

**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 GJ13730	EMPLOYER NAME KRAFT HEINZ COMPANY THE			
ADDRESS 1 PPG PLACE	CITY/TOWN PITTSBURGH	STATE PA	ZIP CODE 15222	

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)
462078182

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): F8TYSNJDT5U6

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

311991 - Perishable Prepared Food Manufacturing

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	7	2	14	0	0	0	0	1	6	1	1	0	0	0	32
First/Mid-Level Officials and Managers	131	97	1043	84	115	3	4	12	735	81	74	0	4	16	2399
Professionals	45	63	420	46	73	3	0	9	450	79	78	2	3	12	1283
Technicians	26	23	84	19	14	0	1	1	62	15	9	0	0	1	255
Sales Workers	6	3	41	2	1	0	1	1	25	3	3	0	0	0	86
Administrative Support Workers	27	29	68	10	8	0	0	1	88	38	10	0	0	5	284
Craft Workers	267	80	1475	231	44	1	13	35	196	117	13	0	1	6	2479
Operatives	893	563	2696	1696	363	12	39	73	1195	824	327	3	21	38	8743
Laborers and Helpers	306	679	497	346	14	3	3	28	343	259	24	2	11	15	2530
Service Workers	37	4	5	1	2	0	0	0	0	0	0	0	0	0	49
CURRENT 2022 REPORTING YEAR TOTAL	1745	1543	6343	2435	634	22	61	161	3100	1417	539	7	40	93	18140
PRIOR 2021 REPORTING YEAR TOTAL	1732	1500	6706	2261	614	17	67	136	3311	1347	505	5	32	82	18315

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2022 - 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
GJ13730

EMPLOYER NAME
KRAFT HEINZ COMPANY THE

ADDRESS
1 PPG PLACE

CITY/TOWN
PITTSBURGH

STATE
PA

ZIP CODE
15222

CERTIFICATION COMMENTS (optional)

Eight former Company employees who were employed by the Company during the reporting snapshot period, but subsequently separated from employment with the Company, were not included in the Company's 2022 EEO-1 Component 1 Report filing because the Company did not have recorded gender information for such employees. Additional Nonbinary Employee Data: Eleven employees who self-identified their genders as non-binary were not included in the Company's 2022 EEO-1 Component 1 Report.

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

12/5/2023 5:00 PM [EST]

EMPLOYER'S CERTIFYING OFFICIAL

Name of Employer's Certifying Official

[REDACTED]

Title of Certifying Official

[REDACTED]

Email Address of Certifying Official

[REDACTED]

Telephone Number of Certifying Official

[REDACTED]

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

Name of Primary POC

[REDACTED]

Title and Employer of Primary POC

[REDACTED]

Email Address of Primary POC

[REDACTED]

Telephone Number of Primary POC

[REDACTED]