U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)

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

| 2022 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1) | | | | | | | | OMB Control Number: 3046-0049 Expiration Date: 08/31/2024 | | | | | | | |
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| | | | | | | E OF RI ED REP | | | | | | | | | |
| | | SECT | | | | | | TION | | | | | | | |
| OFS COMPANY ID | SECTION B – EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME | | | | | | | | | | | | | | |
| G111713 | | | | | NO | RFOLK | SOUT | HERN (| CORP | DRATIC | N | | | | |
| ADDRESS | | | | | | | CI | TY/TOW | /N | | | STATE | | ZIP CC | DDE |
| 650 West Peachtree Street, NW ATLANTA GA 30308 | | | | | | | | | | | | | | | |
| SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) | | | | | | | | | | | | | | | |
| HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| HEADQUARTERS OR ESTABLISHMI | NT-LEX | /EL ADI | DRESS | | | | CI | TY/TOW | /N | | | STATE | | ZIP CC | DE |
| TIEND QUINTERS ON ESTI IDDISTINI | SIVI EE | EE / IDE | TESS | | | | CH 1/10 WIN | | | | | Zii cob | | | ,DE |
| CROWN D. FINDLOWED INC. THOU WITH THE CONTROL OF TH | | | | | | | | | | | | | | | |
| SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 521188014 | | | | | | | | | | | | | | | |
| SECTION E – EMPLOYER FILING ELIGIBILITY | | | | | | | | | | | | | | | |
| X 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): G5K3LBGJEV89 | | | | | | | | | | | | | | | |
| ☐ 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) | | | | | | | | | | | | | | | |
| X YES (One or More Non-Headquarters Establishments is Federal Contractor) | | | | | | | | | | | | | | | |
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| | | | 48 | 2111 - I | Line-Ha | aul Railı | oads | | | | | | | | |
| | SE | CTION | V H – V | VORKF | ORCE | DEMO | | | | | | | | | 1 |
| | | | 1 | | | | Race/E | | • | | | | | | |
| | Hispanic Not Hispanic or Latino or Latino Male Female | | | | | | | | | | | | | | |
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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 | ve an | Two or More Races | Row |
| JOB CATEGORIES | | <u>o</u> | a | ck or Afric American | _ | aiii Isl | nerican Indian Alaska Native | e R | a | or ieri | _ | Native Hawaiian Other Pacific Islan | American Indian Alaska Native | e R | Total |
| | Male | Female | White | eric | Asian | aw iii aw | n N | lor | White | Black or an Amer | Asian | aw ific | n a | <u>ō</u> | |
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| | | | | | | | | | | | | | | | |
| Executive/Senior Level Officials and Managers | 0 | 0 | 17 | 3 | 0 | 0 | 0 | 1 | 4 | 0 | 1 | 0 | 0 | 0 | 26 |
| First/Mid-Level Officials and Managers Professionals | 7 73 | 1 26 | 195 2007 | 26 422 | 7 120 | 1 5 | 0 12 | 3 42 | 53 349 | 15 286 | 2 57 | 0 | 0 | 0 16 | 310 3415 |
| Technicians | 7 | 1 | 214 | 53 | 2 | 0 | 1 | 4 | 49 | 41 | 0 | 0 | 0 | 4 | 376 |
| Sales Workers | 0 | 0 | 28 | 2 | 0 | 0 | 0 | 0 | 10 | 3 | 0 | 0 | 0 | 3 | 46 |
| Administrative Support Workers | 3 | 7 | 95 | 64 | 1 | 0 | 0 | 1 | 84 | 180 | 1 | 0 | 0 | 5 | 441 |
| Craft Workers | 120 | 2 | 6225 | 753 | 24 | 1 | 44 | 26 | 66 | 26 | 0 | 0 | 0 | 1 | 7288 |
| Operatives Laborers and Helpers | 148 12 | 7 | 5035 460 | 1031 104 | 45 3 | 0 | 30 0 | 105 7 | 114 12 | 54 4 | 0 | 0 | 0 | 0 | 6576 602 |
| Service Workers | 10 | 0 | 93 | 104 | 0 | 0 | 0 | 2 | 9 | 2 | 0 | 0 | 0 | 0 | 132 |
| CURRENT 2022 REPORTING YEAR TOTAL | 380 | 44 | 14369 | 2474 | 202 | 9 | 87 | 191 | 750 | 611 | 62 | 0 | 1 | 32 | 19212 |
| COMMENT 2022 NEI CIVING TEAN TOTAL | 000 | 17 | 1 1000 | - // - | 202 | | 01 | 101 | , 50 | 011 | - V- | | | - J | 10212 |
| PRIOR 2021 REPORTING YEAR TOTAL | 339 | 37 | 13809 | 2146 | 149 | 4 | 82 | 141 | 759 | 538 | 52 | 0 | 2 | 28 | 18086 |
| | | SECTION | ON I – | | | E SNAP | | PERIO | D | 1 | | 1 | 1 | | 1 |
| CD CTVON I | TTT 4.2 | D O T I I I | DEED | | | 2/31/20 | | TEL CO | | ITTO (| . 1) | | | | |

SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)

Not Applicable

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 K. | OFFICIAL | CEDTIFICATION | NOE SHEMISSION |
|------------|----------|---------------|----------------|

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 10/31/2023 2:28 PM [EST]

| EMPLOYER'S CERTIFYING OFFICIAL | | | | | |
|--|---|--|--|--|--|
| Name of Employer's Certifying Official | Title of Certifying Official | | | | |
| Susan Decker | EEO Compliance & Reporting Manager | | | | |
| Email Address of Certifying Official | Telephone Number of Certifying Official | | | | |
| eeo@nscorp.com | 470-463-6342 | | | | |
| PRIMARY POINT OF CONTACT (POC |) FOR EEO-1 COMPONENT 1 REPORTING | | | | |
| Name of Primary POC | Title and Employer of Primary POC | | | | |
| Susan Decker | EEO Compliance & Reporting Manager | | | | |
| | Norfolk Southern Corporation | | | | |
| Email Address of Primary POC | Telephone Number of Primary POC | | | | |
| eeo@nscorp.com | 470-463-6342 | | | | |