

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> CONSOLIDATED REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS						CITY/TOWN				STATE		ZIP CODE			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 551114 - Corporate, Subsidiary, and Regional Managing Offices															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	5	0	130	1	1	0	0	4	25	0	1	0	0	0	167
First/Mid-Level Officials and Managers	213	53	1076	63	24	5	11	39	258	22	7	1	0	5	1777
Professionals	101	33	609	38	22	1	3	25	241	36	19	0	0	13	1141
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	479	162	989	135	17	5	9	62	265	36	3	1	8	18	2189
Administrative Support Workers	61	167	132	18	2	0	2	11	316	43	12	1	4	32	801
Craft Workers	263	1	585	83	17	10	5	29	7	1	0	0	0	0	1001
Operatives	1491	106	2840	890	87	21	35	168	284	65	12	0	1	18	6018
Laborers and Helpers	710	95	945	543	87	22	8	100	148	70	4	0	1	12	2745
Service Workers	9	35	37	9	2	0	0	2	91	25	1	1	2	10	224
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	3332	652	7343	1780	259	64	73	440	1635	298	59	4	16	108	16063
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	2163	311	5039	1232	162	48	48	336	899	142	29	2	10	55	10476
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional) Not Applicable															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)			EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026	
SECTION K – OFFICIAL CERTIFICATION OF SUBMISSION				
EMPLOYER IDENTIFICATION				
OFS COMPANY ID AC16425		EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE		
ADDRESS 500 W MADISON ST STE 2800		CITY/TOWN CHICAGO	STATE IL	ZIP CODE 60661
CERTIFICATION COMMENTS (optional)				
No Certification Comments Provided				
CERTIFICATION STATEMENT <i>"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."</i> <b>Knowingly and willfully false statements on this report are punishable by law, US Code, Title 18, Section 1001.</b>				
DATE OF CERTIFICATION 6/6/2024 12:52 PM [EST]				
EMPLOYER'S CERTIFYING OFFICIAL				
Name of Employer's Certifying Official Denise Moore		Title of Certifying Official Sr Manager HR Services		
Email Address of Certifying Official denise.eden@lkqcorp.com		Telephone Number of Certifying Official 615-280-4004		
PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING				
Name of Primary POC Denise Moore		Title and Employer of Primary POC Sr Manager HR Services LKQ		
Email Address of Primary POC denise.eden@lkqcorp.com		Telephone Number of Primary POC 615-280-4004		

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SECTION A – TYPE OF REPORT HEADQUARTERS REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC16425				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chicago IL - Corporate Office											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 500 W Madison St Ste 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> 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														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	1	0	11	0	0	0	0	1	5	0	1	0	0	0	19
First/Mid-Level Officials and Managers	0	1	7	0	1	0	0	0	3	0	0	0	0	1	13
Professionals	1	2	9	0	1	0	0	0	10	2	1	0	0	0	26
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	2	3	28	0	2	0	0	1	19	2	2	0	0	1	60
PRIOR 2022 REPORTING YEAR TOTAL	2	3	27	0	2	0	0	1	17	3	2	0	0	0	57
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  3															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16160				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Wyoming MI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4310 Roger B Chaffee Memorial Blvd								CITY/TOWN WYOMING				STATE MI		ZIP CODE 49548	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	9	1	0	0	0	0	0	0	0	0	0	0	10
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 2023 REPORTING YEAR TOTAL	0	0	9	1	0	0	0	0	0	0	0	0	0	0	10
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
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U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66030				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Honesdale PA - KAO A&A											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS Rte 6 And Tryon St								CITY/TOWN HONSDALE				STATE PA		ZIP CODE 18431	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	1	1	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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 2023 REPORTING YEAR TOTAL	0	0	4	0	0	0	0	1	1	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	1	3	0	0	0	0	1	1	0	0	0	0	0	6
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
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<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30565				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chula Vista CA - PYP											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 880 Energy Way								CITY/TOWN CHULA VISTA				STATE CA		ZIP CODE 91911	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 953406551															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	4	3	0	1	0	0	1	0	0	0	0	0	1	13
Administrative Support Workers	2	5	0	0	0	0	0	0	0	0	0	0	0	0	7
Craft Workers	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
Operatives	26	1	0	0	0	0	0	0	0	0	0	0	0	0	27
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>34</b>	<b>13</b>	<b>4</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>54</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>10</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>16</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16072			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Greenville MI - InventoryRecov												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5835 Vining Rd Ste B						CITY/TOWN GREENVILLE				STATE MI		ZIP CODE 48838			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 339999 - All Other Miscellaneous Manufacturing															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	1	8	0	0	0	0	0	2	0	0	0	0	0	15
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	1	11	0	0	0	0	0	3	0	0	0	0	0	19
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16061				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fairfield OH - APO Cincinnati											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 7048 Fairfield Business Center								CITY/TOWN FAIRFIELD				STATE OH		ZIP CODE 45014	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66434				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Burleson TX											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2955 S Burleson Blvd								CITY/TOWN BURLESON				STATE TX		ZIP CODE 76028	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	7	1	0	0	1	0	2	0	0	0	0	0	12
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	13	0	0	0	0	0	3	0	0	0	0	0	17
Administrative Support Workers	0	0	0	0	0	0	0	0	6	0	1	0	0	0	7
Craft Workers	11	0	6	1	0	0	0	1	0	0	0	0	0	0	19
Operatives	9	0	12	4	0	0	0	0	3	0	0	0	0	0	28
Laborers and Helpers	1	0	7	5	0	0	0	0	0	1	0	0	0	0	14
Service Workers	0	1	0	1	0	0	0	0	0	0	0	0	0	0	2
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>23</b>	<b>1</b>	<b>46</b>	<b>12</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>14</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>100</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>15</b>	<b>1</b>	<b>36</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>7</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>61</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID T532037				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME TRW Huntington IN											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3000 Yeoman Way								CITY/TOWN HUNTINGTON				STATE IN		ZIP CODE 46750	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 339999 - All Other Miscellaneous Manufacturing															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Professionals	0	0	3	0	0	0	0	0	2	0	0	0	0	0	5
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	3	0	0	0	0	0	3
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	1	48	0	0	0	0	2	7	0	0	0	0	0	59
Laborers and Helpers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	1	56	0	0	0	0	2	13	0	0	0	0	0	73
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	5	0	0	0	0	0	3	0	0	0	0	0	8
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31083			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Liberal KS												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1624 W Pancake Blvd						CITY/TOWN LIBERAL				STATE KS		ZIP CODE 67901			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	1	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	1	1	0	0	0	0	0	0	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>4</b>	<b>2</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>8</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>5</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>7</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC21531				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Birmingham AL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 24559 Highway 79 North								CITY/TOWN TRAFFORD				STATE AL		ZIP CODE 35172	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	9	0	0	0	0	0	4	0	0	0	0	0	13
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	4	0	0	0	0	0	2	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Craft Workers	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
Operatives	2	0	21	7	0	0	0	0	4	0	0	0	0	0	34
Laborers and Helpers	0	1	4	1	0	0	0	0	0	0	0	0	0	0	6
Service Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>1</b>	<b>46</b>	<b>8</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>12</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>69</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>2</b>	<b>44</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>57</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA29917				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Montgomery AL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5112 Lower Wetumpka Rd								CITY/TOWN MONTGOMERY				STATE AL		ZIP CODE 36110	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Operatives	0	0	9	11	0	0	0	0	0	0	0	0	0	0	20
Laborers and Helpers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	19	12	0	0	0	0	1	0	0	0	0	0	32
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	19	6	0	0	0	0	1	0	0	0	0	0	26
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FC93413			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Athens GA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1510 Highway 29 North						CITY/TOWN ATHENS				STATE GA		ZIP CODE 30601			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
Administrative Support Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	2	0	2	1	0	0	0	0	0	0	0	0	0	0	5
Operatives	0	0	3	0	0	0	0	1	0	0	0	0	0	0	4
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	20	1	0	0	0	1	1	0	0	0	0	0	25
PRIOR 2022 REPORTING YEAR TOTAL	0	0	15	0	0	0	0	0	1	0	0	0	0	0	16
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16246			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Richmond VA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3317 W Broad St						CITY/TOWN RICHMOND				STATE VA		ZIP CODE 23230			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	2	0	0	0	0	0	0	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	0	0	3	2	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30880			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Portland OR - KAO Ops -NTP													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 15353 SW Sequoia Pkwy, Suite 100						CITY/TOWN PORTLAND				STATE OR		ZIP CODE 97224				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2	
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	1	0	0	2	
Professionals	0	0	2	1	0	0	0	0	5	0	0	0	0	1	9	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	1	3	0	0	0	0	0	0	0	0	0	0	0	4	
Administrative Support Workers	0	0	0	0	0	0	0	0	1	1	0	0	1	0	3	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Service Workers	0	2	2	0	0	0	0	0	4	0	0	1	1	0	10	
CURRENT 2023 REPORTING YEAR TOTAL	0	3	9	1	0	0	0	0	11	1	0	2	2	1	30	
PRIOR 2022 REPORTING YEAR TOTAL	0	1	3	1	0	0	0	0	1	0	0	1	0	0	7	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AL72931				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Grand Prairie TX											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4003 Grand Lakes Way Ste. 200								CITY/TOWN GRAND PRAIRIE				STATE TX		ZIP CODE 75050	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	1	5	0	0	0	0	0	1	0	0	0	0	0	8
Professionals	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	9	7	11	9	0	0	0	4	2	0	0	0	0	0	42
Administrative Support Workers	0	1	0	0	0	0	0	0	3	0	2	0	0	0	6
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	10	4	11	6	0	0	0	2	1	1	0	0	0	0	35
Laborers and Helpers	22	6	1	5	0	0	0	0	0	0	0	0	0	0	34
Service Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	42	21	28	20	0	0	0	6	7	1	2	0	0	0	127
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	24	12	13	15	0	0	0	5	2	2	0	0	0	0	73
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31362			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Moline IL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4725 44Th Street						CITY/TOWN MOLINE				STATE IL		ZIP CODE 61265			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	3	1	0	0	0	0	0	0	0	0	0	0	5
Laborers and Helpers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	6	1	0	0	0	0	4	0	0	0	0	0	12
PRIOR 2022 REPORTING YEAR TOTAL	1	0	6	0	0	0	0	0	3	0	0	0	0	0	10
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FC87711			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Trotwood OH - SS Dayton												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4283 North James H Mcgee Blvd						CITY/TOWN DAYTON				STATE OH		ZIP CODE 45417			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	1	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	3	0	0	0	0	1	0	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
Operatives	0	0	3	2	0	0	0	0	0	0	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	0	0	6	8	0	0	0	0	2	0	0	0	0	0	16
PRIOR 2022 REPORTING YEAR TOTAL	0	0	3	3	0	0	0	0	0	1	0	0	0	0	7
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30794			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bradenton FL - Copher SS													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1880 63Rd Avenue East						CITY/TOWN BRADENTON				STATE FL		ZIP CODE 34203				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
JOB CATEGORIES	Race/Ethnicity															
	Hispanic or Latino		Not Hispanic or Latino													Row Total
			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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	3	1	0	0	0	0	0	0	0	0	0	0	0	0	4	
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	7	0	0	0	0	0	0	1	0	0	0	0	0	0	8	
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	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	10	4	0	0	0	0	0	1	0	0	0	0	0	0	15	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	7	4	0	0	0	0	0	0	0	0	0	0	0	0	11	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																
8																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16602				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Sarasota FL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2031 13th Street								CITY/TOWN SARASOTA				STATE FL		ZIP CODE 34237		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3	
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 2023 REPORTING YEAR TOTAL	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP15467			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Saturn Wheel - Warren IN												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 507 E 9Th St						CITY/TOWN WARREN				STATE IN		ZIP CODE 46792			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 339999 - All Other Miscellaneous 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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	22	2	1	0	1	2	2	0	0	0	0	0	32
Laborers and Helpers	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	30	2	1	0	1	2	3	0	0	0	0	0	41
PRIOR 2022 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	2	0	0	0	0	0	5
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA29892				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Belleville MI - RightChoice											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 41247 East Huron River Dr								CITY/TOWN BELLEVILLE				STATE MI		ZIP CODE 48111	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	2	0	0	0	0	0	5
Professionals	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	5	2	0	0	0	1	10	0	0	0	0	1	20
Administrative Support Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	1	1	0	0	0	0	7	1	0	0	0	1	11
CURRENT 2023 REPORTING YEAR TOTAL	0	1	10	3	0	0	0	1	23	1	0	0	0	2	41
PRIOR 2022 REPORTING YEAR TOTAL	0	0	2	1	0	0	0	0	9	0	0	0	0	1	13
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30704			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Stuyvesant NY - Broadway Auto												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1572 Us Route 9						CITY/TOWN STUYVESANT				STATE NY		ZIP CODE 12173			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	2	0	0	0	0	0	2	0	0	0	0	0	5
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	8	0	0	0	0	0	0	0	0	0	0	0	8
Operatives	0	0	3	0	0	0	0	1	0	0	0	0	0	0	4
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	17	0	0	0	0	1	2	0	0	0	0	0	21
PRIOR 2022 REPORTING YEAR TOTAL	1	0	16	0	0	0	0	2	2	0	0	0	0	0	21
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30006				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Rockford IL - Self Service											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 601 Harrison Avenue								CITY/TOWN ROCKFORD				STATE IL		ZIP CODE 61104	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	1	0	0	0	0	0	1	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Craft Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	4	0	5	1	0	0	0	0	0	0	0	0	0	0	10
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	5	1	8	2	0	0	0	0	2	1	0	0	0	0	19
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	2	0	4	1	0	0	0	0	2	0	0	0	0	0	9
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA29953			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fontana CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 15228 Boyle Ave						CITY/TOWN FONTANA				STATE CA		ZIP CODE 92337			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 953072886															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	1	0	1	0	0	0	0	0	0	0	0	0	0	5
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	2	0	0	1	0	0	0	0	0	0	0	0	0	0	3
Operatives	8	0	0	0	0	0	0	0	0	0	0	0	0	0	8
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 2023 REPORTING YEAR TOTAL	13	2	0	2	0	0	0	0	0	0	0	0	0	1	18
PRIOR 2022 REPORTING YEAR TOTAL	6	1	0	0	0	0	0	0	0	0	0	0	0	0	7
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16037			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Denver CO - Self Service												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1355 West 52nd Avenue						CITY/TOWN DENVER				STATE CO		ZIP CODE 80221			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	0	0	0	0	0	0	1	0	0	0	0	0	2
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30675			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bakersfield CA - Central CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2115 South Union Avenue						CITY/TOWN BAKERSFIELD				STATE CA		ZIP CODE 93307			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952907390															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	3	0	4	1	0	0	0	0	0	0	2	0	0	0	10
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	0	3	0	0	0	0	0	0	0	0	0	0	0	6
Administrative Support Workers	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	8	0	4	0	4	2	0	0	0	0	0	0	0	0	18
Operatives	19	1	2	1	3	0	0	1	1	0	0	0	0	0	28
Laborers and Helpers	7	0	6	1	0	2	0	0	0	0	0	0	0	0	16
Service Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
CURRENT 2023 REPORTING YEAR TOTAL	41	3	19	3	7	4	0	1	1	0	2	0	0	0	81
PRIOR 2022 REPORTING YEAR TOTAL	37	2	17	1	6	4	0	0	1	0	1	0	0	0	69
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JB60491			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Lincoln NE												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3300 Gladstone St						CITY/TOWN LINCOLN				STATE NE		ZIP CODE 68504			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17027			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tucson AZ												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2332 N Stone Ave						CITY/TOWN TUCSON				STATE AZ		ZIP CODE 85705			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2
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 2023 REPORTING YEAR TOTAL	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30716			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Sun Valley CA - Parts Channel												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11651 Sheldon St						CITY/TOWN SUN VALLEY				STATE CA		ZIP CODE 91352			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	1	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	9	0	3	0	0	0	0	0	0	0	0	0	0	0	12
Laborers and Helpers	6	1	0	0	1	0	0	0	0	0	0	0	0	0	8
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	15	1	5	0	1	0	0	0	2	0	0	1	0	0	25
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	13	0	5	0	1	0	0	1	1	0	0	1	0	0	22
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30523			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME San Antonio TX - Retail												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4530 Tejasco Drive						CITY/TOWN SAN ANTONIO				STATE TX		ZIP CODE 78218			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	4	0	0	0	0	0	0	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV53950			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Baltimore MD												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2801 Hawkins Point Road						CITY/TOWN BALTIMORE				STATE MD		ZIP CODE 21226			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	1	0	0	0	0	2	1	0	0	0	0	4
Administrative Support Workers	2	0	1	0	0	0	0	0	2	0	0	0	0	0	5
Craft Workers	2	0	1	1	0	0	0	0	0	0	0	0	0	0	4
Operatives	6	0	4	6	0	0	0	1	0	0	0	0	0	0	17
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 2023 REPORTING YEAR TOTAL	10	0	7	8	0	0	0	2	4	1	0	0	0	0	32
PRIOR 2022 REPORTING YEAR TOTAL	6	0	4	6	0	0	0	1	1	0	0	0	0	0	18
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31638			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Windber PA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 320 Dobson Street						CITY/TOWN WINDBER				STATE PA		ZIP CODE 15963			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	3	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
Laborers and Helpers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	16	0	0	0	0	0	4	0	0	0	0	0	20
PRIOR 2022 REPORTING YEAR TOTAL	0	0	14	0	0	0	0	0	3	0	0	0	0	0	17
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16785				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Adel GA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 315 Industrial Park Dr								CITY/TOWN ADEL				STATE GA		ZIP CODE 31620	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	8	2	0	0	0	0	2	2	0	0	0	0	14
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 2023 REPORTING YEAR TOTAL	0	0	8	3	0	0	0	0	2	2	0	0	0	0	15
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30082			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME N. Charleston SC - SS												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4646 Rivers Avenue						CITY/TOWN CHARLESTON				STATE SC		ZIP CODE 29405			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	0	0	1	0	0	0	0	1	0	0	0	0	0	4
Administrative Support Workers	0	0	0	2	0	0	0	1	0	0	0	0	0	0	3
Craft Workers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Operatives	1	0	0	8	0	0	0	1	0	0	0	0	0	0	10
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 2023 REPORTING YEAR TOTAL	4	0	2	12	0	0	0	2	1	0	0	0	0	0	21
PRIOR 2022 REPORTING YEAR TOTAL	2	0	3	6	0	0	0	1	0	0	0	0	0	0	12
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16994			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Mesa AZ													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 318 S Dobson Rd #111						CITY/TOWN MESA				STATE AZ		ZIP CODE 85202				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	3	1	2	0	0	0	0	0	0	0	0	0	0	0	6	
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 2023 REPORTING YEAR TOTAL	3	1	2	0	0	0	0	0	0	0	0	0	0	0	6	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID PA92701				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fort Wayne IN											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 8520 Bluffton Rd								CITY/TOWN FORT WAYNE				STATE IN		ZIP CODE 46809	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 551114 - Corporate, Subsidiary, and Regional Managing Offices															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	5	0	0	0	0	0	0	0	0	0	0	0	6
Laborers and Helpers	0	0	2	5	0	0	0	0	0	0	0	0	0	0	7
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	10	5	0	0	0	0	1	0	0	0	0	0	17
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16675				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME New Port Richey FL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6716 US Hwy 19 North								CITY/TOWN NEW PORT RICHEY				STATE FL		ZIP CODE 34652	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	1	1	0	0	0	0	0	4
