U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)
2022 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)

EEOC Standard Form 100 (SF 100)
Revised 08/2023
OMB Control Number: 3046-0049
Expiration Date: 08/31/2024

SECTION A – TYPE OF REPORT
CONSOLIDATED REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID	EMPLOYER NAME
0367804	MCS PROGRESS PLACE

ADDRESS	CITY/TOWN	STATE	ZIP CODE
145 Progress Place, MCS-80804	SPRINGDALE	OH	45246

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
200307941

SECTION E – EMPLOYER FILING ELIGIBILITY
☒ YES (Employer Is Eligible to File) ☐ NO (Employer Is Not Eligible to File) ☐ EMPLOYER NO LONGER IN BUSINESS

SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)
Unique Entity ID (UEI): Not Applicable

☐ YES (Single-Establishment Employer is Federal Contractor) ☐ YES (Multi-Establishment Employer is Federal Contractor)

☐ YES (Headquarters is Federal Contractor) ☐ YES (Non-Headquarters Establishment is Federal Contractor)

☐ YES (One or More Non-Headquarters Establishments is Federal Contractor)

SECTION G – NAICS INFORMATION
455110 - Department Stores

SECTION H – WORKFORCE DEMOGRAPHIC DATA

JOB CATEGORIES	Race/Ethnicity														Row Total
	Hispanic or Latino		Not Hispanic or Latino												
			Male						Female						
	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	
Executive/Senior Level Officials and Managers	8	5	74	4	10	0	1	3	87	8	9	0	0	3	212
First/Mid-Level Officials and Managers	434	914	1381	303	249	6	8	71	3176	745	468	26	16	213	8010
Professionals	165	345	609	149	466	2	3	40	1286	294	445	4	5	95	3908
Technicians	4	0	8	4	0	0	0	0	1	3	0	0	1	3	24
Sales Workers	2809	11012	3037	2051	1039	66	59	315	14983	9190	5627	221	191	1237	51837
Administrative Support Workers	328	1032	567	296	82	7	20	55	2020	1185	345	16	32	145	6130
Craft Workers	208	32	486	88	30	4	10	20	76	17	22	1	0	4	998
Operatives	345	187	316	214	94	3	22	34	90	36	17	2	10	15	1385
Laborers and Helpers	1945	3689	1819	1705	465	36	81	219	3236	2306	987	56	133	312	16989
Service Workers	781	639	556	623	112	23	25	67	367	482	114	12	8	59	3868
CURRENT 2022 REPORTING YEAR TOTAL	7027	17855	8853	5437	2547	147	229	824	25322	14266	8034	338	396	2086	93361
PRIOR 2021 REPORTING YEAR TOTAL	6927	17641	9510	5830	2599	138	266	993	26161	14545	7984	359	471	2339	95763

SECTION I – WORKFORCE SNAPSHOT PERIOD
12/16/2022 - 12/31/2022

SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)
Not Applicable

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SECTION K – OFFICIAL CERTIFICATION OF SUBMISSION

EMPLOYER IDENTIFICATION

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0367804	MCS PROGRESS PLACE

ADDRESS	CITY/TOWN	STATE	ZIP CODE
145 Progress Place, MCS-80804	SPRINGDALE	OH	45246

CERTIFICATION COMMENTS (optional)

No Certification Comments Provided

CERTIFICATION STATEMENT

"I certify that the information, including any workforce demographic data, provided in this report is correct and true to the best of my knowledge and was prepared in conformity with the directions set forth in the form and accompanying instructions."

Knowingly and willfully false statements on this report are punishable by law, US Code, Title 18, Section 1001.

DATE OF CERTIFICATION

11/20/2023 1:55 PM [EST]

EMPLOYER'S CERTIFYING OFFICIAL

Name of Employer's Certifying Official	Title of Certifying Official
KATHY BERNHARDT	VP Shared Services and Benefits
Email Address of Certifying Official	Telephone Number of Certifying Official
[redacted]	[redacted]

PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING

Name of Primary POC	Title and Employer of Primary POC
Samantha Reinhart	Senior, HR Analytics Macy's
Email Address of Primary POC	Telephone Number of Primary POC
[redacted]	[redacted]