

**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  
K155781

EMPLOYER NAME

KOHL'S CORPORATE OFFICES

ADDRESS

N56 W17000 RIDGEWOOD DR

CITY/TOWN

MENOMONEE FALLS

STATE

WI

ZIP CODE

53051

**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)**

133357362

**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): Not Applicable

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**

455110 - Department Stores

**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	3	2	76	3	6	1	0	1	61	3	3	0	0	0	159
First/Mid-Level Officials and Managers	174	335	1041	115	49	8	6	20	2194	182	72	13	13	35	4257
Professionals	93	135	743	100	153	1	5	22	1434	116	125	2	5	33	2967
Technicians	0	0	8	0	2	0	0	0	0	0	0	0	0	0	10
Sales Workers	3450	13748	7795	2431	785	58	177	586	36085	8976	3119	200	801	1853	80064
Administrative Support Workers	104	434	188	42	16	0	2	8	1560	290	67	6	13	43	2773
Craft Workers	26	2	123	10	5	1	2	6	1	0	0	0	0	0	176
Operatives	0	6	2	1	0	0	0	0	38	2	0	0	0	0	49
Laborers and Helpers	922	1534	1408	2055	320	11	43	185	1672	2553	388	21	51	210	11373
Service Workers	134	89	291	79	7	0	8	26	151	37	6	1	1	8	838
<b>CURRENT 2022 REPORTING YEAR TOTAL</b>	<b>4906</b>	<b>16285</b>	<b>11675</b>	<b>4836</b>	<b>1343</b>	<b>80</b>	<b>243</b>	<b>854</b>	<b>43196</b>	<b>12159</b>	<b>3780</b>	<b>243</b>	<b>884</b>	<b>2182</b>	<b>102666</b>
<b>PRIOR 2021 REPORTING YEAR TOTAL</b>	<b>5169</b>	<b>16392</b>	<b>12858</b>	<b>5143</b>	<b>1314</b>	<b>105</b>	<b>254</b>	<b>893</b>	<b>47193</b>	<b>12577</b>	<b>3638</b>	<b>240</b>	<b>859</b>	<b>2317</b>	<b>108952</b>

**SECTION I – WORKFORCE SNAPSHOT PERIOD**

10/2/2022 - 10/8/2022

**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  
K155781

EMPLOYER NAME  
KOHL'S CORPORATE OFFICES

ADDRESS  
N56 W17000 RIDGEWOOD DR

CITY/TOWN  
MENOMONEE FALLS

STATE  
WI

ZIP CODE  
53051

**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**

11/30/2023 11:33 AM [EST]

**EMPLOYER'S CERTIFYING OFFICIAL**

Name of Employer's Certifying Official

Matthew Carpenter

Title of Certifying Official

VP, Compensation & Analytics

Email Address of Certifying Official

Matt.Carpenter@kohls.com

Telephone Number of Certifying Official

262-957-0017

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

Name of Primary POC

Matthew Carpenter

Title and Employer of Primary POC

VP, Compensation & Analytics  
Kohl's

Email Address of Primary POC

Matt.Carpenter@kohls.com

Telephone Number of Primary POC

262-957-0017