U.S. EQUAL EMPLO 2023 EMPLOYER IN													Revised ontrol Nu		46-0049													
				FION A																								
		SECT	<b>FION E</b>	B – EMP	PLOYE	R IDEN																						
OFS COMPANY ID DC55098								LOYER N																				
ADDRESS								CITY/TOV				STATE		ZIP CC	DDE													
4500 DORR \$								TOLED	-			OH		436	15													
SECTION C – H HQ/ESTABLISHMENT-LEVEL UNIT ID	<u>EADQU</u>	JARTE	<u>RS OR</u>	ESTAE						<mark>ΓΙΟΝ</mark> (i Γ-LEVEL		able)																
HEADQUARTERS OR ESTABLISHM	ENT-LEV	VEL ADI	DRESS				С	TTY/TOV	WN			STATE		ZIP CO	DDE													
	SECTI	(ON D -	- EMP	LOYER			TION	NUMBE	ER (EIN	)																		
				EMPL		FILING																						
YES (Employer Is Eligible			-	-							NGER	IN BUS	INESS															
SE	CTION			L CON 1 tity ID (					if applic	able)																		
<b>YES</b> (Single-Establishn	ıent Emţ		-	-					nent Em	ployer is	Federa	ıl Contra	ctor)															
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Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	0 4	8	10 79	2	4	0	0	1	1 69	0 9	1 14	0	0	0	17 195													
Professionals	3	11	74	2	8	0	0	1	58	3	15	0	0	2	177													
Technicians Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0													
	•	6	3	2	0	0	0	0	39	6	3	1	0	1	63													
Image: Matrix and ministrative Support Workers         2         6         3         2         0         0         0         0         39         6         3         1         0         1												0	0	0	59 0													
Craft Workers	14	0																										
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Craft Workers Operatives	14 0	0	0											0	Service Workers         0													
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Craft Workers Operatives Laborers and Helpers Service Workers	14 0 0 23 19	0 0 25 17	0 0 202 200	0 0 12 11	0 0 22 18	0 0 0	0 0 0	0 0 3 3	0 0 168 176	0	0	0	0	0	0													
Craft Workers Operatives Laborers and Helpers Service Workers CURRENT 2023 REPORTING YEAR TOTAL PRIOR 2022 REPORTING YEAR TOTAL	14 0 0 23 19	0 0 25 17 SECTIO	0 0 202 200 <b>ON I –</b>	0 0 12 11 <b>WORK</b> 12/7/2	0 0 22 18 <b>FORCI</b> 023 - 1	0 0 0 E <b>SNAP</b> 2/21/20	0 0 0 <b>SHOT</b> 23	0 0 3 3 PERIO	0 0 168 176 <b>D</b>	0 0 18 19	0 0 33 21	0 0 1	0 0 0	0 4	0 511													
Craft Workers Operatives Laborers and Helpers Service Workers CURRENT 2023 REPORTING YEAR TOTAL PRIOR 2022 REPORTING YEAR TOTAL SECTION J	14 0 0 23 19	0 0 25 17 SECTIO	0 0 202 200 <b>ON I –</b>	0 0 12 11 <b>WORK</b> 12/7/2	0 0 22 18 <b>FORCI</b> 023 - 1	0 0 0 E <b>SNAP</b> 2/21/20	0 0 0 <b>SHOT</b> 23	0 0 3 3 PERIO	0 0 168 176 <b>D</b>	0 0 18 19	0 0 33 21	0 0 1	0 0 0	0 4	0 511													
Craft Workers Operatives Laborers and Helpers Service Workers CURRENT 2023 REPORTING YEAR TOTAL PRIOR 2022 REPORTING YEAR TOTAL	14 0 0 23 19	0 0 25 17 SECTIO	0 0 202 200 <b>ON I –</b>	0 0 12 11 <b>WORK</b> 12/7/2	0 0 22 18 <b>FORCI</b> 023 - 1	0 0 0 E <b>SNAP</b> 2/21/20	0 0 0 <b>SHOT</b> 23	0 0 3 3 PERIO	0 0 168 176 <b>D</b>	0 0 18 19	0 0 33 21	0 0 1	0 0 0	0 4	0 511													
