## **Compensation of Hospital Employees**



Calendar Year:	2017							
Entity Name:	Swedish Edmo	nds						
			(B) Breakdown of W-2 and/or 1099 MISC Compensation				1	
(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> Sandeep Sachdeva			317,064	19,467	40,981	17,666	12,963	408,141
<sup>2</sup> Sarah Zabel	х		259,033	31,217	13,899	59,590	7,913	371,652
<sup>3</sup> Jean Doerge			215,420	21,933	17,029	15,855	22,791	293,028
<sup>4</sup> Cynthia Clegg			180,207	13,015	25,807	13,587	18,384	251,000
<sup>5</sup> Jeanne Rhynsburger			154,017	10,161	12,642	11,379	19,996	208,195
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