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	2	0	0	0	0	1	1	0	0	0	0	0	4
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID CE37754			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bellingham WA - Yamato												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2020 E Bakerview Road						CITY/TOWN BELLINGHAM				STATE WA		ZIP CODE 98226			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 336390 - Other Motor Vehicle Parts 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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	1	0	0	0	1	0	0	0	0	0	7
Professionals	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	46	13	30	5	26	3	1	5	8	0	7	0	0	0	144
Laborers and Helpers	2	0	6	0	2	0	0	0	4	0	0	0	0	2	16
Service Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
CURRENT 2023 REPORTING YEAR TOTAL	48	14	45	5	29	3	1	5	13	0	7	0	0	3	173
PRIOR 2022 REPORTING YEAR TOTAL	2	1	13	0	1	0	0	1	0	0	0	0	0	1	19
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EW31095			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Pocatello ID - Bailey												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5497 South 5Th Avenue						CITY/TOWN POCATELLO				STATE ID		ZIP CODE 83204			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	1	0	10	0	0	0	0	0	0	0	0	0	0	0	11
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	18	0	0	0	0	0	0	0	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	0	0	15	0	0	0	0	0	0	0	0	0	0	0	15
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30152			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Gorham ME												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 192 Narragansett St						CITY/TOWN GORHAM				STATE ME		ZIP CODE 04038			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	8	0	0	0	0	0	0	0	0	0	0	0	8
Operatives	0	0	11	0	0	0	0	0	0	0	0	0	0	0	11
Laborers and Helpers	0	0	4	0	0	0	1	0	2	0	0	0	0	0	7
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	27	0	0	0	1	0	2	0	0	0	0	0	30
PRIOR 2022 REPORTING YEAR TOTAL	0	0	24	0	0	0	1	0	2	0	0	0	0	0	27
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30606			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Dover DE												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1575 Mckee Road, Suite 500						CITY/TOWN DOVER				STATE DE		ZIP CODE 19904			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	3	4	0	0	0	0	0	0	0	0	0	0	8
Laborers and Helpers	0	0	1	1	0	0	0	0	0	1	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	6	5	0	0	0	0	0	1	0	0	0	0	14
PRIOR 2022 REPORTING YEAR TOTAL	2	0	6	5	0	0	0	0	0	1	0	0	0	0	14
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30906			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Cumberland RI - Advanced Auto												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 290 Curran Road						CITY/TOWN CUMBERLAND				STATE RI		ZIP CODE 02864			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	5	0	0	0	0	0	1	0	0	0	0	0	7
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	8	0	8	0	0	0	0	0	0	0	0	0	0	0	16
Operatives	3	0	9	0	0	0	0	1	0	0	0	0	0	0	13
Laborers and Helpers	5	0	0	0	0	0	0	1	0	0	0	0	0	0	6
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	17	0	22	0	0	0	0	2	4	0	0	0	0	0	45
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	13	0	18	0	0	0	0	2	4	0	0	0	0	0	37
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30924				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chicago IL -A-Reliable-U Pull											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4555 W North Avenue								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60639	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	0	0	0	0	0	0	0	0	1	0	0	0	0	4
Administrative Support Workers	2	1	0	0	0	0	0	0	0	0	0	0	0	0	3
Craft Workers	1	0	0	1	0	0	0	0	0	0	0	0	0	0	2
Operatives	10	0	0	2	0	0	0	1	0	0	0	0	0	0	13
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	18	1	0	3	0	0	0	1	0	1	0	0	0	0	24
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	13	0	1	2	0	0	0	0	0	0	0	0	0	0	16
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FC89240			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Joplin MO												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 675 S Black Cat Road						CITY/TOWN JOPLIN				STATE MO		ZIP CODE 64801			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	1	0	7	0	0	0	0	1	0	0	0	0	0	0	9
Laborers and Helpers	1	0	6	0	0	0	0	0	1	0	0	0	0	0	8
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	26	0	0	0	0	1	2	0	0	0	0	0	31
PRIOR 2022 REPORTING YEAR TOTAL	1	0	19	0	0	0	0	0	1	0	0	0	0	0	21
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16292			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Folcroft PA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 801 Carpenters CrossingBays 408-40						CITY/TOWN FOLCROFT				STATE PA		ZIP CODE 19032			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	5	3	0	0	0	0	0	0	0	0	0	0	8
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 2023 REPORTING YEAR TOTAL	0	0	5	3	0	0	0	0	0	0	0	0	0	0	8
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66571			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Alsip IL - Knopf												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11800 South Austin Ave, Suite C						CITY/TOWN ALSIP				STATE IL		ZIP CODE 60803			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	3	0	2	2	0	0	0	0	0	0	0	0	0	0	7
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	4	0	2	3	0	0	0	0	0	0	0	0	0	0	9
PRIOR 2022 REPORTING YEAR TOTAL	3	0	2	3	0	0	0	0	0	0	0	0	0	0	8
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EW17587			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Portland OR - NTP												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5925 Northeast Portland Hwy						CITY/TOWN PORTLAND				STATE OR		ZIP CODE 97218			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	1	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	1	0	8	0	0	0	0	0	0	0	0	0	0	0	9
Operatives	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	1	0	0	0	0	1	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	13	0	0	0	0	1	1	0	0	0	0	1	18
PRIOR 2022 REPORTING YEAR TOTAL	1	0	4	1	0	0	0	0	1	0	0	0	0	1	8
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID BD23795				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Duncan SC - A&R Auto Parts											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 511 Gap Creek Road								CITY/TOWN DUNCAN				STATE SC		ZIP CODE 29334	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	6	0	0	0	0	0	2	0	0	0	0	0	8
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	1	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	3	0	4	0	0	0	0	0	0	0	0	0	0	0	7
Operatives	2	0	12	1	0	0	0	0	0	0	0	0	0	0	15
Laborers and Helpers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	5	0	30	1	0	0	0	0	2	1	0	0	0	0	39
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	6	0	23	2	0	0	0	0	2	0	0	0	0	0	33
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC20770			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Jenkinsburg Ga - Atlanta												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2401 Highway 42 North						CITY/TOWN JENKINSBURG				STATE GA		ZIP CODE 30234			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	2	2	1	0	0	1	1	0	0	0	0	0	8
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	3	0	0	0	0	1	3	0	0	0	0	0	8
Administrative Support Workers	0	0	0	0	0	0	0	0	2	1	0	0	0	0	3
Craft Workers	1	0	10	0	0	0	0	2	2	0	0	0	0	0	15
Operatives	0	1	14	20	0	0	0	2	5	1	0	0	0	0	43
Laborers and Helpers	1	0	5	2	1	0	0	0	3	0	0	0	0	0	12
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	4	1	34	24	2	0	0	6	16	2	0	0	0	0	89
PRIOR 2022 REPORTING YEAR TOTAL	2	1	25	25	2	0	0	2	8	1	0	0	0	0	66
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID HF14661			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Slippery Rock PA - Kennedy												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3844 William Flynn Hwy						CITY/TOWN SLIPPERY ROCK				STATE PA		ZIP CODE 16057			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	9	0	0	0	0	0	0	0	0	0	0	0	9
Operatives	1	0	12	0	0	0	0	0	0	0	0	0	0	0	13
Laborers and Helpers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	27	0	0	0	0	0	2	0	0	0	0	0	30
PRIOR 2022 REPORTING YEAR TOTAL	1	0	24	0	0	0	0	0	2	0	0	0	0	0	27
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID MV45693				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Jackson MS - 3127											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 865 Boling Street								CITY/TOWN JACKSON				STATE MS		ZIP CODE 39209	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b>															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	2	0	0	0	0	0	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	12	0	0	0	2	0	2	0	0	0	0	20
Laborers and Helpers	0	0	2	4	0	0	0	0	0	0	0	0	0	0	6
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	10	18	0	0	0	2	3	2	0	0	0	0	35
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	14	18	0	0	0	2	0	1	0	0	0	0	35
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP42533			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Caldwell ID -Barger AutoPart												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6423 Cleveland Blvd						CITY/TOWN CALDWELL				STATE ID		ZIP CODE 83607			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Operatives	1	0	3	0	0	0	0	1	0	0	0	0	0	0	5
Laborers and Helpers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	10	0	0	0	0	1	1	0	0	0	0	0	14
PRIOR 2022 REPORTING YEAR TOTAL	1	0	5	0	0	0	0	1	1	0	0	0	0	0	8
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EW17356				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Spokane WA - KC Inland Empire											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1100 North Howe Street								CITY/TOWN SPOKANE				STATE WA		ZIP CODE 99212	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Operatives	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
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 2023 REPORTING YEAR TOTAL	1	0	8	0	0	0	0	1	1	0	0	0	0	0	11
PRIOR 2022 REPORTING YEAR TOTAL	1	0	6	0	0	0	1	0	1	0	0	0	0	0	9
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV57032				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Oklahoma City OK - SS											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 900 S Macarthur Blvd								CITY/TOWN OKLAHOMA CITY				STATE OK		ZIP CODE 73128	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	1	2	1	0	0	0	0	1	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	2	0	0	0	0	0	0	0	2
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	3	0	7	2	0	0	0	1	0	1	0	0	0	0	14
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	2	11	4	0	0	2	1	1	1	0	0	0	0	26
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	2	0	8	3	0	0	1	0	1	0	0	0	0	0	15
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30181			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Manchester CT												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 50 Utopia Road						CITY/TOWN MANCHESTER				STATE CT		ZIP CODE 06040			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	0	8	1	0	0	0	0	0	0	0	0	0	0	13
Laborers and Helpers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>6</b>	<b>0</b>	<b>13</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>21</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>6</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>11</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66184			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bloomsburg PA - KAO A&A												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 519 East St						CITY/TOWN BLOOMSBURG				STATE PA		ZIP CODE 17815			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	2	0	0	0	0	1	0	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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 2023 REPORTING YEAR TOTAL	1	0	4	0	0	0	0	1	0	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	1	0	6	0	0	0	0	0	0	0	0	0	0	0	7
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JB60417			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Casa Grande AZ												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 37 South Thornton Road						CITY/TOWN CASA GRANDE				STATE AZ		ZIP CODE 85193			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	1	6	0	0	0	0	0	0	0	0	0	0	0	8
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	9	0	8	0	0	1	0	0	0	0	0	0	0	0	18
Operatives	10	0	12	0	0	1	0	0	3	0	0	0	0	0	26
Laborers and Helpers	2	0	4	0	0	0	0	0	0	0	0	0	0	0	6
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	22	2	30	0	0	2	0	0	3	0	0	0	0	0	59
PRIOR 2022 REPORTING YEAR TOTAL	16	0	24	2	0	1	0	3	2	0	0	0	0	0	48
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP17018			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Lakewood NJ												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 900 Towbin Ave						CITY/TOWN LAKEWOOD				STATE NJ		ZIP CODE 08701			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	6	2	0	0	0	0	1	0	0	0	0	0	10
Laborers and Helpers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	10	2	0	0	0	0	1	0	0	0	0	0	15
PRIOR 2022 REPORTING YEAR TOTAL	1	0	8	0	0	0	0	0	0	0	0	0	0	0	9
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB29941			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Springdale AR												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 252 Industrial Circle West						CITY/TOWN SPRINGDALE				STATE AR		ZIP CODE 72762			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	0	9	0	0	0	0	0	2	0	1	0	0	0	15
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	1	0	7	1	0	0	0	0	0	0	0	0	0	0	9
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>4</b>	<b>0</b>	<b>20</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>29</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>3</b>	<b>0</b>	<b>19</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>27</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)  8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP14125				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Saginaw MI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3052 W Sawyer Dr, Suite 2								CITY/TOWN SAGINAW				STATE MI		ZIP CODE 48601	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	1	0	0	0	0	0	0	0	0	0	0	5
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	6	1	0	0	0	0	0	0	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	0	0	5	1	0	0	0	0	0	0	0	0	0	0	6
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16136			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Farmington Hills MI												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 24600 Drake Rd						CITY/TOWN FARMINGTON HILLS				STATE MI		ZIP CODE 48335			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
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 2023 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17161			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Mira Loma CA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11072 Philadelphia St						CITY/TOWN MIRA LOMA				STATE CA		ZIP CODE 91752				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	7	0	1	0	1	0	0	0	0	0	0	0	0	0	9	
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 2023 REPORTING YEAR TOTAL	8	0	1	0	1	0	0	0	0	0	0	0	0	0	10	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31665			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Salt Lake City UT												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3455 West Ninigret Drive, Suite 300						CITY/TOWN SALT LAKE CITY				STATE UT		ZIP CODE 84104			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	3	0	0	0	0	1	2	0	0	0	0	0	7
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	6	1	15	0	1	2	1	1	0	0	0	0	0	0	27
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	2	0	0	1	0	0	0	1	0	0	0	0	5
Laborers and Helpers	8	0	6	1	0	2	0	1	0	0	0	0	0	0	18
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	16	1	26	1	1	5	1	3	3	1	0	0	0	0	58
PRIOR 2022 REPORTING YEAR TOTAL	14	2	26	1	1	4	1	4	2	0	0	0	0	0	55
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GN78837				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tampa FL - Auto Parts Outlet											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5015 Causeway Blvd								CITY/TOWN TAMPA				STATE FL		ZIP CODE 33619	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	4	0	1	0	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV53813			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Baltimore MD												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6201 Erdman Avenue						CITY/TOWN BALTIMORE				STATE MD		ZIP CODE 21205			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Administrative Support Workers	1	0	0	0	0	0	0	0	2	1	0	0	0	1	5
Craft Workers	3	0	0	1	0	0	0	0	0	0	0	0	0	0	4
Operatives	3	1	6	8	0	0	0	0	1	1	0	0	0	0	20
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 2023 REPORTING YEAR TOTAL	7	1	6	9	0	0	0	0	3	4	0	0	0	1	31
PRIOR 2022 REPORTING YEAR TOTAL	5	1	5	8	0	0	0	0	1	1	0	0	0	0	21
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC20462			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Houston TX - Best Core												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1710 West Mt Houston Road						CITY/TOWN HOUSTON				STATE TX		ZIP CODE 77038			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	3	0	5	1	0	0	0	1	1	0	0	0	0	0	11
Professionals	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	2	0	0	0	0	0	1	0	0	0	0	0	4
Administrative Support Workers	3	0	0	0	0	0	0	0	0	1	0	0	0	0	4
Craft Workers	7	0	2	0	0	0	0	0	0	0	0	0	0	0	9
Operatives	20	0	0	0	0	1	0	1	0	0	0	0	0	0	22
Laborers and Helpers	52	0	0	6	0	0	1	3	0	0	0	0	0	0	62
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	86	0	11	7	0	1	1	5	2	1	0	0	0	0	114
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	76	0	6	9	0	1	1	2	2	0	0	0	0	0	97
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JV43375			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Deer Park NY - AutoDataLabels												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 44 West Jefryn Blvd, Suite K						CITY/TOWN DEER PARK				STATE NY		ZIP CODE 11729			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	1	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	3	1	2	1	0	0	0	0	3	0	0	0	0	1	11
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
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 2023 REPORTING YEAR TOTAL	3	2	4	1	0	0	0	0	3	0	1	0	0	1	15
PRIOR 2022 REPORTING YEAR TOTAL	0	1	1	0	0	0	0	0	0	0	0	0	0	0	2
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EP42340			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Nampa ID - Barger Auto Parts													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3326 Garrity Blvd						CITY/TOWN NAMPA				STATE ID		ZIP CODE 83687				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	8	0	0	0	0	0	0	0	0	0	0	0	8	
Laborers and Helpers	1	0	4	0	0	0	0	0	0	0	0	0	0	0	5	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
CURRENT 2023 REPORTING YEAR TOTAL	1	0	16	0	0	0	0	0	0	0	0	0	0	0	17	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	10	0	0	0	0	0	0	0	0	0	0	0	10	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17258			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fairfield CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4885 Fulton Dr Suite A						CITY/TOWN FAIRFIELD				STATE CA		ZIP CODE 94534			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>						<b>Female</b>						
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	2	0	1	0	0	0	0	0	0	0	0	0	4
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	2	0	1	0	0	0	0	0	0	0	0	0	4
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16703			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fort Pierce FL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1200 Bell Ave						CITY/TOWN FORT PIERCE				STATE FL		ZIP CODE 34982			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	1	1	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	1	1	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30785			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Memphis TN - Self Service												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 966 West Mitchell Road						CITY/TOWN MEMPHIS				STATE TN		ZIP CODE 38109			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	2	0	0	0	0	0	1	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Craft Workers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Operatives	2	0	4	6	0	0	0	0	0	1	0	0	0	0	13
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 2023 REPORTING YEAR TOTAL	2	0	5	9	0	0	0	0	0	4	0	0	0	0	20
PRIOR 2022 REPORTING YEAR TOTAL	2	1	3	6	0	0	0	0	0	2	0	0	0	0	14
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC20682				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Crystal River FL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4950 West Norvell Bryant Highway								CITY/TOWN CRYSTAL RIVER				STATE FL		ZIP CODE 34429	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b>															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	15	1	0	0	0	0	2	0	0	0	0	0	20
Professionals	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	11	0	0	0	0	0	3	0	0	0	0	0	15
Administrative Support Workers	0	0	0	0	0	0	0	0	4	0	0	0	0	0	4
Craft Workers	5	0	27	2	0	0	1	2	0	0	0	0	0	0	37
Operatives	6	0	40	4	0	0	0	0	2	0	0	0	0	0	52
Laborers and Helpers	2	0	10	0	0	0	0	0	1	0	0	0	0	0	13
Service Workers	1	0	1	0	0	0	0	0	2	0	0	0	0	0	4
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	17	0	106	7	0	0	1	2	16	0	0	0	0	0	149
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	5	2	79	6	0	0	0	1	10	0	0	0	0	0	103
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31005			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Raleigh NC													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1000 Garner Business Park Dr, Suite 100								CITY/TOWN GARNER			STATE NC		ZIP CODE 27529			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
JOB CATEGORIES	Race/Ethnicity															
	Hispanic or Latino		Not Hispanic or Latino													Row Total
			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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	2	0	0	0	0	0	5	
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	1	12	0	0	0	0	1	7	0	0	0	0	0	21	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	1	0	3	8	0	0	0	1	0	0	0	0	0	0	13	
Laborers and Helpers	0	0	0	4	0	0	0	1	1	0	0	0	0	0	6	
Service Workers	0	0	1	0	0	0	0	0	5	2	0	0	0	1	9	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	1	21	12	0	0	0	3	15	2	0	0	0	1	56	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	21	13	0	0	0	2	8	0	0	0	0	0	44	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30666			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bakersfield CA - PYP												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5311 S Union Avenue						CITY/TOWN BAKERSFIELD				STATE CA		ZIP CODE 93307			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 953406551															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	8	0	1	0	0	0	0	0	0	0	0	0	0	0	9
Administrative Support Workers	1	3	0	0	0	0	0	0	0	0	0	0	0	0	4
Craft Workers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	8	0	1	1	0	0	0	0	0	0	0	0	0	0	10
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 2023 REPORTING YEAR TOTAL	20	4	2	1	0	0	0	0	0	0	0	0	0	0	27
PRIOR 2022 REPORTING YEAR TOTAL	4	2	1	0	0	0	0	0	0	0	0	0	0	0	7
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID HF15772			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Newark NJ - APO													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 491 Mulberry Street						CITY/TOWN NEWARK				STATE NJ		ZIP CODE 07114				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Laborers and Helpers	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>4</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>6</b>	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4</b>	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																
8																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17150			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Los Angeles CA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5470-78 W Pico Blvd						CITY/TOWN LOS ANGELES				STATE CA		ZIP CODE 90019				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1	
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	7	1	0	0	0	0	0	0	0	0	0	0	0	0	8	
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 2023 REPORTING YEAR TOTAL	8	1	0	0	0	0	0	1	0	0	0	0	0	0	10	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID X245670			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Halethorpe MD - Linthicum													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4803 Hollins Ferry Road						CITY/TOWN HALETHORPE				STATE MD		ZIP CODE 21227				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
JOB CATEGORIES	Race/Ethnicity															
	Hispanic or Latino		Not Hispanic or Latino													Row Total
			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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
First/Mid-Level Officials and Managers	1	0	5	0	0	0	0	0	3	0	0	0	0	0	9	
Professionals	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	2	1	7	1	0	0	0	0	1	2	0	0	0	0	14	