Craft Workers Operatives Laborers and Helpers Service Workers CURRENT 2023 REPORTING YEAR TOTAL PRIOR 2022 REPORTING YEAR TOTAL SECTION J	14 0 0 23 19	0 0 25 17 SECTIO	0 0 202 200 <b>ON I –</b>	0 0 12 11 <b>WORK</b> 12/7/2	0 0 22 18 <b>FORCI</b> 023 - 1	0 0 0 E <b>SNAP</b> 2/21/20	0 0 0 <b>SHOT</b> 23	0 0 3 3 PERIO	0 0 168 176 <b>D</b>	0 0 18 19	0 0 33 21	0 0 1	0 0 0	0 4	0 511													
Craft Workers Operatives Laborers and Helpers Service Workers CURRENT 2023 REPORTING YEAR TOTAL PRIOR 2022 REPORTING YEAR TOTAL SECTION J	14 0 0 23 19	0 0 25 17 SECTIO	0 0 202 200 <b>ON I –</b>	0 0 12 11 <b>WORK</b> 12/7/2	0 0 22 18 <b>FORCI</b> 023 - 1	0 0 0 E <b>SNAP</b> 2/21/20	0 0 0 <b>SHOT</b> 23	0 0 3 3 PERIO	0 0 168 176 <b>D</b>	0 0 18 19	0 0 33 21	0 0 1	0 0 0	0 4	0 511													
Craft Workers Operatives Laborers and Helpers Service Workers CURRENT 2023 REPORTING YEAR TOTAL PRIOR 2022 REPORTING YEAR TOTAL SECTION J	14 0 0 23 19	0 0 25 17 SECTIO	0 0 202 200 <b>ON I –</b>	0 0 12 11 <b>WORK</b> 12/7/2	0 0 22 18 <b>FORCI</b> 023 - 1	0 0 0 E <b>SNAP</b> 2/21/20	0 0 0 <b>SHOT</b> 23	0 0 3 3 PERIO	0 0 168 176 <b>D</b>	0 0 18 19	0 0 33 21	0 0 1	0 0 0	0 4	0 511													
Craft Workers Operatives Laborers and Helpers Service Workers CURRENT 2023 REPORTING YEAR TOTAL PRIOR 2022 REPORTING YEAR TOTAL SECTION J	14 0 0 23 19	0 0 25 17 SECTIO	0 0 202 200 <b>ON I –</b>	0 0 12 11 <b>WORK</b> 12/7/2	0 0 22 18 <b>FORCI</b> 023 - 1	0 0 0 E <b>SNAP</b> 2/21/20	0 0 0 <b>SHOT</b> 23	0 0 3 3 PERIO	0 0 168 176 <b>D</b>	0 0 18 19	0 0 33 21	0 0 1	0 0 0	0 4	0 511													
Craft Workers Operatives Laborers and Helpers Service Workers CURRENT 2023 REPORTING YEAR TOTAL PRIOR 2022 REPORTING YEAR TOTAL SECTION J	14 0 0 23 19	0 0 25 17 SECTIO	0 0 202 200 <b>ON I –</b>	0 0 12 11 <b>WORK</b> 12/7/2	0 0 22 18 <b>FORCI</b> 023 - 1	0 0 0 E <b>SNAP</b> 2/21/20	0 0 0 <b>SHOT</b> 23	0 0 3 3 PERIO	0 0 168 176 <b>D</b>	0 0 18 19	0 0 33 21	0 0 1	0 0 0	0 4	0 511													

	MPLOYMENT OPPORTUNITY YER INFORMATION REPORT (		R OMB Con	ndard Form 100 (SF 100) Revised 08/2023 htrol Number: 3046-0049 tion Date: 11/30/2026
	SECTION K – OFFICIAL CE	RTIFICATION OF SUBMISSION		
	EMPLOYER I	DENTIFICATION		
OFS COMPANY ID DC55098		EMPLOYER NAME Welltower OP LLC		
ADDR	ESS	CITY/TOWN	STATE	ZIP CODE
4500 DOR	R STREET	TOLEDO	OH	43615
	CERTIFICATION	COMMENTS (optional)		
No Certification Comments Provide	ea			
<i>"I certify that the information, inc</i>		<b>ION STATEMENT</b> lata, provided in this report is correct an	nd true to the be	est of my knowledge
and was prepa	ared in conformity with the direction Ifully false statements on this repo	s set forth in the form and accompanyin rt are punishable by law, US Code, Tit ERTIFICATION	g instructions."	,
		:39 PM [EST]		
Nama of Em-1ana	EMPLOYER'S CE r's Certifying Official	RTIFYING OFFICIAL Title of Certify	ing Official	
	Byrne	SVP, Head of Hu	-	
	•			
	f Certifying Official	Telephone Number o		1
PByrne@w	relltower.com	419-247-	2800	
