

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2024 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT CONSOLIDATED REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID G111713			EMPLOYER NAME NORFOLK SOUTHERN CORPORATION												
ADDRESS 650 West Peachtree Street Northwest						CITY/TOWN ATLANTA				STATE GA		ZIP CODE 30308			
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) 521188014															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): G5K3LBGJEV89 <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input checked="" type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input checked="" type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input checked="" type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 482111 - Line-Haul Railroads															
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	0	0	17	2	1	0	0	1	6	0	0	0	0	0	27
First/Mid-Level Officials and Managers	4	0	202	26	11	1	1	4	60	12	1	2	0	2	326
Professionals	51	16	2004	405	128	6	11	47	322	276	6	56	1	17	3346
Technicians	5	1	216	62	2	0	1	5	52	43	0	0	0	3	390
Sales Workers	1	0	20	1	1	0	0	0	8	3	0	1	0	0	35
Administrative Support Workers	3	4	85	53	0	0	0	1	77	140	1	2	0	2	368
Craft Workers	112	1	6704	832	37	0	42	56	80	24	0	0	1	1	7890
Operatives	118	4	5006	1135	69	2	31	118	117	55	5	0	0	4	6664
Laborers and Helpers	9	0	243	77	1	1	1	6	0	0	0	0	0	0	338
Service Workers	2	0	86	20	0	1	0	2	7	4	0	0	0	0	122
CURRENT 2024 REPORTING YEAR TOTAL	305	26	14583	2613	250	11	87	240	729	557	13	61	2	29	19506
PRIOR 2023 REPORTING YEAR TOTAL	431	50	15052	2862	260	11	92	228	785	673	89	0	3	32	20568
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/1/2024 - 12/31/2024															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional) Not Applicable															

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SECTION K – OFFICIAL CERTIFICATION OF SUBMISSION				
EMPLOYER IDENTIFICATION				
OFS COMPANY ID G111713		EMPLOYER NAME NORFOLK SOUTHERN CORPORATION		
ADDRESS 650 West Peachtree Street Northwest		CITY/TOWN ATLANTA	STATE GA	ZIP CODE 30308
CERTIFICATION COMMENTS (optional)				
No comments				
CERTIFICATION STATEMENT <i>"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."</i> Knowingly and willfully false statements on this report are punishable by law, US Code, Title 18, Section 1001.				
DATE OF CERTIFICATION 6/24/2025 3:05 PM [EST]				
EMPLOYER'S CERTIFYING OFFICIAL				
Name of Employer's Certifying Official Susan Decker		Title of Certifying Official EEO Compliance & Reporting Manager		
Email Address of Certifying Official susan.decker@nscorp.com		Telephone Number of Certifying Official 470-463-6342		
PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING				
Name of Primary POC Susan Decker		Title and Employer of Primary POC EEO Compliance & Reporting Manager Norfolk Southern Corporation		
Email Address of Primary POC susan.decker@nscorp.com		Telephone Number of Primary POC 470-463-6342		