Administrative Support Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	2	0	9	18	0	0	0	0	0	0	0	0	0	0	29	
Laborers and Helpers	3	8	20	18	0	0	0	1	0	0	0	0	0	0	50	
Service Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	8	9	43	37	0	0	0	1	8	2	0	0	0	0	108	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	6	5	34	35	0	0	0	2	5	3	0	0	0	0	90	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30366			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Lincoln NE												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3450 N 35Th Circle						CITY/TOWN LINCOLN				STATE NE		ZIP CODE 68504			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	4	0	0	0	0	0	0	0	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Operatives	0	0	4	0	0	0	0	0	0	0	0	0	0	1	5
Laborers and Helpers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	18	0	0	0	0	0	2	0	0	0	0	1	22
PRIOR 2022 REPORTING YEAR TOTAL	2	0	18	0	0	0	0	0	0	0	0	0	0	1	21
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID PA92681				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bennett CO - LKQ Denver											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 40100 E Colfax Ave								CITY/TOWN BENNETT				STATE CO		ZIP CODE 80102	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	3	0	0	0	0	0	3	0	0	0	0	0	7
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	4	0	3	0	0	0	0	0	0	0	0	0	0	0	7
Operatives	1	0	4	0	0	0	0	0	0	0	0	0	0	0	5
Laborers and Helpers	2	0	9	0	0	0	0	0	0	0	0	0	0	0	11
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>8</b>	<b>0</b>	<b>19</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>30</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>6</b>	<b>0</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>12</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16873			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Sheridan CO													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3701 S Santa Fe Dr, Unit 1						CITY/TOWN SHERIDAN				STATE CO		ZIP CODE 80110				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	1	0	4	0	0	0	0	0	1	0	0	0	0	0	6	
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 2023 REPORTING YEAR TOTAL	1	0	4	0	0	0	0	0	1	0	0	0	0	0	6	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17126			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Concord CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2666 Willow Pass Rd						CITY/TOWN CONCORD				STATE CA		ZIP CODE 94519			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16193			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Lansing MI												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5321 S Pennsylvania						CITY/TOWN LANSING				STATE MI		ZIP CODE 48910			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	3	0	0	0	0	0	0	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	1	0	3	0	0	0	0	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17225			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fresno CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1425 N First Street						CITY/TOWN FRESNO				STATE CA		ZIP CODE 93703			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	0	0	0	0	0	0	0	0	0	0	0	0	1	5
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 2023 REPORTING YEAR TOTAL	4	0	0	0	0	0	0	0	0	0	0	0	0	1	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID MV45716				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Wilmington NC - 3448											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 954 S Kerr Ave								CITY/TOWN WILMINGTON				STATE NC		ZIP CODE 28403	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
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 2023 REPORTING YEAR TOTAL	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EW12681				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Henderson CO - Western											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 9090 Brighton Road								CITY/TOWN HENDERSON				STATE CO		ZIP CODE 80640	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	7	0	0	0	0	0	0	0	0	0	0	0	8
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	2	0	6	0	0	0	0	0	0	0	0	0	0	0	8
Operatives	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>6</b>	<b>1</b>	<b>16</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>24</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>4</b>	<b>1</b>	<b>6</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>13</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GN78846			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Philadelphia PA - APO												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3401 Gaul St						CITY/TOWN PHILADELPHIA				STATE PA		ZIP CODE 19134			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	2	0	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	4	0	0	0	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	5	2	0	0	0	0	0	1	0	0	0	0	0	0	8
PRIOR 2022 REPORTING YEAR TOTAL	2	1	0	0	0	0	0	0	0	0	0	0	0	0	3
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31537			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Austin TX												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2500 Scarbrough Dr Ste 100						CITY/TOWN AUSTIN				STATE TX		ZIP CODE 78728			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	1	3	1	0	0	0	0	0	0	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	7	5	2	2	0	1	0	0	1	1	0	0	0	0	19
Administrative Support Workers	0	1	2	0	0	0	0	0	0	0	0	0	0	0	3
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	0	4	1	0	0	0	0	0	0	0	0	0	0	9
Laborers and Helpers	5	0	3	5	0	0	0	1	0	1	0	0	0	0	15
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	17	7	14	9	0	1	0	1	1	2	0	0	0	0	52
PRIOR 2022 REPORTING YEAR TOTAL	8	6	9	9	0	1	0	2	3	2	0	0	0	0	40
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID ET08082			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME LaGrange NC - East Carolina												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 7135 Highway 70 West						CITY/TOWN LA GRANGE				STATE NC		ZIP CODE 28551			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	5	0	0	0	0	0	8
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	3	0	3	2	0	0	0	1	0	0	0	0	0	0	9
Operatives	1	0	13	1	0	0	0	0	1	0	0	0	0	0	16
Laborers and Helpers	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	4	0	22	4	0	0	0	1	7	0	0	0	0	0	38
PRIOR 2022 REPORTING YEAR TOTAL	5	1	16	3	0	0	0	1	3	0	0	0	0	1	30
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16048				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Sioux Falls SD											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3505 N 1st Ave								CITY/TOWN SIOUX FALLS				STATE SD		ZIP CODE 57104	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP38151				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Huntsville AL - Self Service											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6942 Stringfield Road								CITY/TOWN HUNTSVILLE				STATE AL		ZIP CODE 35806	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Professionals	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	2	0	0	0	0	2	1	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Craft Workers	0	0	0	4	0	0	0	0	1	1	0	0	0	0	6
Operatives	0	0	1	1	0	0	0	0	0	1	0	0	0	0	3
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	1	8	0	0	0	0	4	4	0	0	0	0	17
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	1	5	0	0	0	1	2	1	0	0	0	0	10
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31481			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Macon GA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 580 Joe Tamplin Industrial Blvd, Suite A						CITY/TOWN MACON				STATE GA		ZIP CODE 31217			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	1	1	0	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	3	0	0	0	0	0	1	0	0	0	0	7
Laborers and Helpers	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	7	6	0	0	0	0	1	2	0	0	0	0	16
PRIOR 2022 REPORTING YEAR TOTAL	0	0	6	5	0	0	0	0	0	2	0	0	0	0	13
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17271			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Sacramento CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1099 Vine Street, Ste 206						CITY/TOWN SACRAMENTO				STATE CA		ZIP CODE 95811			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16862			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Westminster CO													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3031 West 74th Ave						CITY/TOWN WESTMINSTER				STATE CO		ZIP CODE 80030				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	2	0	0	0	0	0	3	0	0	0	0	0	5	
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	3	0	0	0	0	0	5	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16532			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chesapeake VA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 911 Live Oak Dr						CITY/TOWN CHESAPEAKE				STATE VA		ZIP CODE 23320			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	3	0	0	0	0	0	1	0	0	0	0	6
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 2023 REPORTING YEAR TOTAL	0	0	2	3	0	0	0	0	0	1	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30217			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Sterling MA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 21 Chocksett Road						CITY/TOWN STERLING				STATE MA		ZIP CODE 01564			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	5	0	0	0	0	0	0	0	0	0	0	0	6
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	7	0	24	1	1	0	0	0	1	0	0	0	0	0	34
Laborers and Helpers	16	0	12	3	0	0	0	2	0	0	0	0	0	0	33
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>24</b>	<b>0</b>	<b>43</b>	<b>4</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>76</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>16</b>	<b>0</b>	<b>36</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>56</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JB60518				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Parkersburg WV											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3706 Camden Ave								CITY/TOWN PARKERSBURG				STATE WV		ZIP CODE 26101	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	8	0	0	0	0	0	1	0	0	0	0	0	9
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	10	0	0	0	0	0	1	0	0	0	0	0	11
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)  <div style="border: 1px solid black; height: 150px; margin-top: 10px;"></div>															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16094			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Lafayette IN													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2045 Greenbush						CITY/TOWN LAFAYETTE				STATE IN		ZIP CODE 47904				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4	
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID MV45707				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Augusta GA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3307 Commerce Dr								CITY/TOWN AUGUSTA				STATE GA		ZIP CODE 30909	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b>															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID MV45761			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Ocoee FL - KAO Warehouse												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 635 Ocoee Business Parkway						CITY/TOWN OCOEE				STATE FL		ZIP CODE 34761			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
Professionals	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	10	2	4	10	2	0	1	0	0	4	0	0	0	0	33
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	11	3	8	11	2	0	1	0	0	4	0	0	0	0	40
PRIOR 2022 REPORTING YEAR TOTAL	5	1	1	4	0	0	0	0	0	2	0	0	0	0	13
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17084				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME North Hollywood CA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6517 Lankershim Blvd								CITY/TOWN NORTH HOLLYWOOD				STATE CA		ZIP CODE 91606	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	5	1	2	0	0	0	0	0	0	0	0	0	0	0	8
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 2023 REPORTING YEAR TOTAL	5	1	2	0	0	0	0	0	0	0	0	0	0	0	8
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30886			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Aurora CO - Self Service												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11602 E 33Rd Avenue						CITY/TOWN AURORA				STATE CO		ZIP CODE 80010			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	1	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	3	2	0	0	0	0	0	1	0	0	0	0	0	8
Administrative Support Workers	0	1	1	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	3	0	3	0	0	0	0	0	1	0	0	0	0	0	7
Operatives	3	0	1	1	0	0	0	0	0	0	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	9	4	7	1	0	0	0	0	3	0	0	0	0	0	24
PRIOR 2022 REPORTING YEAR TOTAL	6	1	5	1	0	0	0	1	4	2	0	0	0	0	20
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17412			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Wilmer TX												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 500 Lavender Rd						CITY/TOWN WILMER				STATE TX		ZIP CODE 75172			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	4	2	0	0	0	0	2	0	0	0	0	0	10
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	2	0	0	0	0	0	0	2	0	0	0	0	0	4
Craft Workers	9	0	6	1	0	0	0	0	0	0	0	0	0	0	16
Operatives	4	0	3	8	0	0	0	2	0	0	0	0	0	0	17
Laborers and Helpers	11	0	4	5	0	0	0	1	0	0	0	0	0	0	21
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	26	2	17	16	0	0	0	3	4	0	0	0	0	0	68
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID MV45642			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME San Jose CA - 1724												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5995 Hellyer Ave, Suite 10						CITY/TOWN SAN JOSE				STATE CA		ZIP CODE 95138			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 364261871															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	0	0	0	0	0	1	0	0	0	0	0	0	2
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 2023 REPORTING YEAR TOTAL	1	0	0	0	0	0	0	1	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	1	1	0	0	0	0	0	1	0	0	0	0	0	0	3
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16822			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Appleton WI												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3070 Spirit Court						CITY/TOWN APPLETON				STATE WI		ZIP CODE 54913			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	6	0	0	0	0	0	1	0	0	0	0	0	7
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 2023 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	1	0	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16730				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Dania Beach FL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2363 Stirling Road								CITY/TOWN DANIA BEACH				STATE FL		ZIP CODE 33312	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	2	2	0	0	0	0	0	0	0	0	0	0	6
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 2023 REPORTING YEAR TOTAL	2	0	2	2	0	0	0	0	0	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31193				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME St. Cloud MN											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2789 Clearwater Rd Suite B								CITY/TOWN SAINT CLOUD				STATE MN		ZIP CODE 56301	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Laborers and Helpers	0	0	3	0	0	0	0	1	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	12	0	0	0	0	1	1	0	0	0	0	0	14
PRIOR 2022 REPORTING YEAR TOTAL	0	0	11	0	0	0	0	1	1	0	0	0	0	0	13
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30520				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Easton MD - HT Maryland											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 29368 Matthewstown Rd								CITY/TOWN EASTON				STATE MD		ZIP CODE 21601	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	2	0	0	0	0	0	5
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	4	0	1	0	0	0	1	0	0	0	0	0	0	0	6
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	0	10	1	0	0	1	0	2	0	0	0	0	0	18
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	2	0	5	1	0	0	1	0	2	0	0	0	0	0	11
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30684			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Salt Lake City UT - Salvage												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3455 West Ninigret Drive						CITY/TOWN SALT LAKE CITY				STATE UT		ZIP CODE 84104			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FC93761				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Roseville MI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 16174 Common Rd								CITY/TOWN ROSEVILLE				STATE MI		ZIP CODE 48066	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	2	0	0	0	0	0	2	0	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	9	2	4	4	0	0	0	0	1	0	0	0	0	0	20
Laborers and Helpers	2	0	3	0	0	0	0	0	1	0	0	0	0	0	6
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>11</b>	<b>3</b>	<b>12</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>36</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>1</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>10</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA49937			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fresno CA - KAO Logistics												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2933 South Elm Ave, Suite 106						CITY/TOWN FRESNO				STATE CA		ZIP CODE 93706			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	1	1	0	1	0	0	1	0	0	0	0	0	0	8
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 2023 REPORTING YEAR TOTAL	6	1	1	0	1	0	0	1	0	0	0	0	0	0	10
PRIOR 2022 REPORTING YEAR TOTAL	7	1	1	0	1	0	0	1	0	0	0	0	0	0	11
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID DP29462				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bryant AR											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3700 Bryant Crossing Dr								CITY/TOWN BRYANT			STATE AR		ZIP CODE 72022		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	9	0	0	0	0	0	1	0	0	0	0	0	10
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	26	3	0	0	0	1	3	0	0	0	0	0	33
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	7	3	0	0	0	0	1	0	0	0	0	0	11
Laborers and Helpers	0	0	10	4	0	0	0	1	1	0	0	0	0	0	16
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	52	10	0	0	0	2	7	0	0	0	0	0	71
PRIOR 2022 REPORTING YEAR TOTAL	3	2	42	12	0	0	0	1	7	0	0	0	0	0	67
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JV43342			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Donna TX												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3965 S FM 493						CITY/TOWN DONNA				STATE TX		ZIP CODE 78357			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	5	0	0	0	0	0	0	0	0	0	0	0	0	0	5
Operatives	5	0	0	0	0	0	0	0	0	0	0	0	0	0	5
Laborers and Helpers	3	0	1	0	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	17	0	2	0	0	0	0	0	0	0	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	10	0	2	1	0	0	0	0	0	0	0	0	0	0	13
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP13502			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Montgomery AL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5112 Lower Wetumpka Road						CITY/TOWN MONTGOMERY				STATE AL		ZIP CODE 36110			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	1	0	0	0	0	1	0	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	0	0	3	1	0	0	0	0	2	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	0	4	1	0	0	0	0	1	0	0	0	0	0	6
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA49836				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Alsip IL - KAO Logis Chicago											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11800 S Austin Ave, Suite C								CITY/TOWN ALSIP				STATE IL		ZIP CODE 60803	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	0	0	5	0	0	0	0	0	0	0	0	0	0	9
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	0	0	6	0	0	0	0	0	0	0	0	0	0	10
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	4	0	2	10	0	0	0	0	1	0	0	0	0	0	17
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID HF18183				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Wilmington NC-KAO Ops Topline											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5704 Oleander Dr, Suite 107								CITY/TOWN WILMINGTON				STATE NC		ZIP CODE 28403	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EW18566			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Damascus OR												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 19510 Se Sunnyside Road						CITY/TOWN DAMASCUS				STATE OR		ZIP CODE 97089			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	1	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	2	0	2	0	0	0	0	1	0	0	0	0	0	0	5
Operatives	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
Laborers and Helpers	2	0	1	0	0	0	0	1	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	4	0	10	0	1	0	0	2	1	0	0	0	0	0	18
PRIOR 2022 REPORTING YEAR TOTAL	3	0	7	0	0	0	0	1	0	0	0	0	0	0	11
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV54572			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Charlotte NC - Self Service												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3900 Chesapeake Drive						CITY/TOWN CHARLOTTE				STATE NC		ZIP CODE 28216			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	4	0	2	0	0	0	0	0	0	0	0	0	0	7
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	1	1	0	0	0	0	0	0	0	0	0	2
Operatives	5	0	1	4	3	0	0	0	0	0	0	0	0	0	13
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>6</b>	<b>5</b>	<b>2</b>	<b>7</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>24</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>6</b>	<b>1</b>	<b>3</b>	<b>4</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>15</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID DP29550			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Aurora CO												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3225 N Himalaya Rd						CITY/TOWN AURORA			STATE CO		ZIP CODE 80011				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	1	2	2	0	0	0	0	0	0	0	0	0	0	7
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	11	3	10	2	0	0	0	1	1	0	0	0	0	0	28
Administrative Support Workers	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	8	1	10	5	1	0	0	1	0	1	0	0	0	1	28
Laborers and Helpers	5	2	2	2	1	0	0	3	1	1	0	0	1	0	18
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	26	9	24	11	2	0	0	5	2	2	0	0	1	1	83
PRIOR 2022 REPORTING YEAR TOTAL	23	7	23	6	1	1	0	6	4	1	0	0	1	0	73
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16587			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Birmingham AL													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3521 3rd Ave South						CITY/TOWN BIRMINGHAM				STATE AL		ZIP CODE 35222				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	2	3	0	0	0	0	0	0	0	0	0	0	5	
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 2023 REPORTING YEAR TOTAL	0	0	2	3	0	0	0	0	0	0	0	0	0	0	5	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC21122				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Harrisville OH-Rt 250AutoPart											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 152 State Route 250								CITY/TOWN HARRISVILLE				STATE OH		ZIP CODE 43974	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	12	0	0	0	0	0	0	0	0	0	0	0	12
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	12	1	0	0	0	0	1	0	0	0	0	0	15
Administrative Support Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Craft Workers	0	0	13	0	0	0	0	2	0	0	0	0	0	0	15
Operatives	0	0	12	0	0	1	0	0	0	0	0	0	0	0	13
Laborers and Helpers	0	0	12	0	0	0	0	0	1	0	0	0	0	0	13
Service Workers	0	0	0	0	0	0	0	0	4	0	0	0	0	0	4
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	61	1	0	1	0	2	8	0	0	0	0	0	74
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	47	1	0	0	0	1	3	0	0	0	0	0	52
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID MV45651				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Pittsboro NC-GreenBeanBattery											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1245 Thompson St								CITY/TOWN PITTSBORO				STATE NC		ZIP CODE 27312	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	1	2	1	0	0	2	0	0	0	0	0	10
Professionals	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	1	0	0	0	0	0	1	0	0	0	0	0	3
Administrative Support Workers	0	2	1	0	0	0	0	0	4	1	0	0	0	0	8
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	5	0	0	0	0	0	0	0	0	0	0	0	8
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	3	3	13	1	2	1	0	0	7	1	0	0	0	0	31
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	1	2	0	2	1	0	0	3	0	0	0	0	0	9
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID DY29681			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Houston TX - South TX												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 19423 Aldine Westfield Rd						CITY/TOWN HOUSTON				STATE TX		ZIP CODE 77073			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	9	2	3	0	0	0	0	0	2	2	0	0	0	0	18
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	8	0	4	0	0	0	0	0	0	0	0	0	0	0	12
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	11	0	3	2	0	0	0	0	0	0	0	0	0	0	16
Operatives	28	0	3	2	0	0	0	0	0	0	0	0	0	0	33
Laborers and Helpers	2	0	4	5	0	0	0	0	0	0	0	0	0	0	11
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	58	2	17	9	0	0	0	0	2	2	0	0	0	0	90
PRIOR 2022 REPORTING YEAR TOTAL	43	1	11	9	0	1	0	0	2	1	0	0	0	0	68