		) FOR EEO-1 COMPONENT 1 REPORTI		
	Primary POC	Title and Employer	of Primary POC	
Tom	Foos	Human Capita	-	
		Welltower (		
Email Addres	s of Primary POC	Telephone Numbe	r of Primary POC	
tfoos@we	lltower.com	419-266-	0327	

EEOC Standard Form 100         Revised 08/2023         2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)         SECTION A – TYPE OF REPORT														46-0049	
						E OF R RS REF		I							
		SECT	TION E	B – EMP	LOYE	R IDEN	TIFICA	TION							
OFS COMPANY ID DC55098							EMPL	OYER N							
ADDRESS							C	ITY/TOW	VN			STATE		ZIP CC	DDE
4500 DORR S	TREET						٦	OLED	0			OH		436	15
SECTION C – HI	EADQU	ARTE	RS OR	ESTAE	BLISHN	MENT-I	LEVEL	IDENT	<b>IFICA</b>	FION (i	f applica	able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEAD	QUARTE				Γ-LEVEL	NAME				
DC55098								ltower I							
HEADQUARTERS OR ESTABLISHME		EL ADE	DRESS					ITY/TOV				STATE		ZIP CC	
4500 Dorr Street TOLEDO OH 43615													15		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 341096634 SECTION E – EMPLOYER FILING ELIGIBILITY															
<b>X YES</b> (Employer Is Eligible										NO LOI	NGER	IN BUS	INESS		
		F – FEI	DERA	L CON	RACT	OR DE	SIGNA	TION (							
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)															
<b>YES</b> (One or More Non-Headquarters Establishments is Federal Contractor)															
53	1120 -					<b>INFOR</b> uildings			varehou	ises)					
SECTION H - WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity															
	Hispanic Not Hispanic or Latino or Latino Male Female														
	OF La	atino			IV	lale	<u> </u>				rer	nale			
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JOB CATEGORIES	e	ale	te	Afri can	Ę	vaii c Is	Indi Vati	Ге F	te	ner	Ę	vaii c Is	Indi Vati	Le F	Total
	Male	Female	White	ck or Afric American	Asian	Hav	an I ka 1	Mo	White	Black or an Amer	Asian	Hav	an I ƙa 1	Mo	
		Ľ	-	Black or African American		Ve I	nerican Indian Alaska Native	P		Black or African American		Ve l	nerican Indian Alaska Native	P	
				Ë		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		Afr		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	
						- 0						- 0			
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	0	0	3 42	0	0	0	0	0	0 21	0	0	0	0	0	3 69
Professionals	0	3	36	1	2	0	0	1	39	1	3	0	0	0	86
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers Administrative Support Workers	0	0	0	0	0	0	0	0	0 20	0	0	0	0	0	0 22
Craft Workers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Operatives Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	3	83	2	5	0	0	1	80	1	5	0	0	0	181
PRIOR 2022 REPORTING YEAR TOTAL	1	2	83	2	3	0	0	1	93	2	5	1	0	0	193
	S	SECTIO	ON I –			E SNAP		PERIO	D						
SECTION J	– HEAI	DOUAI	RTERS			1221202 ISHME		VEL CO	OMME	NTS (op	tional)				
Not Applicable		- <b>L</b>								(•F					

U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	tandard F Revised ontrol Nu ation Dat	08/2023 mber: 30	46-0049
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OFS COMPANY ID		SECI		) – Elvii	LUIL			LOYERN	IAME						
