



Compensation of Hospital Employees

Calendar Year: 2017
Entity Name: NVH

(A) Employee Name (who 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 Ron O'Halloran	Administrator	NVH	88,829					88,829
2 Jan Gonzales	HRD	NVH	115,257		29,002	4,327	1,274	149,860
3 Marcia Naillon	CNO	NVH	112,436		5,374	10,400		128,210
4 Noreen Olma	Ancillary Mgr	NVH	109,585			13,000	1,999	124,584
5 Carlos Antuna	IT Mgr	NVH	98,948		7,590	1,065	2,499	110,102
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/f990sj.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