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID X245717			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Miami FL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11701 Nw 101 Rd						CITY/TOWN MEDLEY			STATE FL		ZIP CODE 33178				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	4	0	0	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	12	0	1	2	0	0	0	0	0	0	0	0	0	0	15
Administrative Support Workers	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	26	1	2	0	0	0	0	0	0	0	0	0	0	0	29
Laborers and Helpers	19	0	0	0	0	0	0	0	0	0	0	0	0	0	19
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	61	3	4	2	0	0	0	0	0	0	0	0	0	0	70
PRIOR 2022 REPORTING YEAR TOTAL	57	2	4	2	0	0	0	0	0	0	0	0	0	0	65
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66074			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Dallas PA - KAO A&A												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 38 Memorial Hwy						CITY/TOWN DALLAS				STATE PA		ZIP CODE 18612			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	2	0	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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 2023 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	2	0	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	1	0	0	0	0	0	7
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30446				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Satsume LA - Gulf Coast											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 16925 Black Mudd Road								CITY/TOWN LIVINGSTON				STATE LA		ZIP CODE 70754	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b>															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	2	0	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	1	0	4	1	0	0	0	0	0	0	0	0	0	0	6
Operatives	0	0	10	2	0	0	0	0	3	0	0	0	0	0	15
Laborers and Helpers	0	0	3	1	0	0	0	0	2	0	0	0	0	0	6
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	23	4	0	0	0	0	10	0	0	0	0	0	38
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	1	0	22	1	0	0	0	1	8	0	0	0	0	0	33
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FC89341			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Stockton CA - Salvage												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2041 Navy Drive						CITY/TOWN STOCKTON				STATE CA		ZIP CODE 95206			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 364261871															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	3	0	3	1	4	0	0	0	0	0	0	0	0	0	11
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	2	0	0	1	2	0	0	0	0	0	0	0	0	0	5
Operatives	18	2	7	1	6	0	0	1	0	0	0	0	0	0	35
Laborers and Helpers	16	1	6	1	8	0	0	5	0	0	0	0	0	0	37
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	39	4	17	4	20	0	0	6	0	0	0	0	0	0	90
PRIOR 2022 REPORTING YEAR TOTAL	29	2	14	5	22	0	0	7	0	0	0	0	0	0	79
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30915			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Blue Island IL - U Pull It So												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2247 141St Street						CITY/TOWN BLUE ISLAND				STATE IL		ZIP CODE 60406			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	1	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	1	1	2	0	0	0	0	0	0	0	0	0	0	5
Administrative Support Workers	1	0	0	0	0	0	0	0	3	0	0	0	0	0	4
Craft Workers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	9	0	2	3	0	0	0	0	0	0	0	0	0	0	14
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 2023 REPORTING YEAR TOTAL	13	2	6	5	0	0	0	0	3	0	0	0	0	0	29
PRIOR 2022 REPORTING YEAR TOTAL	9	1	4	3	0	0	0	0	0	0	0	0	0	0	17
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID HF15081			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Wykoff MN												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 125 South Gold Street						CITY/TOWN WYKOFF				STATE MN		ZIP CODE 55990			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	12	0	0	0	0	0	0	0	0	0	0	0	12
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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 2023 REPORTING YEAR TOTAL	0	0	18	0	0	0	0	0	4	0	0	0	0	0	22
PRIOR 2022 REPORTING YEAR TOTAL	0	0	7	0	0	0	0	0	5	0	0	0	0	0	12
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17115			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Cathedral City CA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 36-055 Cathedral Dr						CITY/TOWN CATHEDRAL CITY				STATE CA		ZIP CODE 92234				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>															<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>													
			<b>Male</b>							<b>Female</b>						
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	5	1	0	0	0	0	0	0	0	0	0	0	0	0	6	
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	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	5	1	0	0	0	0	0	0	0	0	0	0	0	0	6	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30042				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Parryville PA-ThruwayAutoPart											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 201 State Rd (Pa-248)								CITY/TOWN PARRYVILLE				STATE PA		ZIP CODE 18244	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	1	0	7	0	0	0	0	0	0	0	0	0	0	0	8
Operatives	1	0	8	0	0	0	0	0	1	0	0	0	0	0	10
Laborers and Helpers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	23	0	0	0	0	0	3	0	0	0	0	0	28
PRIOR 2022 REPORTING YEAR TOTAL	1	0	25	0	0	0	0	1	3	0	0	0	0	0	30
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30208			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Litchfield NH												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 476 Charles Bancroft Hwy						CITY/TOWN LITCHFIELD				STATE NH		ZIP CODE 03052			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	4	0	0	0	0	0	0	0	0	0	0	0	5
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	0	8	2	0	0	1	0	0	0	0	0	0	1	16
Laborers and Helpers	3	1	1	0	0	0	0	0	0	0	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	8	1	13	2	0	0	1	0	0	0	0	0	0	1	26
PRIOR 2022 REPORTING YEAR TOTAL	7	1	10	2	0	0	1	1	0	0	0	0	0	1	23
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16752				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Hicksville NY - APO Long Island											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 600 W John St, Suite 140C								CITY/TOWN HICKSVILLE				STATE NY		ZIP CODE 11801	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16686			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Lakeland FL													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1025 E Oleander St						CITY/TOWN LAKELAND				STATE FL		ZIP CODE 33801				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	1	0	1	0	0	0	0	0	1	0	0	0	0	1	4	
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 2023 REPORTING YEAR TOTAL	1	0	1	0	0	0	0	0	1	0	0	0	0	1	4	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16345			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Boston MA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 199 Norfolk Ave						CITY/TOWN BOSTON				STATE MA		ZIP CODE 02119			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	3	0	0	0	0	0	0	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	1	0	3	0	0	0	0	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID ET08487			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Ontario CA - Pick A Part												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2025 A South Miliken Avenue						CITY/TOWN ONTARIO				STATE CA		ZIP CODE 91761			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 953072886															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	2	1	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	5	0	0	0	0	0	0	1	1	0	0	0	0	0	7
Administrative Support Workers	3	2	0	0	0	0	0	0	0	0	0	0	0	0	5
Craft Workers	1	0	0	1	0	0	0	0	0	0	0	0	0	0	2
Operatives	20	0	0	0	0	0	0	0	0	0	0	0	0	0	20
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 2023 REPORTING YEAR TOTAL	29	5	1	1	0	0	0	1	1	0	0	0	0	0	38
PRIOR 2022 REPORTING YEAR TOTAL	16	3	1	0	0	0	0	0	1	0	0	0	0	0	21
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31225				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fridley MN - MW Division											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 60 51st Way NE								CITY/TOWN FRIDLEY				STATE MN		ZIP CODE 55418	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 551114 - Corporate, Subsidiary, and Regional Managing Offices															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66508			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Temecula CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 42000 Zevo Drive, Unit 102						CITY/TOWN TEMECULA				STATE CA		ZIP CODE 92590			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3
Laborers and Helpers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	4	0	0	0	0	0	0	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	4	0	0	0	0	0	0	0	0	0	0	0	0	0	4
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56661				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Wilmington CA - PYP -Trucking											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1903 Blinn Ave								CITY/TOWN WILMINGTON				STATE CA		ZIP CODE 90744	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 953406551															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	6	1	0	0	0	0	0	0	0	0	0	0	0	0	7
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	6	1	0	0	0	0	0	0	0	0	0	0	0	0	7
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	6	1	0	0	0	0	0	0	0	0	0	0	0	0	7
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID BQ80470			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Austell GA - KAO Whse ATL													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 600 Hartman Industrial Ct.						CITY/TOWN AUSTELL				STATE GA		ZIP CODE 30168				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	2	1	3	6	0	0	0	0	0	0	0	0	0	0	0	12
Professionals	0	0	1	1	0	0	0	0	0	2	2	0	0	0	0	6
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	2	0	0	0	0	0	4
Administrative Support Workers	0	0	1	0	0	0	0	0	0	2	0	0	0	0	0	3
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	6	31	1	0	0	0	1	0	0	0	0	0	0	40
Laborers and Helpers	7	4	7	36	0	0	0	1	1	12	0	0	0	0	0	68
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	10	5	21	74	1	0	0	1	8	14	0	0	0	0	0	134
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	13	36	2	0	0	0	5	5	0	0	0	0	0	61
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31730			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Seattle WA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4123 142Nd Ave E Suite#100						CITY/TOWN SUMNER			STATE WA		ZIP CODE 98390				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	2	1	0	0	0	1	3	0	1	0	0	0	10
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	1	1	0	0	0	2	0	0	0	0	0	7
Administrative Support Workers	0	0	0	0	0	0	0	0	3	0	0	0	0	1	4
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	0	17	5	1	0	1	6	1	0	0	0	0	0	35
Laborers and Helpers	3	2	18	3	0	0	0	0	2	0	0	0	0	1	29
Service Workers	0	0	1	0	1	0	0	0	7	0	0	0	0	0	9
CURRENT 2023 REPORTING YEAR TOTAL	9	2	42	10	3	0	1	7	18	0	1	0	0	2	95
PRIOR 2022 REPORTING YEAR TOTAL	8	2	38	8	3	0	1	8	15	0	1	0	0	2	86
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30235			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Boise ID												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3226 Garrity Blvd						CITY/TOWN NAMPA				STATE ID		ZIP CODE 83687			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30455			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fayetteville AR - NW Arkansas												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 185 E Mabry Lane						CITY/TOWN FAYETTEVILLE				STATE AR		ZIP CODE 72701			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	1	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	2	0	0	0	0	0	0	0	0	0	0	1	4
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	1	0	0	0	0	0	0	1	0	0	0	0	0	0	2
Operatives	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
Laborers and Helpers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	1	15	0	0	0	0	2	1	0	0	0	0	1	21
PRIOR 2022 REPORTING YEAR TOTAL	2	1	8	0	0	0	0	2	2	0	0	0	0	1	16
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31234			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME El Paso TX												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1273 Joe Battle Blvd #A1						CITY/TOWN EL PASO				STATE TX		ZIP CODE 79936			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	13	4	0	0	0	0	0	1	0	0	0	0	0	0	18
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	1	0	1	0	0	0	0	0	0	0	0	0	0	4
Laborers and Helpers	15	0	1	0	0	0	0	0	0	0	0	0	0	0	16
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	31	6	1	1	0	0	0	1	0	0	0	0	0	0	40
PRIOR 2022 REPORTING YEAR TOTAL	29	1	0	1	0	0	0	1	0	0	0	0	0	0	32
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31041				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chesapeake VA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5415 W Military Hwy								CITY/TOWN CHESAPEAKE				STATE VA		ZIP CODE 23321	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31391			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Santa Fe Springs CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 13603 Foster Road						CITY/TOWN SANTA FE SPRINGS			STATE CA		ZIP CODE 90670				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	2	2	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	1	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	15	3	1	0	1	0	0	1	0	0	0	0	0	0	21
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	12	0	1	0	0	0	0	0	0	0	0	0	0	0	13
Laborers and Helpers	17	2	2	1	4	0	0	1	0	0	0	0	0	0	27
Service Workers	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2
CURRENT 2023 REPORTING YEAR TOTAL	44	9	6	1	5	0	0	2	1	0	1	0	0	0	69
PRIOR 2022 REPORTING YEAR TOTAL	42	8	6	2	5	0	0	2	1	1	0	0	0	0	67
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GN78920				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Clackamas OR - KAO Logistic											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 12472 SE Capps Road								CITY/TOWN CLACKAMAS				STATE OR		ZIP CODE 97015	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	1	8	1	0	0	0	1	0	1	0	0	0	0	15
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>4</b>	<b>1</b>	<b>9</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>17</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>12</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>17</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17324			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tacoma WA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 133 S 96th St						CITY/TOWN TACOMA			STATE WA		ZIP CODE 98444				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	1	0	0	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	1	0	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EP13762			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Union City CA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 30336 Whipple Road						CITY/TOWN UNION CITY				STATE CA		ZIP CODE 94587				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY																
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)																
Unique Entity ID (UEI): Not Applicable																
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)																
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)																
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	1	0	1	0	0	0	0	0	0	1	0	0	0	0	3	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	7	1	1	2	0	2	0	0	0	1	1	0	0	0	15	
Laborers and Helpers	3	0	2	0	0	2	0	0	0	1	0	0	0	1	9	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
CURRENT 2023 REPORTING YEAR TOTAL	12	1	4	2	0	4	0	0	0	3	1	0	0	1	28	
PRIOR 2022 REPORTING YEAR TOTAL	9	1	4	4	0	4	0	0	0	2	1	0	0	0	25	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID X245681			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Alsip IL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5100 W 123Rd Street						CITY/TOWN ALSIP				STATE IL		ZIP CODE 60803			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>						<b>Female</b>						
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	4	1	0	0	0	0	1	1	0	0	0	0	8
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	1	6	0	0	0	0	0	0	0	0	0	0	0	10
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	8	0	11	10	0	0	0	0	0	0	0	0	0	0	29
Laborers and Helpers	25	2	10	26	0	0	0	2	1	2	0	0	0	1	69
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	37	3	31	37	0	0	0	2	3	3	0	0	0	1	117
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	39	2	33	21	0	0	0	2	2	2	0	0	0	0	101
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID BZ79074			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Blue Island IL - A-Reliable													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2247 139Th Street						CITY/TOWN BLUE ISLAND				STATE IL		ZIP CODE 60406				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
JOB CATEGORIES	Race/Ethnicity															
	Hispanic or Latino		Not Hispanic or Latino													Row Total
			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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	3	0	3	0	1	0	0	0	2	0	0	0	0	0	9	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	3	0	2	1	0	0	0	0	0	0	0	0	0	0	6	
Administrative Support Workers	0	0	0	0	0	0	0	0	3	0	0	0	0	0	3	
Craft Workers	7	0	3	5	0	0	0	0	0	0	0	0	0	0	15	
Operatives	10	0	14	5	0	0	0	0	1	0	0	0	0	0	30	
Laborers and Helpers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>23</b>	<b>0</b>	<b>22</b>	<b>12</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>64</b>	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>18</b>	<b>0</b>	<b>15</b>	<b>5</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>45</b>	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17423				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Baldwin WI - Tri Star											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 320 10th Ave								CITY/TOWN BALDWIN				STATE WI		ZIP CODE 54002	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	6	0	0	0	0	0	3	0	0	0	0	0	9
Professionals	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	8	0	0	0	0	0	0	0	0	0	0	0	8
Administrative Support Workers	0	0	2	0	0	0	0	0	4	0	0	0	0	0	6
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	82	1	0	0	0	0	17	0	0	0	0	0	103
Laborers and Helpers	0	0	12	0	0	0	0	0	2	0	0	0	0	0	14
Service Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	3	0	114	1	0	0	0	0	28	0	0	0	0	0	146
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30648			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Sun Valley CA - PYP-SV Repair												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 9228 Tujunga Street						CITY/TOWN SUN VALLEY				STATE CA		ZIP CODE 91352			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 953406551															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	2	0	0	0	0	0	0	1	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	1	0	0	0	0	0	0	0	0	1	0	0	0	0	2
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31261			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Las Vegas NV													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3370 E Lone Mountain Rd						CITY/TOWN NORTH LAS VEGAS				STATE NV		ZIP CODE 89081				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	3	1	2	0	0	1	0	0	1	0	0	0	0	0	8	
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	11	2	4	3	2	1	0	1	2	0	0	0	0	0	26	
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	
Craft Workers	4	0	0	0	0	0	0	1	0	0	0	0	0	0	5	
Operatives	5	0	2	3	0	0	0	1	2	0	0	0	0	0	13	
Laborers and Helpers	21	0	3	2	1	1	0	1	0	0	0	0	0	0	29	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	45	4	11	8	3	3	0	4	5	0	0	0	0	0	83	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	36	3	7	8	3	2	0	5	4	0	0	0	0	0	68	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16312				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Norwalk CT											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 17 Broad St								CITY/TOWN NORWALK				STATE CT		ZIP CODE 06851	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	1	2	0	0	0	0	0	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	1	0	1	2	0	0	0	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16796			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME West Allis WI												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 440 S Curtis Road						CITY/TOWN WEST ALLIS				STATE WI		ZIP CODE 53214			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	2	1	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	2	1	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FA71763			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Riverside CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3760 Pyrite Street						CITY/TOWN RIVERSIDE				STATE CA		ZIP CODE 92509			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 953406551															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	2	1	0	0	0	0	0	2	0	0	0	0	0	6
Administrative Support Workers	1	4	0	0	0	0	0	0	0	0	0	0	0	0	5
Craft Workers	3	0	1	0	0	0	0	0	0	0	0	0	0	0	4
Operatives	8	1	0	1	0	0	0	0	0	0	0	0	0	0	10
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 2023 REPORTING YEAR TOTAL	13	7	2	1	0	0	0	0	2	0	0	0	0	0	25
PRIOR 2022 REPORTING YEAR TOTAL	14	1	0	2	0	0	0	0	0	1	0	0	0	1	19
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31602			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Oklahoma City OK												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2000 South Council Road, Suite 101						CITY/TOWN OKLAHOMA CITY				STATE OK		ZIP CODE 73127			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	3	1	4	1	0	0	0	0	1	0	0	0	0	0	10
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	7	1	7	0	0	0	1	2	2	0	0	0	0	1	21
Administrative Support Workers	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2
Craft Workers	1	0	8	0	0	0	0	0	0	0	0	0	0	0	9
Operatives	4	1	9	0	0	0	0	0	0	0	0	0	0	0	14
Laborers and Helpers	7	0	3	4	0	0	0	3	1	0	0	0	0	0	18
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	22	4	31	5	0	0	1	5	5	0	0	0	0	1	74
PRIOR 2022 REPORTING YEAR TOTAL	18	2	20	3	1	0	0	3	4	0	0	0	0	1	52
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30437			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Pompano Beach FL - Melbourne												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2028 NW 25th Ave						CITY/TOWN POMPANO BEACH				STATE FL		ZIP CODE 33069			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	1	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	14	0	0	0	0	0	0	0	0	0	0	0	0	0	14
Laborers and Helpers	1	0	0	1	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	16	0	1	1	0	0	0	0	1	0	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	13	0	1	0	0	0	0	0	1	0	0	0	0	0	15
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30280			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Sterling VA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 23750 Pebble Run Dr, Bays # 7 8 & 9						CITY/TOWN STERLING				STATE VA		ZIP CODE 20166			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	1	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	5	0	1	5	2	0	0	0	0	0	0	0	0	0	13
Laborers and Helpers	2	0	1	2	2	0	0	0	1	0	0	0	0	0	8
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	8	0	5	7	4	0	0	1	2	0	0	0	0	0	27
PRIOR 2022 REPORTING YEAR TOTAL	5	0	5	8	2	0	0	2	0	0	0	0	0	0	22
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17040			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Hawthorne CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4823 W Rosecrans						CITY/TOWN HAWTHORNE				STATE CA		ZIP CODE 90250			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	3	1	0	0	0	0	0	0	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	1	0	3	1	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
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OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66283			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Hazelton PA - KAO A&A												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 459 W Broad St						CITY/TOWN HAZLETON				STATE PA		ZIP CODE 18201			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
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 2023 REPORTING YEAR TOTAL	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	2	1	1	0	0	0	0	1	0	0	0	0	0	0	5
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56706			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Washington Park IL -E STL PYP												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6111 Bunkum Rd								CITY/TOWN WASHINGTON PARK			STATE IL		ZIP CODE 62204		
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
Professionals	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	2	1	0	0	0	0	2	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Craft Workers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	2	0	4	7	0	0	0	1	2	0	0	0	0	0	16
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	3	1	9	9	0	0	0	1	8	0	0	0	0	0	31
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	1	0	12	6	0	0	0	1	4	0	0	0	0	0	24
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31674			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fresno CA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3131 S Northpointe Dr Ste 103						CITY/TOWN FRESNO				STATE CA		ZIP CODE 93725				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	3	0	0	0	0	0	0	1	0	0	0	0	0	0	4	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	1	3	1	0	0	0	0	3	0	0	0	0	0	3	11	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	6	0	0	0	1	0	0	2	0	1	0	0	0	0	10	