DC55098							Wellto	wer OF	'LLC						
ADDRESS								ITY/TOV				STATE		ZIP CC	DDE
4500 DORR S	TREET							TOLED	0			OH		436	15
SECTION C – HI	EADQU	ARTE	RS OR	ESTAE	BLISHN	MENT-I	LEVEL	IDENT	'IFICA'	TION (i	f applica	able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEADQ	QUARTE				Γ-LEVEL	. NAME				
LX75707			DECC		-			Itower I						710.00	DE
HEADQUARTERS OR ESTABLISHME 8115 Preston Road			DRESS					ITY/TOV				STATE TX		ZIP CC 7522	
	<u> </u>		EMP			<b>FIFICA</b>				D					
341096634 SECTION E – EMPLOYER FILING ELIGIBILITY X YES (Employer Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS															
				•							NGER	IN BUS	INESS		
SEC	CTION					OR DE			if applic	able)					
<b>YES</b> (Single-Establishm	ent Emr		-	-					nent Em	nlover is	s Federa	l Contra	ctor)		
	-	-													
<b>YES</b> (Headquarters is Federal Contractor) <b>YES</b> (Non-Headquarters Establishment is Federal Contractor)															
☐ YES (One or More Non-Headquarters Establishments is Federal Contractor) SECTION G - NAICS INFORMATION															
53	1120 -								/arehou	uses)					
	SE	CTION	N H – V	VORKF	ORCE	DEMO	GRAP	HIC DA	ТА						
Race/Ethnicity															
Hispanic Not Hispanic or Latino or Latino Male Female															
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JOB CATEGORIES				icar		an lan	ive	Rac		ica		an lan	ive	Rac	Row
JOB CATEGORIES	e	ale	ite	Afr	an	waii ic Is	Ind	rel	ite	k or mei	an	waii ic Is	Ind	rel	Total
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				Black or African American		Native Hawaiian or Other Pacific Islande	American Indian or Alaska Native	Two or More Races	-	Black or African American		Native Hawaiian or Other Pacific Islande	American Indian or Alaska Native	Two or More Races	
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Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	0	0 6	4 27	0	3	0	0	1	1 33	0	0 7	0	0	0	9 84
Professionals	3	1	17	0	1	0	0	0	7	1	7	0	0	1	38
Technicians Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	1	2	1	2	0	0	0	0	9	3	1	0	0	1	20
Craft Workers	14	0	35	5	2	0	0	0	1	0	0	0	0	0	57
Operatives Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	20	9	84	9	8	0	0	2	51	8	15	0	0	2	208
PRIOR 2022 REPORTING YEAR TOTAL	16	7	80	7	7	0	0	1	48	9	3	0	0	2	180
	2	SECTION	JNI-			E SNAP		PERIO	D						
SECTION J	- HEA	DQUAI	RTERS					VEL CO	OMME	NTS (op	tional)				
No Comments Provided															

U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	tandard F Revised ontrol Nu ation Dat	08/2023 mber: 30	46-0049
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		SECT	TION H	B – EMP	LOYE	R IDEN	TIFIC	ATION							
OFS COMPANY ID DC55098								LOYER N wer OF							
ADDRESS							С	ITY/TOV	VN			STATE		ZIP CC	DE
4500 DORR S	TREET						-	FOLED	0			OH		436	15
SECTION C – HI HQ/ESTABLISHMENT-LEVEL UNIT ID	EADQU	ARTE	RS OR	ESTAE	BLISH HEAD	<b>MENT-I</b> QUARTE	L <b>EVEL</b> RS OR E	<b>IDENT</b> STABLIS	<b>IFICA</b> SHMEN	<b>ΓΙΟΝ</b> (i Γ-LEVEL	f applica NAME	able)	<u> </u>		
LX75385							Wel	Itower I	nc.						
