## Compensation of Hospital Employees



DOH 422-092/CHS 257 (REV` 08/01/2012)

Calendar Year: 2018 Entity Name: Ocean Beach Hospital								
	J. J. J.		(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> Larry Cohen	Yes		185,752	24,176	25,789	7,038	14,949	257,704
<sup>2</sup> Linda Kaino			127,261		2,480	8,661	14,949	153,351
<sup>3</sup> Julie Oakes			102,847		1,591	7,237	14,949	126,624
<sup>4</sup> Beth Hash			89,490		8,538	6,552	14,949	119,529
<sup>5</sup> Robert Dewitt			71,192		8,170	676	14,949	94,987
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 <a href="http://www.irs.gov/pub/irs-pdf/i990sj.pdf">http://www.irs.gov/pub/irs-pdf/i990sj.pdf</a>

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