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)													Expiration Date: 08/31/2024			
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				ONSOL												
OES COMBANN ID		SECT	TION B	– EMP	LOYE	R IDEN			ANG							
OFS COMPANY ID X336156		EMPLOYER NAME AGILENT TECHNOLOGIES														
ADDRESS						CITY/TOWN						STATE ZIP CODE				
5301 STEVENS CREEK BLVD				SANTA CLARA							CA 95051			51		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME																
ng/establishment-level unti id																
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRES				ESS CITY/TOWN								STATE	CATE ZIP CODE			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 770518772																
	;	SECTI	ON E –	EMPL	OYER	FILING	G ELIGI	BILIT	Y							
X YES (Employer Is Eligib	e to File)	□ NO	(Emple	oyer Is N	lot Elig	ible to F	ile) 🔲	EMPL	OYER I	NO LON	IGER I	IN BUS	INESS			
SE	CTION			L CONT tity ID (if applic	able)						
☐ YES (Single-Establish	nent Emp								nent Em	ployer is	Federa	l Contra	ctor)			
X YES	_															
	110000400							•		s Federa						
		S	ECTIO	N G - I	NAICS	INFOR	MATIO	N								
325413 - In-Vitro Diagnostic Substance Manufacturing SECTION H – WORKFORCE DEMOGRAPHIC DATA																
SECTION H – WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity																
	Hispanic Not Hispanic or Latino															
		or Latino			Male					Female						
				au		Native Hawaiian or Other Pacific Islande	American Indian or Alaska Native	Two or More Races		ä		Native Hawaiian or Other Pacific Islande	American Indian or Alaska Native	Two or More Races		
JOB CATEGORIES		o o		Black or African American	_	aiia Isla	nerican Indian Alaska Native	20		Black or African American	_	ajja Isla	nerican Indian Alaska Native	82	Row Total	
	Male	Female	White	ck or Afric American	Asian	a ific	드	<u>0</u>	White	Black or an Ame	Asian	aw ific	드립	<u>0</u>	10.01	
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Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	34	0 26	7 434	0 29	2 75	3	0	9	234	0 16	71	0	0	5	13 938	
Professionals	93	93	1015	43	332	6	3	26	712	60	324	1	0	43	2751	
Technicians	110	45	652	52	117	5	6	37	204	24	59	2	2	7	1322	
Sales Workers	16	12	245	14	21	0	1	9	134	8	24	0	1	1	486	
Administrative Support Workers	31	49	58	22	9	0	1	3	155	73	19	2	2	12	436	
Craft Workers	0	0 52	0 132	0	0 45	1	0	8	73	0 43	0 48	0	0	0 4	0 519	
Operatives Laborers and Helpers	38	0	0	74 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 2022 REPORTING YEAR TOTAL	. 322	277	2543	234	601	15	13	92	1516	224	545	6	5	72	6465	
PRIOR 2021 REPORTING YEAR TOTAL	277	234	2437	196	565	15	9	73	1461	186	500	5	6	61	6025	
		SECTIO		WORK 12/16/2				PERIO	D							
SECTION	J – HEA	DQUAI	RTERS	OR ES	TABLI	SHME	NT-LEV	EL CO	OMME	NTS (opt	tional)					
Not Applicable																

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

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SECTION R - OFFICIAL CERTIFICATION OFS COMPANY ID X336156 ADDRESS ADDRESS ADDRESS CITY/TOWN STATE ZIP CODE 5301 STEVENS CREEK BLVD SANTA CLARA CA 95051

CERTIFICATION COMMENTS (optional)

Additional Employee Data: 1 x Non-Binary gender employee in Job Category Administrative Support Workers, Race/Ethnicity: Hispanic or Latino; 1 x Non-Binary gender employee in Job Category Sales, Workers Race/Ethnicity: White (Not Hispanic or Latino); 1 x Non-Binary gender employee in Job Category Professionals, Race/Ethnicity: Two or More Races; 1 x Non-Binary employee in Job Category Technicians, Race/Ethnicity: Two or More Races

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 11/30/2023 2:37 PM [EST]

EMPLOYER'S CERTIFYING OFFICIAL Name of Employer's Certifying Official Title of Certifying Official DAVE NICKERSON US HR COMLIANCE PM Email Address of Certifying Official Telephone Number of Certifying Official DAVE.NICKERSON@AGILENT.COM 512-332-8297 PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING Name of Primary POC Title and Employer of Primary POC US HR COMLIANCE PM DAVE NICKERSON AGILENT TECHNOLOGIES INC. Email Address of Primary POC Telephone Number of Primary POC

512-332-8297

DAVE.NICKERSON@AGILENT.COM