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS     CITY/TOWN     STATE     ZIP CODE       233 Wilshire Blvd, Suite 220     SANTA MONICA     CA     90401       SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)															
	SECTI	ON D -	EMP		IDEN' 341096		TION	NUMBE	R (EIN	)					
SECTION E – EMPLOYER FILING ELIGIBILITY  X YES (Employer Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS															
	CTION			•	-										
						Not App			ii uppiie						
<b>YES</b> (Single-Establishm	ent Emp	oloyer is	Federa	l Contra	ctor)	YES (	Multi-E	stablishn	nent Em	ployer is	s Federa	l Contra	ctor)		
<ul> <li>YES (Single-Establishment Employer is Federal Contractor)</li> <li>YES (Multi-Establishment Employer is Federal Contractor)</li> <li>YES (Headquarters is Federal Contractor)</li> <li>YES (Non-Headquarters Establishment is Federal Contractor)</li> </ul>															
YES (Headquarters is Federal Contractor) YES (Non-Headquarters Establishment is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor)															
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53	81120 -   SE					DEMO				ises)					
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Hispanic Not Hispanic or Latino														1	
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				can		an o lano	an	Sace		ical		an e	an ive	Raci	Row
JOB CATEGORIES	e	ale	te	Afri	an	vaii c Is	Indi Nati	reF	te	r or	an	vaii c Is	Indi Nati	reF	Total
	Male	Female	White	Black or African American	Asian	Havacifi	American Indian or Alaska Native	β	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islande	American Indian or Alaska Native	Мо	
		ш	-	ack		ive r På	eric Vlas	o		lical		ive r Pa	eric Vlas	o or	
				B		Native Hawaiian or Other Pacific Islander	AmA	Two or More Races		Afi		Native Hawaiian or Other Pacific Islander	AmA	Two or More Races	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	4	4	2	0	0	1	12
Professionals Technicians	0	2	3	0	0	0	0	0	0	0	0	0	0	0	5
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers Craft Workers	0	2	0	0	0	0	0	0	1 0	0	1 0	0	0	0	4
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	4	4	0	0	0	0	0	5	4	3	0	0	1	21
PRIOR 2022 REPORTING YEAR TOTAL	0	3	6	0	0	0	0	1	5	4	2	0	0	1	22
	5	SECTIO	DNI-	WORK	FORC	E SNAP	SHOT	PERIO	D						<u>.</u>
						1221202									
SECTION J No Comments Provided	– HEAI	DQUAI	RTERS	S OR ES	TABL	ISHME	NT-LE	VEL CO	OMME	NTS (op	tional)				
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U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	tandard F Revised ontrol Nu ration Dat	08/2023 mber: 304	46-0049
				TION A							<u> </u>			·	
		SECT	TION F	B – EMP	LOYE	R IDEN									
OFS COMPANY ID DC55098								LOYER N							
ADDRESS							С	ITY/TOW	VN			STATE		ZIP CC	DE
4500 DORR S	TREET							FOLED	0			OH		436′	15
SECTION C – HI HQ/ESTABLISHMENT-LEVEL UNIT ID	EADQU	ARTE	RS OR	ESTAE		<b>MENT-I</b> QUARTE						able)			
PA36801								Itower I							
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS     CITY/TOWN     STATE     ZIP CODE       767 Fifth Avenue, 8th Floor     NEW YORK     NY     10153       SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)															
	SECTI	ON D -	EMP		IDEN' 341096		TION	NUMBE	R (EIN	)					
SECTION E – EMPLOYER FILING ELIGIBILITY  X YES (Employer Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS															
	CTION			•	-										
		Un	ique Er	ntity ID (	<u>UEI)</u> :	Not App	olicable								
YES (Single-Establishment Employer is Federal Contractor) VES (Multi-Establishment Employer is Federal Contractor)															
<b>YES</b> (Headquarters is Federal Contractor) <b>YES</b> (Non-Headquarters Establishment is Federal Contractor)															
YES (One or More Non-Headquarters Establishments is Federal Contractor)         SECTION G – NAICS INFORMATION															
53	1120 -	Lessor	s of No	onreside	ential B	uildings	(excep	ot Miniw		ises)					
	SE	CTION	N H – V	VORKF	ORCE										<del>1</del>
Race/Ethnicity       Hispanic     Not Hispanic or Latino															
		atino			N	lale		mopun		atino	Fer	nale			
