U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)

EEOC Standard Form 100 (SF 100) Revised 08/2023

Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

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				ION A												
			С	ONSOL	.IDATE	D REP	ORT									
		SECT	TON B	- ЕМР	LOYE	R IDEN	TIFICA	TION								
OFS COMPANY ID							EMPL	OYER N	AME							
T529575						SIMO	ON PRO	OPERT	Y GRC	UP						
ADDRESS	CITY/TOWN											STATE ZIP CODE				
225 WEST WASHINGTON STREET						INDIANAPOLIS						IN 46204)4	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME																
HEADOHADTEDS OD ESTADI ISUMI	JMENT LEVEL ADDRESS					CITY/TOWN						STATE	1	ZIP CO	DE	
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS						CHY/IOWN						SIAIL		ZII CO	DE	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 341755769																
SECTION E – EMPLOYER FILING ELIGIBILITY X YES (Employer Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS																
X YES (Employer Is Eligible	e to File)	□ NO	(Emplo	oyer Is N	ot Elig	ible to F	ile)	EMPL	OYER I	NO LON	IGER I	N BUSI	NESS			
SEG	CTION			L CONT				TION (if applic	able)						
		<u>Un</u>	ique En	tity ID (<u>UEI)</u> :	Not App	olicable	•	_							
☐ 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 531120 - Lessors of Nonresidential Buildings (except Miniwarehouses)																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
Race/Ethnicity																
	Hisp	Hispanic Not Hispanic or Latino														
		or Latino											emale			
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				Black or African American		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		Black or African American		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		
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Executive/Senior Level Officials and Managers	1	0	55	2	1	0	0	0	12	2	0	0	0	0	73	
First/Mid-Level Officials and Managers	60	45	485	27	12	0	0	6	321	19	11	0	2	5	993	
Professionals	5	2	170	12	11	0	0	1	132	15	6	0	0	3	357	
Technicians	2	0	25	0	1	0	0	0	9	1	0	0	0	0	38	
Sales Workers Administrative Support Workers	11	13 84	29 63	7	<u>0</u>	0	0	0	66 342	3 53	14	0	0	9	117 588	
Craft Workers	10	0	10	5	0	0	1	1	3	0	14	0	0	0	31	
Operatives	104	0	154	32	3	2	2	8	4	0	0	1	0	1	311	
Laborers and Helpers	2	0	1	1	0	0	- 1	0	0	0	0	0	0	0	5	
Service Workers	81	15	191	113	15	0	6	3	38	19	0	0	0	1	482	
CURRENT 2023 REPORTING YEAR TOTAL	280	159	1183	199	47	2	10	20	927	112	33	2	2	19	2995	
PRIOR 2022 REPORTING YEAR TOTAL	270	226	1165	181	46	3	6	27	1053	138	46	2	8	39	3210	
		SECTIO	N I – '	WORKI 11/4/20		E SNAP 1/17/20		PERIO)							
SECTION J	- HEA	DQUAI	RTERS					EL CO	MME	NTS (opt	ional)					
Not Applicable		-									*					

EEOC Standard Form 100 (SF 100) U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1) OMB Control Number: 3046-0049 Expiration Date: 11/30/2026 SECTION K - OFFICIAL CERTIFICATION OF SUBMISSION EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME T529575 SIMON PROPERTY GROUP ADDRESS CITY/TOWN STATE ZIP CODE 225 WEST WASHINGTON STREET **INDIANAPOLIS** IN 46204 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 5/24/2024 1:48 PM [EST]