Laborers and Helpers	6	0	1	0	0	0	0	1	0	0	0	0	0	0	8	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
CURRENT 2023 REPORTING YEAR TOTAL	16	3	2	0	1	0	0	7	0	1	0	0	0	3	33	
PRIOR 2022 REPORTING YEAR TOTAL	13	3	3	0	0	0	0	4	0	1	0	0	0	3	27	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31463			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Memphis TN												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4640 Hickory Hill Rd						CITY/TOWN MEMPHIS				STATE TN		ZIP CODE 38141			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
Professionals	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	3	2	0	0	0	0	0	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	11	21	0	0	0	0	0	2	0	0	0	0	35
Laborers and Helpers	1	0	2	5	0	0	0	0	0	0	0	0	0	0	8
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	3	0	20	29	0	0	0	0	2	2	0	0	0	0	56
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	1	0	19	33	0	0	0	0	1	0	0	0	0	0	54
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)  <div style="border: 1px solid black; height: 100px; width: 100%;"></div>															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66306			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Oklahoma City OK - KAO Logis													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2000 South Council Road, Suite 101						CITY/TOWN OKLAHOMA CITY				STATE OK		ZIP CODE 73128				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
JOB CATEGORIES	Race/Ethnicity															
	Hispanic or Latino		Not Hispanic or Latino													Row Total
			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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	2	0	2	0	0	0	0	0	1	0	0	0	1	0	6	
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	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	2	0	3	0	0	0	0	0	1	0	0	0	1	0	7	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	2	0	3	1	0	0	0	0	1	0	0	0	1	0	8	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31454			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bristol TN												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 107 Deck Valley Rd						CITY/TOWN BRISTOL				STATE TN		ZIP CODE 37620			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	8	0	0	0	0	0	0	0	0	0	0	0	8
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	12	0	0	0	0	0	4	0	0	0	0	0	16
PRIOR 2022 REPORTING YEAR TOTAL	0	0	10	0	0	0	0	0	4	0	0	0	0	0	14
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16281			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Springfield VA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5255 A Port Royal						CITY/TOWN SPRINGFIELD				STATE VA		ZIP CODE 22151			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	2	0	1	0	0	0	2	0	0	0	0	0	6
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 2023 REPORTING YEAR TOTAL	1	0	2	0	1	0	0	0	2	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31721				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Appleton WI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5050 N Wren Drive								CITY/TOWN APPLETON				STATE WI		ZIP CODE 54913	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	9	2	0	0	0	0	1	0	0	0	0	0	12
Laborers and Helpers	0	0	2	0	1	0	0	0	0	0	0	0	0	1	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	17	2	1	0	0	0	2	0	0	0	0	1	23
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	17	2	1	0	0	0	2	0	0	0	0	1	23
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31061				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Manhattan KS											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 809 Levee Drive, Suite C								CITY/TOWN MANHATTAN				STATE KS		ZIP CODE 66502	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31905			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Newburgh NY												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 24 Jeanne Drive						CITY/TOWN NEWBURGH			STATE NY		ZIP CODE 12550				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	2	0	1	0	0	0	0	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	1	5	2	0	0	0	1	1	0	0	0	0	1	15
Laborers and Helpers	1	0	0	1	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	6	1	10	3	1	0	0	1	1	0	0	0	0	1	24
PRIOR 2022 REPORTING YEAR TOTAL	6	0	10	2	0	0	0	0	0	0	0	0	0	1	19
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30877			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Daytona FL - Self Service												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3157 W Intl Speedway Blvd						CITY/TOWN DAYTONA BEACH				STATE FL		ZIP CODE 32124			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Administrative Support Workers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	8	0	2	0	0	0	0	1	0	0	0	0	0	0	11
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>8</b>	<b>0</b>	<b>10</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>22</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>6</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>13</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30814				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Orlando FL - Self Service											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 9205 E Colonial Dr								CITY/TOWN ORLANDO				STATE FL		ZIP CODE 32817	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	1	1	0	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	1	1	0	0	0	0	0	0	0	0	0	0	0	5
Administrative Support Workers	0	2	0	0	0	0	0	0	1	0	0	0	0	0	3
Craft Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	5	1	2	0	0	0	0	0	0	0	0	0	0	0	8
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	11	5	4	0	0	0	0	0	1	0	0	0	0	0	21
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	6	0	1	0	0	0	0	0	0	0	0	0	0	0	7
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC21641				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Akron OH - Triplett											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1435 Triplett Blvd								CITY/TOWN AKRON				STATE OH		ZIP CODE 44306	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
First/Mid-Level Officials and Managers	1	0	18	0	1	0	0	0	5	0	0	0	0	0	25
Professionals	0	0	6	0	0	0	0	0	4	0	0	0	0	0	10
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	25	1	0	0	0	1	10	2	0	0	0	0	39
Administrative Support Workers	0	0	5	0	0	0	0	0	19	1	0	0	0	0	25
Craft Workers	0	0	22	1	0	0	0	1	1	0	0	0	0	0	25
Operatives	1	0	33	17	0	0	0	3	4	0	0	0	0	0	58
Laborers and Helpers	0	0	3	6	0	0	0	0	3	0	0	0	0	0	12
Service Workers	0	0	3	2	1	0	0	0	7	3	0	0	0	2	18
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	2	0	115	27	2	0	0	5	55	6	0	0	0	2	214
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	3	0	77	11	0	0	0	3	18	3	0	0	0	0	115
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP35575			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chesapeake VA - Norfolk												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5409 West Military Hwy								CITY/TOWN CHESAPEAKE			STATE VA		ZIP CODE 23321		
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	2	0	0	0	0	0	0	1	1	0	0	7
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
Operatives	0	0	11	7	0	0	0	1	0	0	0	0	0	0	19
Laborers and Helpers	0	0	2	2	0	0	0	0	0	1	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	19	12	0	0	0	1	1	2	1	0	0	0	36
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	16	12	0	0	0	1	2	0	1	0	0	0	32
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30996			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Kansas City KS												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 555 Riverpark Drive						CITY/TOWN KANSAS CITY				STATE KS		ZIP CODE 66105			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	6	2	14	4	0	0	0	3	1	0	0	0	0	0	30
Administrative Support Workers	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	4	2	0	0	0	0	1	0	0	0	0	0	10
Laborers and Helpers	2	0	3	2	23	1	0	0	2	0	0	0	0	0	33
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	12	2	26	8	23	1	0	3	4	1	0	0	0	0	80
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	8	3	30	8	21	0	0	4	4	0	0	0	0	1	79
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16923				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Quincy IL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1028 Jersey								CITY/TOWN QUINCY				STATE IL		ZIP CODE 62301	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16983			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Phoenix AZ												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3033 N 35th Avenue, #A-2						CITY/TOWN PHOENIX				STATE AZ		ZIP CODE 85017			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	0	3	1	0	0	0	0	0	0	0	0	0	0	8
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 2023 REPORTING YEAR TOTAL	4	0	3	1	0	0	0	0	0	0	0	0	0	0	8
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31380				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Cincinnati OH											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11950 Mosteller Rd								CITY/TOWN CINCINNATI				STATE OH		ZIP CODE 45241	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	6	2	0	0	1	0	3	0	0	0	0	0	12
Laborers and Helpers	0	0	5	1	0	0	0	0	0	0	0	0	0	0	6
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	18	3	0	0	1	0	5	0	0	0	0	0	27
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	17	6	0	0	0	0	2	0	0	0	0	0	25
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EK02691			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Savannah GA - Self Service												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1321 Highway 80 West						CITY/TOWN SAVANNAH				STATE GA		ZIP CODE 31408			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	2	0	0	0	1	0	2	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	0	2	0	0	0	0	2
Craft Workers	0	0	2	3	0	0	0	1	0	0	0	0	0	0	6
Operatives	0	0	3	2	0	0	0	0	1	0	0	0	0	0	6
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	7	7	0	0	0	2	1	4	0	0	0	0	21
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	3	4	0	0	0	0	2	1	0	0	0	0	10
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP14334				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Valley View OH - Heatex											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 16485 Rockside Road								CITY/TOWN MAPLE HEIGHTS				STATE OH		ZIP CODE 44137	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	7	4	0	0	0	0	1	0	0	0	0	0	12
Laborers and Helpers	4	1	6	0	0	0	0	0	0	0	0	0	0	0	11
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	1	20	4	0	0	0	0	1	0	0	0	0	0	30
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	2	1	15	9	0	0	0	2	0	0	0	0	0	0	29
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16083				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Indianapolis IN											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2726 Rand Road								CITY/TOWN INDIANAPOLIS				STATE IN		ZIP CODE 46241	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	5	1	0	0	0	0	0	1	0	0	0	0	7
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	5	1	0	0	0	0	0	1	0	0	0	0	7
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17401				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME ADP Default - Chicago IL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 500 W Madison St Ste 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16224				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Gaithersburg MD												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 7909 G Cessna Ave								CITY/TOWN GAITHERSBURG				STATE MD		ZIP CODE 20879		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	3	1	2	0	0	0	0	0	0	0	0	0	0	6	
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 2023 REPORTING YEAR TOTAL	0	3	1	2	0	0	0	0	0	0	0	0	0	0	6	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16565				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fort Walton Beach FL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 826-A Denton Blvd								CITY/TOWN FORT WALTON BEACH				STATE FL		ZIP CODE 32547	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17038			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Las Vegas NV													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4129 West Desert Inn Road						CITY/TOWN LAS VEGAS				STATE NV		ZIP CODE 89102				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY																
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)																
Unique Entity ID (UEI): Not Applicable																
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)																
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)																
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	2	0	2	0	0	0	0	0	0	0	0	0	0	0	4	
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 2023 REPORTING YEAR TOTAL	2	0	2	0	0	0	0	0	0	0	0	0	0	0	4	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30125			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Albert Lea MN												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 21647 785th Avenue						CITY/TOWN ALBERT LEA				STATE MN		ZIP CODE 56007			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	1	0	0	0	0	0	0	0	5
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	5	0	1	0	0	0	0	0	0	0	0	0	6
Operatives	1	0	6	0	0	0	1	0	1	0	0	0	0	0	9
Laborers and Helpers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	20	0	1	0	2	0	1	0	0	0	0	0	25
PRIOR 2022 REPORTING YEAR TOTAL	1	0	17	0	1	0	1	0	1	0	0	0	0	0	21
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31032				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Lubbock TX											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1411 South Loop 289								CITY/TOWN LUBBOCK				STATE TX		ZIP CODE 79423	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	4	1	4	2	0	0	0	1	1	0	0	0	1	0	14
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	6	2	0	0	0	1	1	0	0	0	0	0	13
Laborers and Helpers	3	0	1	2	0	0	0	1	0	0	0	0	0	0	7
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	10	1	16	6	0	0	0	3	3	0	0	0	1	0	40
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	10	1	15	3	0	0	0	4	2	0	0	0	1	0	36
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EA15770				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Kearny NJ											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 40 Western Rd.								CITY/TOWN KEARNY				STATE NJ		ZIP CODE 07032	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	1	3	1	0	0	0	0	1	0	0	0	0	0	1
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	0	5	0	1	0	0	0	0	0	0	0	0	0	8
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	1	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	10	0	6	2	0	0	0	0	1	0	0	0	0	0	19
Laborers and Helpers	14	1	0	6	0	0	0	0	1	0	0	0	0	0	22
Service Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>29</b>	<b>3</b>	<b>14</b>	<b>9</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>61</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>23</b>	<b>2</b>	<b>9</b>	<b>7</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>47</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID JB60392			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Eau Claire WI - Smart Parts													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 125-C North Clairmont Avenue						CITY/TOWN EAU CLAIRE				STATE WI		ZIP CODE 54703				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4	
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 2023 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30936			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Allentown PA-KAO AA Bethlehem												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2301 Union Blvd						CITY/TOWN ALLENTOWN				STATE PA		ZIP CODE 18103			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
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 2023 REPORTING YEAR TOTAL	2	0	3	0	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	3	0	2	0	0	0	0	0	0	0	0	0	0	0	5
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16433			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Savannah GA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3620 Ogeechee Road						CITY/TOWN SAVANNAH				STATE GA		ZIP CODE 31405				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4	
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17381				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Lubbock TX - Earl Owens											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 509 East 42nd Street								CITY/TOWN LUBBOCK				STATE TX		ZIP CODE 79404	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	2	1	0	0	0	0	0	0	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	2	0	2	1	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID X245708			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Atlanta GA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1700 Westgate Parkway Sw						CITY/TOWN ATLANTA				STATE GA		ZIP CODE 30336			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	1	0	4	3	0	0	0	1	3	2	0	0	0	0	14
Professionals	1	0	1	0	0	0	0	0	3	0	0	0	0	0	5
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	1	9	2	0	0	0	1	1	1	0	0	0	1	18
Administrative Support Workers	0	3	1	1	0	0	0	1	8	6	0	0	0	1	21
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	5	22	1	0	1	2	1	5	0	0	0	2	40
Laborers and Helpers	11	3	4	40	0	0	0	7	1	5	2	0	0	1	74
Service Workers	0	0	1	0	0	0	0	0	4	1	0	0	0	0	6
CURRENT 2023 REPORTING YEAR TOTAL	16	7	26	68	1	0	1	12	21	20	2	0	0	5	179
PRIOR 2022 REPORTING YEAR TOTAL	9	0	25	42	0	0	1	5	9	6	1	0	1	3	102
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30841				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tulsa OK - Self Service											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3112 N Peoria								CITY/TOWN TULSA				STATE OK		ZIP CODE 74106	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	1	1	1	0	0	0	0	0	0	0	0	1	0	6
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	2	0	8	0	0	0	0	2	0	0	0	0	0	0	12
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	6	1	11	1	0	0	0	2	0	0	0	0	1	0	22
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	4	2	4	1	0	0	0	2	0	0	0	0	1	0	14
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66351			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Amarillo TX												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3931 Canyon Dr						CITY/TOWN AMARILLO				STATE TX		ZIP CODE 79110			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	1	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	1	1	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	2	2	0	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	0	1	0	0	0	0	3
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
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<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV23801				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Randolph MA - Kwik-PBE											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 128 York Ave								CITY/TOWN RANDOLPH				STATE MA		ZIP CODE 02368	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	2	0	0	0	0	3	0	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Laborers and Helpers	1	0	1	1	0	0	0	2	0	0	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>9</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>18</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>10</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>15</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV91002				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME El Paso TX - Ace											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 13300 Montana Avenue								CITY/TOWN EL PASO				STATE TX		ZIP CODE 79938	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	4	1	0	0	0	0	0	0	0	0	0	0	0	0	5
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	12	0	2	0	0	0	0	0	0	0	0	0	0	0	14
Operatives	19	0	0	0	0	0	0	2	0	0	0	0	0	0	21
Laborers and Helpers	11	0	1	0	0	0	0	0	0	0	0	0	0	0	12
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	48	2	4	0	0	0	0	2	0	0	0	0	0	0	56
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	34	1	4	1	0	0	0	2	0	0	0	0	0	0	42
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16510			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Durham NC													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2415 Presidential Drive, Suite 113						CITY/TOWN DURHAM				STATE NC		ZIP CODE 27703				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY																
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)																
Unique Entity ID (UEI): Not Applicable																
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)																
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)																
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	4	2	0	0	0	0	0	0	0	0	0	0	6	
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 2023 REPORTING YEAR TOTAL	0	0	4	2	0	0	0	0	0	0	0	0	0	0	6	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31813				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Traverse City MI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 327 E Welch Court								CITY/TOWN TRAVERSE CITY				STATE MI		ZIP CODE 49686	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b>															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
Laborers and Helpers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	11	0	0	0	0	0	0	0	0	0	0	0	11
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	9	0	0	0	0	0	0	0	0	0	0	0	9
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JB60471				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Colonial Heights VA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1984 Ruffin Mill Rd								CITY/TOWN COLONIAL HEIGHTS				STATE VA		ZIP CODE 23834	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	3	1	0	0	0	0	0	0	0	0	0	5
Laborers and Helpers	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	4	4	1	0	0	0	0	0	0	0	0	0	9
PRIOR 2022 REPORTING YEAR TOTAL	0	0	2	6	0	0	0	0	0	0	0	0	0	0	8
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16455			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Columbia SC												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 220 O'Neil Court						CITY/TOWN COLUMBIA				STATE SC		ZIP CODE 29223			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	1	0	0	0	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	1	0	0	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID X245652			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fontana CA - Keystone												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 15895 Valley Blvd, Suite 100						CITY/TOWN FONTANA				STATE CA		ZIP CODE 92335			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	1	1	0	0	0	1	1	0	0	0	0	0	1	7
Professionals	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	4	1	1	0	0	0	1	1	0	0	0	0	0	11
Administrative Support Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	17	0	0	1	0	0	0	1	0	0	0	0	0	0	19
Laborers and Helpers	12	2	4	0	0	2	0	1	0	0	0	0	0	0	21
Service Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
CURRENT 2023 REPORTING YEAR TOTAL	35	7	6	2	0	2	1	4	3	0	0	0	0	1	61
PRIOR 2022 REPORTING YEAR TOTAL	27	4	4	3	1	2	1	4	3	0	0	0	0	1	50
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID PA92663			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Deerfield Beach FL - KAO Logistics												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1901 Green Road						CITY/TOWN DEERFIELD BEACH				STATE FL		ZIP CODE 33064			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	1	0	0	0	0	0	1	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	1	5	0	0	0	1	0	0	0	0	0	0	8
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 2023 REPORTING YEAR TOTAL	2	0	3	5	0	0	0	2	1	0	0	0	0	0	13
PRIOR 2022 REPORTING YEAR TOTAL	1	0	2	5	0	0	0	1	0	0	0	0	0	1	10
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16334				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fall River MA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 196 Bedford St								CITY/TOWN FALL RIVER				STATE MA		ZIP CODE 02720	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	6	0	0	1	0	0	0	0	0	0	0	0	7
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 2023 REPORTING YEAR TOTAL	0	0	6	0	0	1	0	0	0	0	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB29950				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Pineville LA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2016 Industrial Park Site Road								CITY/TOWN ALEXANDRIA				STATE LA		ZIP CODE 71303	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	9	0	0	0	1	0	1	0	0	0	1	0	12
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	0	0	4	1	0	0	0	0	1	0	0	0	0	0	6
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	17	1	0	0	1	0	3	0	0	0	1	0	23
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	16	2	0	0	1	0	2	0	0	0	1	0	22
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID DP29548				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Columbus OH											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5830 A Green Pointe Drive S, Ste A								CITY/TOWN GROVEPORT				STATE OH		ZIP CODE 43125	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	6	0	0	0	0	0	2	0	0	0	0	0	8
Professionals	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	7	0	0	0	0	1	6	0	1	0	0	0	15
Administrative Support Workers	0	0	0	0	0	0	0	0	3	0	0	0	0	0	3