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JOB CATEGORIES				Black or African American		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		Black or African American		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	Row
JOB CATEGORIES	Male	Female	White	ck or Afric American	Asian	wai ic Is	nerican Indian Alaska Native	Dre	White	Black or an Amer	Asian	wai ic Is	nerican Indian Alaska Native	Dre	Total
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Executive/Senior Level Officials and Managers	0	0	3	0	1	0	0	0	0	0	1	0	0	0	5
First/Mid-Level Officials and Managers Professionals	1	0	8 16	0	3 5	0	0	0	4 5	1 0	2	0	0	0	19 34
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	3	27	1	9	0	0	0	10	1	8	0	0	1	62
PRIOR 2022 REPORTING YEAR TOTAL	2	2	25	2	8	0	0	0	10	1	8	0	0	1	59
	8	SECTIO	ON I –	WORK 12072		E SNAP		PERIO	D						
SECTION J	– HEAI	DQUAI	RTERS					VEL CO	OMME	NTS (op	tional)				
No Comments Provided															

U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	tandard F Revised ontrol Nu ration Dat	08/2023 mber: 30	46-0049
				TION A								Linpi			2020
		SECT		B – EMP											
OFS COMPANY ID DC55098					-		EMPI	LOYER N							
ADDRESS							С	ITY/TOV	VN			STATE		ZIP CC	DDE
4500 DORR S	TREET						-	FOLED	0			ОН		436	15
SECTION C - HI	EADQU	ARTE	RS OR	ESTAB	BLISHN	MENT-I	LEVEL	IDENT	IFICA	<b>ΓΙΟΝ</b> (i	f applica	able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEADQ	QUARTE				Γ-LEVEL	NAME				
DF56511			DECC					Itower I				OTATE		710.00	DE
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS     CITY/TOWN     STATE     ZIP CODE       550 Heritage Drive, Suite 200     JUPITER     FL     33458															
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 341096634															
SECTION E – EMPLOYER FILING ELIGIBILITY X YES (Employer Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS															
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															
<u>Unique Entity ID (UEI)</u> : Not Applicable <b>YES</b> (Single-Establishment Employer is Federal Contractor) <b>YES</b> (Multi-Establishment Employer is Federal Contractor)															
YES (Single-Establishment Employer is Federal Contractor) YES (Multi-Establishment Employer is Federal Contractor)															
<b>YES</b> (Headquarters is Federal Contractor) <b>YES</b> (Non-Headquarters Establishment is Federal Contractor) <b>YES</b> (One or More Non-Headquarters Establishments is Federal Contractor)															
	YES (One or More Non-Headquarters Establishments is Federal Contractor)         SECTION G – NAICS INFORMATION														
53	1120 -		s of No	onreside VORKF	ential B			ot Miniw	/arehou	ises)					
	SE		<u> </u>	VUKKI	UKCE										
Race/Ethnicity       Hispanic     Not Hispanic or Latino															
	or La	atino		r –	M	lale	r	r –		r –	Fer	nale	r		-
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				can		an c and	an c ve	ace		can		an c and	an c ve	ace	Row
JOB CATEGORIES	e	ale	ē	Afri can	E	vaiia c Isl	ndi Vati	e R	ē	r or neri	Ę	vaiia c Isl	ndia Vati	re R	Total
	Male	Female	White	ck or Afric American	Asian	Hav Icifi	an I ka N	Mo	White	Black or an Amer	Asian	Hav	an I ka N	Mo	
		ш	_	Black or African American		ive I r Pa	American Indian or Alaska Native	o.	_	Black or African American		Native Hawaiian or Other Pacific Islande	American Indian or Alaska Native	o	
				B		Native Hawaiian or Other Pacific Islander	A A A	Two or More Races		Afr		Native Hawaiian or Other Pacific Islander	₩ A W	Two or More Races	
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	0	2	0	0	0	0	0	0	7	0	0	0	0	0	0 11
Professionals	0	3	2	0	0	0	0	0	7	1	1	0	0	0	14
Technicians Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	1	0	0	0	0	0	0	8	3	0	1	0	0	13
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	6	4	0	0	0	0	0	22	4	2	1	0	0	39
PRIOR 2022 REPORTING YEAR TOTAL	0	3	6	0	0	0	0	0	20	3	3	1	0	0	36
	5	SECTIO	ON I –	WORK		E SNAP		PERIO	D						
SECTION J No Comments Provided	– HEAI	DQUAI	RTERS					VEL CO	OMME	NTS (op	tional)				
No comments r tovided															