U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	Revised ontrol Nu	Form 100 08/2023 umber: 30- ite: 11/30/	46-0049
				FION A											
		SECT	FION E	B – EMP	LOYE	R IDEN									
OFS COMPANY ID K233751								BR INC							
ADDRESS							С	ITY/TOW	WN			STATE		ZIP CC	DDE
601 JEFFERS	ON ST						н	OUSTO	NC			ТΧ		7700)2
SECTION C – HI	EADQU	JARTE	RS OR	ESTAE								able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEADQ	UARTE				I-LEVEL	. NAME				
HEADQUARTERS OR ESTABLISHMI	ENT-LEV	/EL ADI	ORESS				С	ITY/TOV	VN			STATE ZIP CODE			
					204536	774)					
X YES (Employer Is Eligible				- EMPL oyer Is N	-					NO LOI	NGER	IN BUS	INESS		
SEC	CTION			L CON					if applic	able)					
				ntity ID (
YES (Single-Establishm	ent Emp	ployer is	Federa	l Contra	ctor) X	YES (1	Multi-Es	stablishn	nent Em	ployer is	s Federa	l Contra	ctor)		
X YES (F	Ieadqua	rters is	Federal	Contrac	tor) 🗌	YES (N	lon-Hea	dquarter	rs Establ	ishment	is Feder	ral Conti	ractor)		
		X X	ES (O	ne or Mo	ore Non	-Headqu	uarters I	Establisł	nments i	s Federa	l Contra	actor)			
			54	DN G - 1 1330 - E	Enginee	ering Se	ervices								
	SF	ECTIO	N H – V	VORKF	ORCE										т
	Llion	onio	1					Ethnicit		otino					-
		Hispanic Not Hispanic or Latino Or Latino Male							Fer	Female					
JOB CATEGORIES	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	Row Total
															L
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	0 134	2 59	60 1900	3 157	3 186	9	10	54	11 521	2 83	2 64	1	0	22	87 3201
Professionals	389	233	3851	436	501	20	31	156	1795	326	248	6	14	92	8098
Technicians Sales Workers	92 0	30 0	423 0	73 0	27 0	0	2	25 0	90 0	31 0	8	1 0	2 0	5 0	809 0
Administrative Support Workers	38	70	121	35	7	2	3	13	268	117	18	3	2	28	725
Craft Workers	150	6	290	104	20	9	13	39	16	14	0	2	1	5	669
Operatives Laborers and Helpers	17 4	2	36 1	37 7	3	0	0	4	11 2	17 0	2	1 0	0	5	135 18
Service Workers	16	4	204	128	13	0	1	13	23	24	1	1	0	0	428
CURRENT 2023 REPORTING YEAR TOTAL	840	408	6886	980	760	40	61	306	2737	614	343	16	20	159	14170
PRIOR 2022 REPORTING YEAR TOTAL	900	459 SECTU	6733	951 WORK	700 FORCI	33 F SNA D	51 SHOT	221 PEDIO	2672	559	329	15	18	115	13756
		SECIE		12/16/2				ILNO	D						
SECTION J Not Applicable	- HEA	DQUA	RTERS	S OR ES	TABLI	[SHME]	NT-LE'	VEL CO	DMME	NTS (op	tional)				

U.S. EQUAL EL 2023 EMPLOY	R OMB Con	EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026		
	SECTION K – OFFICIAL CE	RTIFICATION OF SUBMISSION		
	EMPLOYER	DENTIFICATION		
OFS COMPANY ID K233751		EMPLOYER NAME KBR INC		
ADDRI	ESS	CITY/TOWN	STATE	ZIP CODE
601 JEFFE	RSON ST	HOUSTON	ТХ	77002
	CERTIFICATION	COMMENTS (optional)		
No Certification Comments Provide	a			
and was prepa	uding any workforce demographic a red in conformity with the direction fully false statements on this repo	ION STATEMENT lata, provided in this report is correct a s set forth in the form and accompanyi rt are punishable by law, US Code, T ERTIFICATION	ng instructions."	,
		:48 PM [EST]		
		RTIFYING OFFICIAL		
Name of Employer	s Certifying Official		ifying Official	
Stephan	ie Moore	Sr. Manager, Hu	man Resources	
Email Address of	Certifying Official	Telephone Number	of Certifying Official	l
stephanie.mo	ore@kbr.com	713-753	3-6270	
PRI	MARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORT	TING	
	rimary POC	Title and Employ	er of Primary POC	
Stephan	ie Moore	Sr. Manager, Hu KBR		
Email Address	of Primary POC		per of Primary POC	
stephanie.mo	ore@kbr.com	713-753	3-6270	