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	23	6	0	0	0	0	0	0	0	0	0	0	29
Laborers and Helpers	0	1	22	8	1	1	0	2	2	2	0	0	0	0	39
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	1	59	14	1	1	0	3	14	2	1	0	0	0	96
PRIOR 2022 REPORTING YEAR TOTAL	1	0	49	9	0	0	1	3	12	1	1	0	0	0	77
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC21201			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Hustisford WI - Smart Parts												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS N4079 Highway E						CITY/TOWN HUSTISFORD				STATE WI		ZIP CODE 53034			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	3	0	0	0	0	0	8
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	6	0	0	0	0	0	2	0	0	0	2	0	10
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	13	0	0	0	0	0	0	0	0	0	0	0	13
Operatives	0	0	4	0	0	0	0	0	3	0	0	0	0	0	7
Laborers and Helpers	0	0	3	0	0	0	0	0	0	0	0	0	0	1	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	31	0	0	0	0	0	9	0	0	0	2	1	43
PRIOR 2022 REPORTING YEAR TOTAL	0	0	23	0	0	0	0	0	8	0	0	0	1	0	32
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID HF15123			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Exeter PA - KAO Warehouse													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 68 Slocum Ave						CITY/TOWN EXETER				STATE PA		ZIP CODE 18643				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
First/Mid-Level Officials and Managers	0	0	7	0	0	0	0	0	1	0	0	0	0	0	8	
Professionals	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6	
Laborers and Helpers	4	1	61	5	0	1	0	2	25	0	0	0	0	1	100	
Service Workers	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	1	79	5	0	1	0	2	31	0	0	0	0	1	124	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	12	0	0	0	0	1	2	0	0	0	0	0	15	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																
4																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66342			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bridgeport CT - APO													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 160 Holland Ave						CITY/TOWN BRIDGEPORT				STATE CT		ZIP CODE 06605				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Laborers and Helpers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
CURRENT 2023 REPORTING YEAR TOTAL	3	0	1	0	0	0	0	0	1	0	0	0	0	0	5	
PRIOR 2022 REPORTING YEAR TOTAL	2	0	1	0	0	0	0	0	1	0	0	0	0	0	4	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB29923				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Colchester VT											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 156 Acorn Lane, Suite 104								CITY/TOWN COLCHESTER				STATE VT		ZIP CODE 05446	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	9	0	0	0	0	0	0	0	0	0	0	0	9
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66063			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Scranton PA - KAO A&A												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1015 S. Washington Ave						CITY/TOWN SCRANTON				STATE PA		ZIP CODE 18505			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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 2023 REPORTING YEAR TOTAL	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID BD23832				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Portland OR -Foster Auto Part											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 10355 Se Foster Road								CITY/TOWN PORTLAND				STATE OR		ZIP CODE 97266	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	1	1	0	0	0	0	0	0	7
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	5	0	0	0	0	0	0	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	2	0	5	0	0	1	0	0	0	0	0	0	0	0	8
Operatives	2	0	7	0	0	0	0	0	0	0	0	0	0	0	9
Laborers and Helpers	1	0	0	3	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>6</b>	<b>0</b>	<b>22</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>34</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>6</b>	<b>0</b>	<b>14</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>26</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV28674				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Peachtree Corners GA - Parts											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2924-A Amwiler Road								CITY/TOWN PEACHTREE CORNERS				STATE GA		ZIP CODE 30360	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	3	0	2	0	0	0	0	0	0	0	0	0	0	0	5
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	3	0	3	0	0	0	0	0	0	0	0	0	0	0	6
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP39777				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Newark OH											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 13769 Marne Rd								CITY/TOWN NEWARK				STATE OH		ZIP CODE 43055	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
Operatives	0	0	11	0	0	0	0	1	0	0	0	0	0	0	12
Laborers and Helpers	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	20	1	0	0	0	1	2	0	0	0	0	0	24
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	14	0	0	0	0	1	0	0	0	0	0	0	15
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17357				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Clackamas OR - Coast											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 12472 SE Capps Rd								CITY/TOWN CLACKAMAS				STATE OR		ZIP CODE 97015	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66600				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Belleville MI - Surplus Parts											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 13000 Haggerty Road								CITY/TOWN BELLEVILLE				STATE MI		ZIP CODE 48111	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16501				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Greensboro NC											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 305 Concord St								CITY/TOWN GREENSBORO				STATE NC		ZIP CODE 27406	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	0	0	0	0	0	2	0	0	0	0	0	5
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	3	0	0	0	0	0	2	0	0	0	0	0	5
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16171			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fraser MI													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 33735 Groesbeck Hwy						CITY/TOWN FRASER				STATE MI		ZIP CODE 48026				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5	
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 2023 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EK03010				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Buckley WA - FosterAuto Parts											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 28520 Hwy 410 East								CITY/TOWN BUCKLEY				STATE WA		ZIP CODE 98321	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	1	0	7	0	1	0	0	0	0	0	0	0	0	0	9
Operatives	0	0	5	1	0	0	0	0	0	0	0	0	0	0	6
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	14	1	1	0	0	0	2	0	0	0	0	0	19
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	9	0	1	0	0	0	3	0	0	0	0	0	13
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30161			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Gardiner ME												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 644 River Avenue						CITY/TOWN GARDINER				STATE ME		ZIP CODE 04345			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Laborers and Helpers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	11	0	0	0	0	0	0	0	0	0	0	0	11
PRIOR 2022 REPORTING YEAR TOTAL	0	0	12	0	0	0	0	0	0	0	0	0	0	0	12
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31611			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tulsa OK												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 874 N 165Th East Ave, Suite B						CITY/TOWN TULSA				STATE OK		ZIP CODE 74116			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	2	0	0	0	1	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	0	7	1	0	0	2	0	2	0	0	0	0	0	15
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	4	1	1	0	1	0	0	0	0	0	0	0	8
Laborers and Helpers	0	0	3	0	0	0	1	1	0	0	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	5	0	17	2	1	0	5	1	3	0	0	0	0	0	34
PRIOR 2022 REPORTING YEAR TOTAL	4	0	14	1	0	0	5	1	3	0	0	0	0	0	28
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30318				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bensenville IL - Depot											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 300 Beeline Dr								CITY/TOWN BENSENVILLE			STATE IL		ZIP CODE 60106		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	6	0	1	1	0	0	0	1	0	0	0	0	0	0	9
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 2023 REPORTING YEAR TOTAL	6	0	1	1	0	0	0	1	0	0	0	0	0	0	9
PRIOR 2022 REPORTING YEAR TOTAL	5	0	2	1	0	0	0	1	1	0	0	0	0	0	10
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16202			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Springfield MI												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2980 6th Ave						CITY/TOWN SPRINGFIELD				STATE MI		ZIP CODE 49037			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66162			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Exeter PA - KAO A&A												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1575 Wyoming Ave						CITY/TOWN EXETER				STATE PA		ZIP CODE 18643			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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 2023 REPORTING YEAR TOTAL	0	0	8	0	0	0	0	0	0	0	0	0	0	0	8
PRIOR 2022 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17434			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Carrollton TX - Earl Owens												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1215 Crowley Drive						CITY/TOWN CARROLLTON				STATE TX		ZIP CODE 75006			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	0	3	5	0	0	0	0	0	1	0	0	0	0	0	9
Professionals	1	0	2	0	1	0	0	0	0	0	0	0	0	0	4
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	10	0	2	0	0	0	0	0	1	1	0	0	0	0	14
Administrative Support Workers	0	4	2	0	1	0	0	0	1	2	0	0	0	0	10
Craft Workers	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
Operatives	8	0	5	16	0	0	0	0	1	3	0	0	0	1	34
Laborers and Helpers	18	1	0	7	16	0	0	0	1	1	0	0	0	0	44
Service Workers	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2
CURRENT 2023 REPORTING YEAR TOTAL	39	10	18	23	18	0	0	0	5	7	0	0	0	1	121
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
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SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30502			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chicago IL - ARSCO												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 16801 Exchange Avenue Suite 1						CITY/TOWN LANSING				STATE IL		ZIP CODE 60438			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	9	1	0	0	0	0	1	0	0	0	0	0	11
PRIOR 2022 REPORTING YEAR TOTAL	0	0	8	1	0	0	0	0	1	0	0	0	0	0	10
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16741			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Denver CO - APO												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1355 W 52nd Avenue						CITY/TOWN DEVNER				STATE CO		ZIP CODE 80221			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16182				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Ferndale MI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 836 Livornois								CITY/TOWN FERNDALE				STATE MI		ZIP CODE 48220	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC21287				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Webster MA - Rt 16 AutoParts											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4 Old Douglas Road								CITY/TOWN WEBSTER				STATE MA		ZIP CODE 01570	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	8	0	0	0	0	0	0	0	0	0	0	0	8
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	1	0	9	0	0	0	1	0	0	0	0	0	0	0	11
Operatives	1	0	4	0	0	0	0	0	0	0	0	0	0	0	5
Laborers and Helpers	1	0	5	0	0	0	0	0	0	0	0	0	0	0	6
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>3</b>	<b>0</b>	<b>27</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>32</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>0</b>	<b>0</b>	<b>19</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>22</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID ET09026			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Grand Prairie TX - ATK												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1102 W N Carrier Parkway, SUITE 100						CITY/TOWN GRAND PRAIRIE				STATE TX		ZIP CODE 75050			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 336390 - Other Motor Vehicle Parts Manufacturing															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
First/Mid-Level Officials and Managers	12	1	10	1	1	0	0	0	2	0	1	0	0	0	28
Professionals	2	1	6	1	0	0	0	0	2	1	0	0	0	0	13
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	7	0	5	0	0	0	0	0	0	0	0	0	0	0	12
Administrative Support Workers	4	6	9	0	0	0	0	1	3	2	0	0	0	1	26
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	19	4	7	3	0	0	1	3	0	0	0	0	0	0	37
Laborers and Helpers	5	2	1	1	1	0	0	0	0	1	0	0	0	0	11
Service Workers	1	5	1	0	0	0	0	1	2	2	1	0	0	3	16
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	50	19	42	6	2	0	1	5	10	6	2	0	0	4	147
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	20	15	24	0	2	0	0	2	3	4	0	0	0	2	72
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)  <div style="border: 1px solid black; height: 150px; margin-top: 10px;"></div>															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17137			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chico CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 31 Wrex Ct						CITY/TOWN CHICO				STATE CA		ZIP CODE 95928			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30116			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Denver CO - Mid America												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1355 W 52nd Ave						CITY/TOWN DENVER				STATE CO		ZIP CODE 80221			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	1	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	1	2	0	0	0	0	0	1	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	4	1	12	0	0	0	0	0	0	0	0	0	0	0	17
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31216				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME St. Louis MO											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1601 Tradeport Dr, Suite 100								CITY/TOWN HAZELWOOD				STATE MO		ZIP CODE 63042	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	5	1	0	0	0	0	4	0	0	0	0	1	12
Administrative Support Workers	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	20	8	0	0	0	0	0	0	0	0	0	0	29
Laborers and Helpers	1	0	1	6	0	0	0	1	0	0	0	0	0	0	9
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>2</b>	<b>30</b>	<b>15</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>56</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>2</b>	<b>28</b>	<b>13</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>49</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC21843			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bronx NY - Hunts Point												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1390 Spofford Avenue						CITY/TOWN BRONX				STATE NY		ZIP CODE 10474			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	6	1	0	0	0	0	0	0	0	1	0	0	0	0	8
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	1	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	11	1	0	5	0	0	1	0	0	0	0	0	0	0	18
Laborers and Helpers	10	0	0	0	0	0	0	0	0	0	0	0	0	0	10
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>30</b>	<b>3</b>	<b>0</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>41</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>29</b>	<b>2</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>38</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66151				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Greensburg PA - KAO Logistics											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1513 Woodward Dr Extension								CITY/TOWN GREENSBURG				STATE PA		ZIP CODE 15601	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	17	0	0	0	0	0	1	0	0	0	0	0	18
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	19	0	0	0	0	0	1	0	0	0	0	0	20
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	17	0	0	0	0	1	2	0	0	0	0	0	20
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16763			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME West Palm Beach FL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1938 Church Street						CITY/TOWN WEST PALM BEACH				STATE FL		ZIP CODE 33409			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	1	0	0	0	0	0	0	1	1	0	0	0	0	5
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	2	1	0	0	0	0	0	0	1	1	0	0	0	0	5
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31072			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Wichita KS												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3002 W Pawnee, Suite 100						CITY/TOWN WICHITA				STATE KS		ZIP CODE 67213			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	9	1	0	0	0	2	1	0	0	0	0	0	14
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Laborers and Helpers	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	13	1	0	0	0	2	3	0	0	0	0	0	21
PRIOR 2022 REPORTING YEAR TOTAL	1	0	17	0	0	0	0	2	1	0	0	0	0	0	21
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16774			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fort Myers FL													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3919 Fowler St						CITY/TOWN FORT MYERS				STATE FL		ZIP CODE 33901				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY																
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)																
Unique Entity ID (UEI): Not Applicable																
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)																
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)																
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4	
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 2023 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID FC93734			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Orlando FL - Universal													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4171 L B Mcleod Road						CITY/TOWN ORLANDO				STATE FL		ZIP CODE 32811				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2	
Operatives	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
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 2023 REPORTING YEAR TOTAL	2	0	3	0	0	0	0	0	0	0	0	0	0	0	5	
PRIOR 2022 REPORTING YEAR TOTAL	1	1	2	0	0	0	0	0	0	0	0	0	0	0	4	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31490			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Orlando FL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1010 Grand Street						CITY/TOWN ORLANDO				STATE FL		ZIP CODE 32805			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	1	1	1	0	0	0	0	1	0	0	0	0	0	6
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	4	0	2	0	0	0	0	0	0	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	17	0	7	8	1	0	0	0	0	1	0	0	0	0	34
Laborers and Helpers	3	0	1	1	0	0	0	1	0	0	0	0	0	0	6
Service Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
CURRENT 2023 REPORTING YEAR TOTAL	27	1	12	10	1	0	0	1	1	1	0	0	0	0	54
PRIOR 2022 REPORTING YEAR TOTAL	24	0	13	10	1	0	0	0	2	1	0	0	0	0	51
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EV28841			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Merced CA - AutoFinishesDepot													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 195-A South Highway 59						CITY/TOWN MERCED				STATE CA		ZIP CODE 95341				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
JOB CATEGORIES	Race/Ethnicity															
	Hispanic or Latino		Not Hispanic or Latino													Row Total
			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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	1	0	0	0	1	0	0	0	0	0	0	0	0	0	2	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	
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	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	1	0	0	1	0	0	0	0	0	0	0	0	0	3	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP38677			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Houston TX - SS Houston SW												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 12575 Hiram Clarke Rd						CITY/TOWN HOUSTON				STATE TX		ZIP CODE 77045			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	4	2	0	1	0	0	0	0	0	0	0	0	0	0	7
Administrative Support Workers	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	0	1	0	2	0	0	0	0	0	0	0	0	0	0	3
Operatives	4	2	0	5	0	0	0	0	0	0	0	0	0	0	11
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 2023 REPORTING YEAR TOTAL	10	7	1	8	0	0	0	0	0	0	0	0	0	0	26
PRIOR 2022 REPORTING YEAR TOTAL	6	5	1	8	0	0	0	0	0	0	0	0	0	0	20
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17282			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Oxnard CA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 501 N Elevar St						CITY/TOWN OXNARD				STATE CA		ZIP CODE 93030				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY																
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)																
Unique Entity ID (UEI): Not Applicable																
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)																
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)																
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	4	0	0	0	0	0	0	0	0	0	0	0	0	0	4	
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 2023 REPORTING YEAR TOTAL	4	0	0	0	0	0	0	0	0	0	0	0	0	0	4	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31436			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Monroe LA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4950 Central Ave						CITY/TOWN MONROE				STATE LA		ZIP CODE 71203			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	6	1	0	0	0	0	2	0	0	0	0	0	9
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	5	2	0	0	0	1	0	0	0	0	0	0	8
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	13	3	0	0	0	1	2	0	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	0	0	13	3	0	0	0	1	2	0	0	0	0	0	19
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FC87361			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Davie FL - SS												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4301 S State Rd 7						CITY/TOWN DAVIE				STATE FL		ZIP CODE 33314			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	1	1	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	1	0	0	0	0	0	0	0	0	0	1	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	5	1	0	2	0	0	0	0	0	0	0	0	0	0	8
Administrative Support Workers	2	0	0	1	0	0	0	0	2	0	0	0	0	0	5
Craft Workers	2	0	0	3	0	1	0	0	0	0	0	0	0	0	6
Operatives	3	2	0	13	0	0	0	1	0	0	0	0	0	0	19
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	15	4	1	19	0	1	0	1	2	1	0	0	0	0	44
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	7	2	0	14	0	0	0	1	0	1	0	0	0	0	25
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA31181				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Salt Lake City UT - KAO Logis											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS Freeport Center Bldg. E-16								CITY/TOWN CLEARFIELD				STATE UT		ZIP CODE 84016	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	6	1	0	0	0	1	3	0	0	0	0	0	11
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 2023 REPORTING YEAR TOTAL	0	0	8	1	0	0	0	1	3	0	0	0	0	0	13
PRIOR 2022 REPORTING YEAR TOTAL	0	0	11	0	0	0	0	0	3	0	0	0	0	0	14
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31712				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Dubuque IA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2400 Kerper Blvd, Suite 100A								CITY/TOWN DUBUQUE			STATE IA		ZIP CODE 52001		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
Laborers and Helpers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	16	0	0	0	0	1	1	0	0	0	0	0	18
PRIOR 2022 REPORTING YEAR TOTAL	0	0	17	0	0	0	0	1	1	0	0	0	0	0	19
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP38886			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Milwaukee WI -SS AutoParts												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6102 South 13Th Street						CITY/TOWN MILWAUKEE				STATE WI		ZIP CODE 53221			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	1	0	0	0	0	1	1	0	0	0	0	4
Administrative Support Workers	0	0	1	0	0	0	0	0	0	1	0	0	0	0	2
Craft Workers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	5	0	2	1	0	0	1	0	0	0	0	0	0	0	9
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 2023 REPORTING YEAR TOTAL	8	0	4	2	0	0	1	0	1	3	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	3	0	2	1	0	0	0	0	1	3	0	0	0	0	10
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31620				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Lexington KY											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2040 Creative Drive, Suite 250								CITY/TOWN LEXINGTON				STATE KY		ZIP CODE 40505	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	9	2	0	0	0	0	0	0	0	0	0	0	11
Laborers and Helpers	0	0	8	0	0	0	0	0	1	0	0	0	0	0	9
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	21	2	0	0	0	0	4	0	0	0	0	0	27
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	20	2	0	0	0	0	4	0	0	0	0	0	26
