U.S. EQUAL EMPLO 2022 EMPLOYER IN												OMB C		08/2023 umber: 30	
				TION A											
		SECT	FION B	B – EMF	LOYE	R IDEN									
OFS COMPANY ID								.OYER N							
1027631						DAN			ORATI	ON					
ADDRESS								ITY/TOV				STATE		ZIP CO	
2200 PENNSYLVANIA AVE STE 800W WASH									DC 20037		37				
SECTION C – H	EADQU	JARTE	RS OR	ESTAF								able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME														
HEADQUARTERS OR ESTABLISHM	TERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN							STATE		ZIP CO	DDE				
	SECTI	ON D -	- EMPI		IDEN' 591995		TION N	NUMBE	ER (EIN)					
X YES (Employer Is Eligible				• EMPL oyer Is N	-					NO LO	NGER	IN BUS	INESS		
SE	CTION								if applic	able)					
			-	tity ID (
YES (Single-Establishm	nent Emp	oloyer is	Federa	l Contra	ctor)	YES (I	Multi-Es	stablishr	nent Em	ployer is	s Federa	l Contra	ctor)		
	Headqua	rters is	Federal	Contrac	tor) 🔲	YES (N	lon-Hea	dquarter	rs Establ	ishment	is Feder	al Cont	ractor)		
		XX	ES (OI	ne or M	ore Non	-Headau	arters E	Establisl	hments i	s Federa	al Contra	actor)			
				DN G -		-									
		551	112 - C	Offices of	of Othe	r Holdin	g Com	panies							
	SE	ECTIO	N H – V	VORKE	ORCE										1
	Llion	banic	1				Race/E		iy nic or L	otino					-
		atino			Μ	ale	NOL	пізраі		auno	Fer	nale			
JOB CATEGORIES	Male Female	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	Row Total	
		Ľ		Black An	1	Native I Other Pa	Americ Alasi	Two or		BI Africar		Native I Other Pa	Americ Alasl	Two or	
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	3 270	3 145	73 1979	5 136	7 422	0 10	0 5	0 46	23 1060	2 74	4 293	0	0	0 25	120 4471
Professionals	516	402	3356	208	1159	10	14	112	2241	247	979	4 16	7	98	9373
Technicians	587	136	2098	223	472	32	8	59	400	47	179	8	2	15	4266
Sales Workers Administrative Support Workers	120 70	88 202	1454 176	60 34	97 53	2	6 2	29 8	679 555	39 111	96 110	4 10	1 6	24 21	2699 1362
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives Laborers and Helpers	803 0	698 0	1828 1	626 0	762 0	41 0	18 0	99 0	1027 0	366 0	752 0	37 0	12 0	47 0	7116
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2022 REPORTING YEAR TOTAL	2369	1674	10965	1292	2972	107	53	353	5985	886	2413	79	30	230	29408
PRIOR 2021 REPORTING YEAR TOTAL		1570 SECTI	11262 ON I –	1274 WORK	3094 FORCI	125 E SNAP	42 SHOT	341 PERIO	6138 D	832	2592	86	29	241	29882
				12/16/2											
SECTION J Not Applicable	– HEA	DQUAI	RTERS	S OR ES	TABLI	SHME	NT-LEV	VEL CO	OMME	NTS (op	otional)				

U.S. EQUAL EN 2022 EMPLOY	OMB Co	EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 08/31/2024						
		RTIFICATION OF SUBMISSION						
OFS COMPANY ID	EMPLOYER	DENTIFICATION EMPLOYER NAME						
1027631								
ADDRE	SS	CITY/TOWN	STATE	ZIP CODE				
2200 PENNSYLVAN	IA AVE STE 800W	WASHINGTON	DC	20037				
	CERTIFICATION	COMMENTS (optional)						
Additional Non-Binary Employee Da See comments on impacted establis		essionals. Race/Ethnicity: 2 White (No	t Hispanic or Latir	10).				
and was prepar	uding any workforce demographic over the direction of the	ION STATEMENT data, provided in this report is correct s set forth in the form and accompany rt are punishable by law, US Code, ERTIFICATION	ying instructions.	"				
		:38 PM [EST]						
		RTIFYING OFFICIAL						
Name of Employer's			rtifying Official					
Patrici	a Kim	Vice President & Chief Co	unsel, Labor & Er	mployment				
Email Address of	Certifying Official	Telephone Numb	er of Certifying Officia	al				
PATRICIA.KIM@			19-7602					
DDIN	ΜΑΒΥ ΡΟΙΝΤ ΟΓ ΓΟΝΤΑ ΓΤ (ΡΟΓ) FOR EEO-1 COMPONENT 1 REPOR	RTING					
Name of Pr			oyer of Primary POC					
Patrici	a Kim	Vice President & Chief Co	unsel, Labor & Er Corporation	mployment				
Email Address	of Primary POC		nber of Primary POC					
	-							
PATRICIA.KIM@	DANAHEK.COM	202-4	19-7602					