			88,086	1,191			17,262	106,539
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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