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17062			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bellflower CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 9162 E Rosecrans						CITY/TOWN BELLFLOWER				STATE CA		ZIP CODE 90706			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	5	0	0	0	0	0	0	0	0	0	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	5	0	0	0	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16840				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fridley MN											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 104 Osborne Road								CITY/TOWN FRIDLEY				STATE MN		ZIP CODE 55432	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	9	1	0	0	0	0	0	2	0	0	0	0	12
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 2023 REPORTING YEAR TOTAL	0	0	9	1	0	0	0	0	0	2	0	0	0	0	12
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66085				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Selinsgrove PA-KAO AA Hummels											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2075 N Susquehanna Trl								CITY/TOWN SELINSGROVE				STATE PA		ZIP CODE 17870	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID X828045			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Taunton MA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 250 John Hancock Road						CITY/TOWN TAUNTON				STATE MA		ZIP CODE 02780				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	1	0	5	0	0	0	0	0	1	0	0	0	0	0	0	7
Professionals	0	0	2	0	0	0	0	0	3	0	0	0	0	0	0	5
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	1	0	0	0	0	0	9	0	0	0	0	0	0	11
Administrative Support Workers	0	0	0	0	0	0	0	0	10	0	0	0	0	0	1	11
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	10	2	0	0	0	3	1	0	0	0	0	0	0	19
Laborers and Helpers	0	0	10	2	0	1	0	2	0	0	0	0	0	0	0	15
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	5	0	29	4	0	1	0	5	24	0	0	0	0	1	69	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	7	1	25	10	0	1	0	4	23	0	0	0	0	1	72	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)  4																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56816			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Abilene TX												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 933 South Treadaway Blvd						CITY/TOWN ABILENE				STATE TX		ZIP CODE 79602			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
PRIOR 2022 REPORTING YEAR TOTAL	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16270			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fredericksburg VA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 24 Enterprise Ct103						CITY/TOWN FREDERICKSBURG				STATE VA		ZIP CODE 22405				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4	
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 2023 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GN78680			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Elkhart IN - Coast R&D												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 524 Pine Creek Court						CITY/TOWN ELKHART				STATE IN		ZIP CODE 46516			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
Professionals	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	1	0	0	0	0	0	1
CURRENT 2023 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	4	0	0	0	0	0	9
PRIOR 2022 REPORTING YEAR TOTAL	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66481				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fairless Hills PA - Knopf											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 199 Canal Road, Suite 100								CITY/TOWN FAIRLESS HILLS				STATE PA		ZIP CODE 19030	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	3	0	0	0	0	1	0	0	0	0	0	0	5
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	1	0	2	0	0	0	0	1	0	0	0	0	0	0	4
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP15005			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Huntington IN - IDC												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1870 Riverfork Drive W						CITY/TOWN HUNTINGTON				STATE IN		ZIP CODE 46750			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 339999 - All Other Miscellaneous 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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	3	0	0	0	0	0	8
Professionals	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	7	0	0	0	0	0	1	0	0	0	0	0	8
Laborers and Helpers	0	0	24	0	0	0	0	1	7	0	0	0	0	0	32
Service Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
CURRENT 2023 REPORTING YEAR TOTAL	0	0	40	0	0	0	0	1	14	0	0	0	0	0	55
PRIOR 2022 REPORTING YEAR TOTAL	0	0	8	0	0	0	0	1	3	0	0	0	0	0	12
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EW12625			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Marshfield MO												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 430 East Jackson Street						CITY/TOWN MARSHFIELD				STATE MO		ZIP CODE 65706			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
Professionals	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	1	0	8	0	0	0	0	0	3	0	0	0	0	0	12
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	13	0	0	0	0	0	8	0	0	0	0	0	22
PRIOR 2022 REPORTING YEAR TOTAL	0	0	9	0	0	0	0	0	5	0	0	0	0	0	14
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EJ94266			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Huntington IN - Distro Whse												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3000 Yeoman Way						CITY/TOWN HUNTINGTON				STATE IN		ZIP CODE 46750			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	4	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB29914			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Columbia SC												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 112 N Montague Drive						CITY/TOWN COLUMBIA				STATE SC		ZIP CODE 29203			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	1	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	9	5	0	0	0	0	0	0	0	0	0	0	14
Laborers and Helpers	0	0	0	3	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	14	9	0	0	0	0	1	0	0	0	0	0	24
PRIOR 2022 REPORTING YEAR TOTAL	0	0	14	8	0	0	0	0	1	0	0	0	0	0	23
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66333				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Pennsauken NJ - APO											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 9242 Commerce Hwy								CITY/TOWN PENNSAUKEN				STATE NJ		ZIP CODE 08110	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>3</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31182				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Milwaukee WI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4410 N 132nd St, Suite A								CITY/TOWN BUTLER				STATE WI		ZIP CODE 53007	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	6	5	0	0	0	1	1	0	0	0	0	0	13
Laborers and Helpers	0	0	3	2	0	0	0	0	0	0	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	11	8	0	0	0	1	1	0	0	0	0	0	21
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	12	7	0	0	0	0	1	0	0	0	0	0	20
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56825				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Ventura CA - 3214											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3200 Golf Course Drive #A								CITY/TOWN VENTURA				STATE CA		ZIP CODE 93003	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	0	2	0	0	0	0	0	0	0	0	0	0	0	6
Laborers and Helpers	1	0	1	1	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	5	0	3	1	0	0	0	0	1	0	0	0	0	0	10
PRIOR 2022 REPORTING YEAR TOTAL	7	0	1	0	0	0	0	0	1	0	0	0	0	0	9
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC21694			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Topeka KS												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5725 SW Topeka Blvd						CITY/TOWN TOPEKA				STATE KS		ZIP CODE 66619			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
First/Mid-Level Officials and Managers	2	0	16	0	0	0	0	1	2	0	0	0	0	0	21
Professionals	1	0	11	0	0	0	0	0	1	0	0	0	0	0	13
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	4	0	35	1	0	0	0	0	2	0	0	0	0	0	42
Administrative Support Workers	1	0	13	0	0	0	0	0	2	0	0	0	0	0	16
Craft Workers	3	0	12	1	2	1	0	2	0	0	0	0	0	0	21
Operatives	2	0	26	0	0	1	1	2	1	0	0	0	0	0	33
Laborers and Helpers	4	1	8	0	0	0	0	5	2	0	0	0	0	0	20
Service Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	17	1	123	2	2	2	1	10	12	0	0	0	0	0	170
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	16	0	112	1	1	2	0	4	8	0	0	0	0	0	144
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JV43353			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Crawfordville GA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1271 Bethany Church Rd						CITY/TOWN CRAWFORDVILLE				STATE GA		ZIP CODE 30631			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	1	0	1	0	0	0	0	0	0	0	0	0	2
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	0	0	3	0	1	0	0	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31766				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Grand Rapids MI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2929 32nd Street SE, Suite 6								CITY/TOWN KENTWOOD				STATE MI		ZIP CODE 49512	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	11	0	0	0	0	0	0	0	0	0	0	0	12
Laborers and Helpers	4	0	5	7	0	0	0	1	0	0	0	0	0	0	17
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>5</b>	<b>0</b>	<b>24</b>	<b>7</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>37</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>21</b>	<b>8</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>32</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA29935				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Largo FL - PYP											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11900 Starkey Road								CITY/TOWN LARGO			STATE FL		ZIP CODE 33773		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	1	1	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
Craft Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	2	1	2	1	0	0	0	0	0	0	0	0	0	0	6
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 2023 REPORTING YEAR TOTAL	5	1	5	1	0	0	0	1	1	0	1	0	0	0	15
PRIOR 2022 REPORTING YEAR TOTAL	2	0	4	1	0	0	1	0	0	0	0	0	0	0	8
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16831			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Wheeling IL													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 747 Glenn Ave						CITY/TOWN WHEELING				STATE IL		ZIP CODE 60090				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	1	1	4	0	0	0	0	0	2	0	0	0	0	0	8	
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 2023 REPORTING YEAR TOTAL	1	1	4	0	0	0	0	0	2	0	0	0	0	0	8	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AL73681				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Brainerd MN											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2110 South 10Th Steet								CITY/TOWN BRAINERD				STATE MN		ZIP CODE 56401	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 339999 - All Other Miscellaneous 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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	34	1	0	0	0	3	0	0	0	0	0	0	41
Laborers and Helpers	0	0	9	0	0	0	0	1	0	0	0	0	0	0	10
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	49	1	0	0	0	4	2	0	0	0	0	0	59
PRIOR 2022 REPORTING YEAR TOTAL	0	0	8	0	0	0	0	0	0	0	0	0	0	0	8
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EK04541			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Atlanta GA - Goodmark												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 682 Us Hwy 78 Nw (State Rt 1)						CITY/TOWN MONROE			STATE GA		ZIP CODE 30655				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	2	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	1	0	2	5	0	0	0	0	0	0	0	0	0	0	8
Laborers and Helpers	1	0	1	1	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	7	8	0	0	0	0	1	0	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	1	0	6	8	0	0	0	0	1	0	0	0	0	0	16
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV54408			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Greensboro NC - Salisbury												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 100 Ward Rd						CITY/TOWN GREENSBORO				STATE NC		ZIP CODE 27405			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	2	0	0	0	0	0	2	0	0	0	0	0	5
Administrative Support Workers	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2
Craft Workers	0	0	2	2	0	0	0	0	0	0	0	0	0	0	4
Operatives	4	0	4	3	0	0	0	0	1	0	0	0	0	0	12
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 2023 REPORTING YEAR TOTAL	6	2	9	5	0	0	0	0	4	0	0	0	0	0	26
PRIOR 2022 REPORTING YEAR TOTAL	3	1	5	4	0	0	0	0	1	0	0	0	0	0	14
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID DY29811			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Anaheim CA - PYP - Admin													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1360 South Anaheim Boulevard						CITY/TOWN ANAHEIM				STATE CA		ZIP CODE 92805				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 953406551																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> 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															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	2	2	1	0	1	0	0	0	0	0	1	0	0	0	7	
Professionals	1	0	2	0	0	0	0	0	2	0	0	0	0	0	5	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
Administrative Support Workers	0	24	0	0	0	0	0	3	7	1	2	0	0	13	50	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Service Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	3	4	
CURRENT 2023 REPORTING YEAR TOTAL	4	26	4	0	1	0	0	3	9	2	3	0	0	16	68	
PRIOR 2022 REPORTING YEAR TOTAL	3	5	3	0	1	0	0	1	2	0	0	0	0	4	19	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  4																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GN78864				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Richmond VA - KAO Logistics											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5762 Charles City Circle								CITY/TOWN RICHMOND				STATE VA		ZIP CODE 23231	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	6	0	0	0	0	0	0	0	0	0	0	6
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 2023 REPORTING YEAR TOTAL	0	0	0	7	0	0	0	0	0	0	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	8	0	0	0	0	0	0	0	0	0	0	8
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30918				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Rancho Cordova CA -Sacramento											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1020 Del Paso Road, Suite 200								CITY/TOWN SACRAMENTO				STATE CA		ZIP CODE 95834	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	5	0	6	0	0	2	0	0	0	0	0	0	14
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>6</b>	<b>1</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>17</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>1</b>	<b>0</b>	<b>6</b>	<b>4</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>18</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID HF14881			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME New Braunfels TX - Goodwin												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5545 Goodwin Lane						CITY/TOWN NEW BRAUNFELS				STATE TX		ZIP CODE 78130			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	4	1	4	0	0	0	0	0	1	0	0	0	0	0	10
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	1	2	0	0	0	0	0	0	0	0	0	0	0	4
Administrative Support Workers	0	1	2	0	0	0	0	0	0	0	0	0	0	0	3
Craft Workers	9	0	10	0	0	0	0	0	0	0	0	0	0	0	19
Operatives	9	1	8	1	0	1	0	1	0	0	0	0	0	0	21
Laborers and Helpers	13	1	4	1	0	0	0	1	1	0	0	0	0	0	21
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	36	5	30	2	0	1	0	2	2	0	0	0	0	0	78
PRIOR 2022 REPORTING YEAR TOTAL	27	3	23	1	0	1	0	2	2	0	0	0	0	0	59
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16941				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Texarkana TX											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 622 Texas Blvd								CITY/TOWN TEXARKANA				STATE TX		ZIP CODE 75501	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31243			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Albuquerque NM													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3800 Prince Street Se						CITY/TOWN ALBUQUERQUE				STATE NM		ZIP CODE 87105				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	3	0	3	0	0	0	0	0	1	0	0	0	0	0	7	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	6	1	2	0	0	0	0	1	0	0	0	0	0	0	10	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	1	0	3	0	0	0	1	1	0	0	0	0	0	0	6	
Operatives	6	0	4	0	0	0	1	0	0	0	0	0	0	0	11	
Laborers and Helpers	8	0	0	0	0	0	0	0	0	0	0	0	0	0	8	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
CURRENT 2023 REPORTING YEAR TOTAL	24	1	12	0	0	0	2	2	1	0	0	0	0	0	42	
PRIOR 2022 REPORTING YEAR TOTAL	22	0	10	0	0	0	2	2	1	0	0	0	0	0	37	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16611			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Venice FL													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 851 US Hwy 41 Bypass South						CITY/TOWN VENICE				STATE FL		ZIP CODE 34285				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2	
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31344			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Peoria IL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 110 Thunderbird Lane						CITY/TOWN EAST PEORIA				STATE IL		ZIP CODE 61611			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	8	0	0	0	0	0	0	0	0	0	0	0	8
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	7	2	0	0	0	1	0	0	0	0	0	0	11
Laborers and Helpers	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>19</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>24</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>4</b>	<b>0</b>	<b>17</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>22</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66526				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fort Wayne IN - Knopf											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2250 Research Dr.								CITY/TOWN FORT WAYNE				STATE IN		ZIP CODE 46808	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	0	0	0	2	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56861			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Atlanta GA - APO												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 777 Wharton Drive						CITY/TOWN ATLANTA				STATE GA		ZIP CODE 30336			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	0	1	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	2	1	0	0	0	0	1	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	1	0	0	2	0	0	0	0	0	0	0	0	0	0	3
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16050			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Stockton CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2041 Navy Drive						CITY/TOWN STOCKTON				STATE CA		ZIP CODE 95206			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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 2023 REPORTING YEAR TOTAL	0	1	1	0	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30000				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Santa Fe Springs CA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 13780 E. Imperial Highway								CITY/TOWN SANTA FE SPRINGS				STATE CA		ZIP CODE 90670	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 953072886															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	9	1	0	0	0	0	0	0	0	0	0	0	0	0	10
Administrative Support Workers	4	1	0	0	0	0	0	0	0	0	0	0	0	1	6
Craft Workers	4	0	0	0	0	0	1	1	0	0	0	0	0	0	6
Operatives	25	0	1	0	0	0	0	1	0	0	0	0	0	0	27
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	42	4	1	0	0	0	1	2	0	0	0	0	0	1	51
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	23	2	0	0	0	0	0	0	0	0	0	0	0	0	25
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)  <div style="border: 1px solid black; height: 100px; width: 100%;"></div>															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17214			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Modesto CA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 401 Bangs Avenue, Suite A						CITY/TOWN MODESTO				STATE CA		ZIP CODE 95356				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	1	1	1	0	0	0	0	0	1	0	0	0	0	0	4	
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 2023 REPORTING YEAR TOTAL	1	1	1	0	0	0	0	0	1	0	0	0	0	0	4	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66636			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fayetteville GA - PYP												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 155 Roberts Road						CITY/TOWN FAYETTEVILLE				STATE GA		ZIP CODE 30214			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	0	1	0	0	0	1	1	1	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	1	2	0	0	0	0	0	0	0	0	0	0	3
Operatives	0	0	3	3	0	0	1	0	1	0	0	0	0	0	8
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 2023 REPORTING YEAR TOTAL	0	1	5	6	0	0	1	1	5	1	0	0	0	0	20
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	3	0	0	1	0	1	1	0	0	0	0	7
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16301			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Denville NJ												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 321 Palmer Rd						CITY/TOWN DENVILLE				STATE NJ		ZIP CODE 07834			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	3	0	0	0	0	0	0	1	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	1	0	3	0	0	0	0	0	0	1	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31142				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Des Moines IA NECO											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 810 SE Corporate Woods Dr, Suite 120								CITY/TOWN ANKENY				STATE IA		ZIP CODE 50021	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	4	0	0	0	0	0	0	0	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	6	1	0	0	0	0	0	0	0	0	0	0	7
Laborers and Helpers	1	0	1	0	0	0	0	1	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>14</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>19</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>1</b>	<b>0</b>	<b>14</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>15</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GN78801			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Pocatello ID												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5497 South 5th Ave						CITY/TOWN POCATELLO				STATE ID		ZIP CODE 83204			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>						<b>Female</b>						
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16884			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Carol Stream IL													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 296 Carlton Drive						CITY/TOWN CAROL STREAM				STATE IL		ZIP CODE 60188				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	1	0	5	0	0	0	0	1	1	0	0	0	0	0	8	
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 2023 REPORTING YEAR TOTAL	1	0	5	0	0	0	0	1	1	0	0	0	0	0	8	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31106			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Escanaba MI												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2700 29Th Avenue N						CITY/TOWN ESCANABA			STATE MI		ZIP CODE 49829				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	3	0	0	0	0	0	8
PRIOR 2022 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	3	0	0	0	0	0	9
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31748				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Spokane Valley WA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 15909 East Marietta Lane								CITY/TOWN SPOKANE VALLEY				STATE WA		ZIP CODE 99216	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	1	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	3	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	5	0	0	0	0	0	2	0	0	0	0	0	7
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	8	0	0	0	0	1	5	0	0	0	0	0	14
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	6	0	0	0	0	2	4	0	0	0	0	0	12
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30805			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tampa FL - Copher SS												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5109 Causeway Blvd						CITY/TOWN TAMPA				STATE FL		ZIP CODE 33619			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	1	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	1	1	1	0	0	0	0	0	0	0	0	0	0	3
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	2	0	1	0	0	0	0	2	1	0	0	0	0	9
Administrative Support Workers	1	2	0	0	0	0	0	1	1	1	0	0	0	2	8
Craft Workers	1	0	1	0	0	0	0	1	0	0	0	0	0	0	3
Operatives	6	0	2	2	0	0	0	1	1	0	0	0	0	0	12
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	7	0	2	0	0	0	0	1	3	0	0	0	0	13
CURRENT 2023 REPORTING YEAR TOTAL	13	12	5	6	0	0	0	3	6	5	0	0	0	2	52
PRIOR 2022 REPORTING YEAR TOTAL	1	4	3	5	0	0	0	0	0	0	0	0	0	0	13
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EK02902			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Philadelphia PA - Venice												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3350 S 61St Street						CITY/TOWN PHILADELPHIA				STATE PA		ZIP CODE 19153			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	1	0	0	0	0	0	0	5
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	2	3	1	0	0	0	0	0	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	3	0	2	3	0	0	0	1	0	0	0	0	0	0	9
Operatives	1	0	1	3	0	0	0	1	0	0	0	0	0	0	6
Laborers and Helpers	2	0	1	4	1	0	0	1	0	0	0	0	0	0	9
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	6	2	11	11	1	0	0	4	1	0	0	0	0	0	36
PRIOR 2022 REPORTING YEAR TOTAL	2	2	14	14	0	0	0	3	1	1	0	0	0	0	37
