

**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
CI56700

EMPLOYER NAME
TE CONNECTIVITY

ADDRESS
1050 WESTLAKES DRIVE, SUITE 100

CITY/TOWN
BERWYN

STATE
PA

ZIP CODE
19312

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)
230332575

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): CI56700

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

551114 - Corporate, Subsidiary, and Regional Managing Offices

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	4	3	60	3	13	0	0	0	18	2	7	0	0	1	111
First/Mid-Level Officials and Managers	104	39	775	26	115	2	2	10	304	22	59	2	1	12	1473
Professionals	117	56	1092	70	195	7	4	31	491	62	93	2	0	12	2232
Technicians	32	11	356	38	52	2	1	10	93	8	25	1	1	3	633
Sales Workers	12	5	134	4	12	0	1	5	33	1	6	0	0	0	213
Administrative Support Workers	7	25	60	8	3	0	1	3	177	23	12	2	1	7	329
Craft Workers	66	19	680	68	106	4	0	6	55	19	54	0	0	2	1079
Operatives	149	200	794	332	295	10	3	35	542	223	384	6	6	16	2995
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 2022 REPORTING YEAR TOTAL	491	358	3951	549	791	25	12	100	1713	360	640	13	9	53	9065
PRIOR 2021 REPORTING YEAR TOTAL	473	348	4196	577	859	22	11	81	1727	379	689	14	7	46	9429

SECTION I – WORKFORCE SNAPSHOT PERIOD
12/18/2022 - 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

OFS COMPANY ID
CI56700

EMPLOYER NAME
TE CONNECTIVITY

ADDRESS

1050 WESTLAKES DRIVE, SUITE 100

CITY/TOWN

BERWYN

STATE

PA

ZIP CODE

19312

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

11/14/2023 3:14 PM [EST]

EMPLOYER'S CERTIFYING OFFICIAL

Name of Employer's Certifying Official

JILL FUCHS

Title of Certifying Official

PARALEGAL

Email Address of Certifying Official

jill.fuchs@te.com

Telephone Number of Certifying Official

717-578-9146

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

Name of Primary POC

JILL FUCHS

Title and Employer of Primary POC

PARALEGAL
TE CONNECTIVITY

Email Address of Primary POC

jill.fuchs@te.com

Telephone Number of Primary POC

717-578-9146