Compensation of Hospital Employees



Calendar Year: 2020
Entity Name: PROVIDENCE SACRED HEART MEDICAL CENTER

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I/A)Employee Name (who does			(B) Breakdown of W-2 and/or 1099 MISC Compensation			(C) Detinens at	(D)Nan	
(A)Employee Name (who does not have direct patient care	Indicate if Lead	Hospital if	(i) Base	(ii) Bonus & Incentive	(iii) Other Reportable	(C) Retirement and Deferred	(D)Non- Taxable	
responsibilities)	Administrator	applicable	Compensation	Compensation	Compensation	Compensation	Benefits	(E) Total
1 PEG CURRIE	Х		439,460	164,521	145,076	130,591	20,657	900,305
² WILLIAM A DITTMAN JR			442,630	0	88,278	61,395	17,672	609,975
³ SUSAN L STACEY			244,424	81,215	25,149	3,998	17,227	372,013
⁴ KATHERINE R TUTTLE			271,430	20,690	29,232	32,428	15,654	369,435
⁵ SHAWN E DOBBIN			252,787	59,192	2,459	4,802	17,313	336,553
6								0
7								0
8								0
9								0
10								0
11								0
12								0
13								0
14				<u> </u>				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

