Compensation of Hospital Employees



Calendar Year: Entity Name:	2020 PeaceHealth Pea	ce Island Medical Center					DOIT 340-095 (REV 08/01/2016)
does not have direct patient care responsibilities)	Indicate if Lead Administrator	Hospital if applicable	(B) Breakdown (i) Base Compensation	of W-2 and/or 1099 I (ii) Bonus & Incentive Compensation	(iii) Other Reportable Compensation	(C) Retirement and Deferred Compensation	(D)Non- Taxable Benefits	(E) Total
1 Merry-Ann J. Keane	х		108,700	88,321	-	8,238	9,592	214,851
² Elizabeth A. Williams Gie	ge X		136,765	20,561	5,073	19,664	14,407	196,470
³ Theresa G. Loya			144,431	1,000	10,547	1,523	15,845	173,346
⁴ Shannon D. Harris			121,926	1,000	5,095	9,026	15,128	152,175
⁵ Michael S. Knowles			87,355	1,000	3,267	10,603	9,564	111,789
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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