

Compensation of Hospital Employees



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

Calendar Year: 2017		Entity Name: University of Washington Medical Center							
does not have direct patient care responsibilities)	Indicate if Lead Administrator	Hospital if applicable	(B) Breakdown of W-2 and/or 1099 MISC Compensation			(C) Retirement and Deferred Compensation	(D) Non-Taxable Benefits	(E) Total	
			(i) Base Compensation	(ii) Bonus & Incentive Compensation	(iii) Other Reportable Compensation				
1	AUSTIN, GEOFF R.	X	UWMC	495,532	0	1,800	29,091	16,867	543,289
2	RILEY, PATRICIA E		UWMC	282,768	0	25,800	27,000	12,316	347,883
3	SAYRE, CYNTHIA A.		UWMC	272,306	0	1,410	27,000	15,722	316,438
4	HERRMAN, JENNIFER M.		UWMC	251,377	0	1,778	18,987	11,883	284,024
5	THURNHOFER, WALTER		UWMC	202,442	0	25,800	20,537	12,316	261,095
									0
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									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
 Center for Health Statistics/Hospital and Patient Data Section
 MS: 47814
 Olympia, WA 98504-7814
 Fax: (360) 753-4135
 email: hos@doh.wa.gov