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66122			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Kingston PA - KAO A&A												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 588 Market Street						CITY/TOWN KINGSTON				STATE PA		ZIP CODE 18704			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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 2023 REPORTING YEAR TOTAL	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	4	0	0	0	0	0	0	1	0	0	0	0	5
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID MV45671				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Toledo OH											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5245 Lewis Ave								CITY/TOWN TOLEDO				STATE OH		ZIP CODE 43612	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	1	1	0	0	0	0	0	3
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	1	0	0	0	0	1	1	0	0	0	0	0	3
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30146				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Toledo OH - Salvage											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5245 Lewis Avenue								CITY/TOWN TOLEDO				STATE OH		ZIP CODE 43612	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Operatives	0	0	10	0	0	0	0	0	0	0	0	0	0	0	10
Laborers and Helpers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	20	0	0	0	0	0	1	0	0	0	0	0	21
PRIOR 2022 REPORTING YEAR TOTAL	0	0	15	2	0	0	0	0	0	0	0	0	0	0	17
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31472			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Columbus GA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 145 Challenger Court, Suite 1, Suite 1						CITY/TOWN COLUMBUS				STATE GA		ZIP CODE 31904			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	4	0	0	0	0	0	0	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	0	0	3	4	0	0	0	0	0	0	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	0	0	3	3	0	0	0	0	0	0	0	0	0	0	6
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB29932				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Jonesboro AR											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2415 Industrial Drive								CITY/TOWN JONESBORO				STATE AR		ZIP CODE 72401	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	11	0	0	0	0	1	0	0	0	0	0	0	12
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	20	0	0	0	0	1	1	0	0	0	0	0	22
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	19	0	0	0	0	1	1	0	0	0	0	0	21
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17302				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Pacoima CA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 12882 Pierce Street								CITY/TOWN PACOIMA				STATE CA		ZIP CODE 91331	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	1	0	1	0	0	0	0	0	1	0	0	0	5
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 2023 REPORTING YEAR TOTAL	2	0	2	0	1	0	0	0	0	0	1	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66214				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME LaCrosse WI - KAO Logistics											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2721 Hemstock St								CITY/TOWN LACROSSE				STATE WI		ZIP CODE 54603	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	9	0	0	0	0	0	2	0	0	0	0	0	11
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 2023 REPORTING YEAR TOTAL	0	0	11	0	0	0	0	0	2	0	0	0	0	0	13
PRIOR 2022 REPORTING YEAR TOTAL	0	0	14	1	0	0	0	0	4	0	0	0	0	0	19
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP15260			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Kansas City MO - Dist Ctr												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 101 North Belmont Blvd						CITY/TOWN KANSAS CITY				STATE MO		ZIP CODE 64123			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 339999 - All Other Miscellaneous Manufacturing															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	4	1	0	0	0	0	0	0	0	0	0	0	6
Laborers and Helpers	3	1	4	5	4	1	0	3	3	2	0	0	0	0	26
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	4	1	9	6	4	1	0	3	3	2	0	0	0	0	33
PRIOR 2022 REPORTING YEAR TOTAL	2	1	12	4	4	0	0	2	3	3	0	0	0	0	31
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30473				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Greenville SC - Self Service											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1300 White Horse Road								CITY/TOWN GREENVILLE				STATE SC		ZIP CODE 29605	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	2	1	0	0	0	2	6
Administrative Support Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Craft Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	3	0	6	2	0	0	0	2	0	0	0	0	0	0	13
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 2023 REPORTING YEAR TOTAL	3	0	10	2	0	0	0	3	3	1	0	0	0	2	24
PRIOR 2022 REPORTING YEAR TOTAL	1	0	6	3	0	0	0	2	0	0	0	0	0	0	12
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FC88526			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Martinsburg WV - Ernies												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4590 Williamsport Pike						CITY/TOWN MARTINSBURG				STATE WV		ZIP CODE 25404			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	1	0	10	0	0	0	0	0	0	0	0	0	0	0	11
Operatives	2	0	13	0	0	0	0	0	1	0	0	0	0	0	16
Laborers and Helpers	0	0	6	0	0	0	0	0	1	0	0	0	0	0	7
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	35	0	0	0	0	0	2	0	0	0	0	0	40
PRIOR 2022 REPORTING YEAR TOTAL	1	0	31	0	0	0	0	0	2	0	0	0	0	0	34
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16147				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Charlotte NC - APO											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 333 Dalton Ave								CITY/TOWN CHARLOTTE				STATE NC		ZIP CODE 28206	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	1	1	0	0	0	0	0	0	0	0	0	0	3
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA29881			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Wholesale West Admin												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1701 E Lamar St, #200						CITY/TOWN ARLINGTON				STATE TX		ZIP CODE 76006			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	7	0	0	0	0	0	0	10	3	0	0	0	0	20
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	0	7	0	0	1	0	0	0	12	3	0	0	0	0	23
PRIOR 2022 REPORTING YEAR TOTAL	0	4	1	0	0	0	0	0	10	3	0	0	0	0	18
SECTION I – WORKFORCE SNAPSHOT PERIOD 12102023 - 12232023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66645				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Wichita KS - Self Service											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 700 East 21St Street North								CITY/TOWN WICHITA				STATE KS		ZIP CODE 67214	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	2	1	1	0	0	0	1	0	0	0	0	1	0	6
Administrative Support Workers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
Operatives	0	0	5	1	0	0	0	2	0	0	0	0	0	0	8
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>3</b>	<b>9</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>20</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>3</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>11</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID HF16245			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Johnston RI - APO Providence												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 19 Industrial Lane						CITY/TOWN JOHNSTON				STATE RI		ZIP CODE 02919			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	1	0	0	1	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	1	1	0	0	0	0	1	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	1	1	0	0	0	0	0	0	0	0	0	3
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID FA71790			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Hesperia CA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11399 Sante Fe Ave E						CITY/TOWN HESPERIA				STATE CA		ZIP CODE 92345				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 953406551																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
JOB CATEGORIES	Race/Ethnicity															
	Hispanic or Latino		Not Hispanic or Latino													Row Total
			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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	2	1	1	1	0	0	0	0	0	0	0	0	0	0	5	
Administrative Support Workers	0	3	0	0	0	0	0	0	1	0	0	0	0	0	4	
Craft Workers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2	
Operatives	10	1	0	1	0	0	0	0	0	0	0	0	0	0	12	
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	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	14	5	3	2	0	0	0	0	1	0	0	0	0	0	25	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	7	1	1	1	0	0	0	0	1	0	0	0	0	0	11	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56793			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Helena MT												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1810 East Lyndale						CITY/TOWN HELENA				STATE MT		ZIP CODE 59601			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	6	0	0	0	0	0	1	0	0	0	0	0	7
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 2023 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	1	0	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	1	0	0	0	0	0	7
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30942			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Holland MI - Self Service												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11475 Chicago Drive						CITY/TOWN HOLLAND				STATE MI		ZIP CODE 49424			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Administrative Support Workers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	1	0	6	0	0	0	0	0	0	0	0	0	0	0	7
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 2023 REPORTING YEAR TOTAL	3	0	10	0	0	0	0	0	2	0	0	0	0	0	15
PRIOR 2022 REPORTING YEAR TOTAL	1	0	3	0	0	0	0	0	0	0	0	0	0	0	4
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JB60545				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Lawrence MA -APO North Boston											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 100 Glenn Street, Suite 100A								CITY/TOWN LAWRENCE				STATE MA		ZIP CODE 01843	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>5</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>5</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66272				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Flower Mound TX - KAO Whse											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 351 Lakeside Parkway								CITY/TOWN FLOWER MOUND				STATE TX		ZIP CODE 75028	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	1	0	4	0	0	0	0	0	0	0	0	0	0	0	5
First/Mid-Level Officials and Managers	6	0	5	1	0	1	0	0	1	0	0	0	0	0	14
Professionals	1	0	4	0	0	0	0	1	4	1	0	0	0	0	11
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	1	6	0	1	0	0	0	6	0	0	0	0	0	16
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	11	0	8	10	0	0	0	2	0	1	0	0	0	0	32
Laborers and Helpers	12	6	6	13	3	0	0	4	2	5	1	0	0	0	52
Service Workers	1	1	1	2	0	0	0	0	2	2	0	0	0	0	9
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>34</b>	<b>9</b>	<b>34</b>	<b>26</b>	<b>4</b>	<b>1</b>	<b>0</b>	<b>7</b>	<b>15</b>	<b>9</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>140</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>15</b>	<b>1</b>	<b>15</b>	<b>8</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>45</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31775			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME LaPorte IN												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1900 Whirlpool Drive East						CITY/TOWN LAPORTE				STATE IN		ZIP CODE 46350			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	9	0	0	0	0	0	0	0	0	0	0	0	9
PRIOR 2022 REPORTING YEAR TOTAL	0	1	10	0	0	0	0	0	0	0	0	0	0	0	11
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JB60536			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Miami FL - APO												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11930 SW 128th Street						CITY/TOWN MIAMI				STATE FL		ZIP CODE 33186			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	1	1	0	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	2	1	0	0	0	0	0	0	0	0	0	0	0	0	3
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID FC87123			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Cades SC													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3580 N Williamsburg County Hwy						CITY/TOWN CADES				STATE SC		ZIP CODE 29518				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY																
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)																
Unique Entity ID (UEI): Not Applicable																
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)																
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)																
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	2	0	0	0	0	0	6	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	4	1	0	0	0	0	0	0	0	0	0	0	5	
Operatives	1	0	10	3	0	0	0	0	0	0	0	0	0	0	14	
Laborers and Helpers	0	0	1	3	0	0	0	1	0	0	0	0	0	0	5	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
CURRENT 2023 REPORTING YEAR TOTAL	1	0	20	7	0	0	0	1	2	0	0	0	0	0	31	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	15	7	0	0	0	1	1	0	0	0	0	0	24	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17260				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Salinas CA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 26 summer street								CITY/TOWN SALINAS				STATE CA		ZIP CODE 93901	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	0	0	0	0	0	0	0	0	0	0	0	0	0	4
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	0	0	0	0	0	0	0	0	0	0	0	0	0	4
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16620				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Gainesville FL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1814 NE 23rd Avenue								CITY/TOWN GAINESVILLE				STATE FL		ZIP CODE 32609	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56892			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Hazelwood MO - KAO Logistics													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1601 Trade Port Drive, Suite 100						CITY/TOWN HAZELWOOD				STATE MO		ZIP CODE 63042				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4	
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 2023 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	2	0	0	0	0	0	0	7	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31528				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Port Allen LA -Baton Rouge											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1944 Commercial Drive								CITY/TOWN PORT ALLEN				STATE LA		ZIP CODE 70767	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	1	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	5	5	0	0	1	1	3	0	0	0	0	0	16
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	4	9	0	0	0	2	1	2	0	0	0	0	19
Laborers and Helpers	1	0	3	7	0	0	0	1	0	0	0	0	0	0	12
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>1</b>	<b>15</b>	<b>22</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>5</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>52</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>0</b>	<b>1</b>	<b>15</b>	<b>20</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>43</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30740			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Redmond OR - Brad's												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2727 Sw 13Th						CITY/TOWN REDMOND				STATE OR		ZIP CODE 97756			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	3	0	6	0	0	0	0	0	0	0	0	0	0	0	9
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>4</b>	<b>0</b>	<b>16</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>21</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>4</b>	<b>0</b>	<b>13</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>18</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31418			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Cullman AL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 215 County Road 490						CITY/TOWN CULLMAN				STATE AL		ZIP CODE 35055			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	1	1	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	17	1	0	0	0	0	1	0	0	0	0	0	20
Laborers and Helpers	1	0	10	1	0	0	0	0	1	0	0	0	0	0	13
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>2</b>	<b>31</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>41</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>1</b>	<b>28</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>42</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16851			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Duluth MN												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4418 Grand Ave						CITY/TOWN DULUTH				STATE MN		ZIP CODE 55807			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30381			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Michigan City IN -Great Lakes												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 728 West Us Highway 20						CITY/TOWN MICHIGAN CITY				STATE IN		ZIP CODE 46360			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	1	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	1	0	0	0	0	0	0	1	0	0	0	0	2
Craft Workers	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
Operatives	3	0	2	1	0	0	0	0	0	0	0	0	0	0	6
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	10	2	0	0	0	1	0	1	0	0	0	0	17
PRIOR 2022 REPORTING YEAR TOTAL	4	0	5	0	0	0	0	1	0	0	0	0	0	0	10
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP38248				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Greenville NC - E Carolina-SS											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4558 U.S. 13								CITY/TOWN GREENVILLE				STATE NC		ZIP CODE 27834	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	1	0	0	0	0	0	0	0	2	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	1	0	0	4	0	0	0	0	0	0	0	0	0	0	5
Operatives	1	0	3	2	0	0	0	1	0	0	0	0	0	0	7
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 2023 REPORTING YEAR TOTAL	5	1	4	6	0	0	0	1	0	2	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	2	1	1	3	0	0	0	1	0	1	0	0	0	1	10
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GN78790			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Ottumwa IA - Keystone												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 214 Fox Sauk Road						CITY/TOWN OTTUMWA				STATE IA		ZIP CODE 52501			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31400				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Erie PA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 901 West 12th Street, Ste 206								CITY/TOWN ERIE				STATE PA		ZIP CODE 16501	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	9	0	0	0	0	0	0	0	0	0	0	0	9
PRIOR 2022 REPORTING YEAR TOTAL	1	0	8	0	0	0	0	0	0	0	0	0	0	0	9
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV23727				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Medford MA - Kwik											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 163 Mystic Avenue								CITY/TOWN MEDFORD				STATE MA		ZIP CODE 02155	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	4	0	0	0	0	0	0	0	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	2	0	0	0	0	1	0	0	0	0	0	0	4
Laborers and Helpers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>3</b>	<b>0</b>	<b>9</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>14</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>8</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>13</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17203				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME South San Francisco CA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6 S Linden Ave								CITY/TOWN SOUTH SAN FRANCISCO				STATE CA		ZIP CODE 94080	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	1	0	0	0	0	0	0	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	3	0	2	0	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31914				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Albany NY											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 70 Karner Road								CITY/TOWN ALBANY				STATE NY		ZIP CODE 12205	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	6	3	0	0	0	1	0	0	0	0	0	0	10
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	15	3	0	0	0	1	0	0	0	0	0	0	19
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	16	5	0	0	0	0	0	0	0	0	0	0	21
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31501			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Omaha NE												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 8206 J Street						CITY/TOWN OMAHA				STATE NE		ZIP CODE 68127			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	0	18	0	0	0	0	1	2	0	0	0	1	0	24
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	3	0	0	0	0	0	0	0	0	0	0	0	4
Laborers and Helpers	1	0	6	1	0	0	0	0	0	0	0	0	0	0	8
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	4	1	31	1	0	0	0	1	3	0	0	0	1	0	42
PRIOR 2022 REPORTING YEAR TOTAL	3	1	32	1	0	0	0	1	2	0	0	0	1	0	41
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA29980			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Victorville CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 17229 Gasline Rd						CITY/TOWN VICTORVILLE				STATE CA		ZIP CODE 92394			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 953072886															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	4	0	1	0	0	0	0	0	0	0	0	0	0	0	5
Administrative Support Workers	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	5	1	1	0	0	0	0	1	0	0	0	0	0	0	8
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 2023 REPORTING YEAR TOTAL	11	3	2	0	0	0	0	1	0	0	0	0	0	0	17
PRIOR 2022 REPORTING YEAR TOTAL	4	2	0	0	0	0	0	1	0	0	0	0	0	0	7
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EK02965			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Dallas TX - Greenleaf												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5311 Botham Jean Blvd						CITY/TOWN DALLAS				STATE TX		ZIP CODE 75215			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	0	1	0	0	0	0	0	0	0	0	0	0	3
Laborers and Helpers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	0	1	0	0	0	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	6	0	4	2	0	0	0	0	0	0	0	0	0	0	12
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56852			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Sacramento CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3520 Carlin Dr, Suite 110						CITY/TOWN WEST SACRAMENTO				STATE CA		ZIP CODE 95691			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	1	1	0	1	0	0	1	0	0	0	0	0	0	5
Administrative Support Workers	0	2	0	0	0	0	0	1	1	0	0	1	1	0	6
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	0	0	2	0	0	0	0	0	0	0	0	0	0	6
Laborers and Helpers	5	1	0	4	1	0	0	2	0	0	0	0	0	0	13
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	10	4	2	6	2	0	0	4	1	0	0	1	1	0	31
PRIOR 2022 REPORTING YEAR TOTAL	9	3	2	2	1	0	0	0	0	0	0	0	0	0	17
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID PA92672				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Baltimore MD - APO North											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2901 E Biddle St								CITY/TOWN BALTIMORE				STATE MD		ZIP CODE 21213	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	0	2	0	0	0	0	1	0	0	0	0	0	3
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EK02507			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Lake City FL - Greenleaf												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4686 E Us Hwy 90						CITY/TOWN LAKE CITY				STATE FL		ZIP CODE 32055			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	4	0	0	0	0	0	0	0	0	0	0	0	5
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	3	0	0	0	0	0	0	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Operatives	0	0	14	2	0	0	0	1	3	0	0	0	0	0	20
Laborers and Helpers	1	0	2	2	0	0	0	0	0	0	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>3</b>	<b>0</b>	<b>28</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>40</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>25</b>	<b>5</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>37</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
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<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66618			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Greer SC - A&R Auto Parts												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 13054 E. Wade Hampton Blvd.						CITY/TOWN GREER				STATE SC		ZIP CODE 29651			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>						<b>Female</b>						
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	0	1	0	0	0	0	1	0	0	0	0	0	0	5
Administrative Support Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	4	2	0	0	0	0	1	0	0	0	0	0	10
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	6	0	8	2	0	0	0	1	3	0	0	0	0	0	20
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	3	0	9	1	0	0	0	0	2	0	0	0	0	0	15
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16895			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Belleville IL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4001 N Belt West						CITY/TOWN BELLEVILLE				STATE IL		ZIP CODE 62226			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
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 2023 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
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<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID PA92690			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Murrieta CA - Seawide												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 41698 Eastman Dr						CITY/TOWN MURRIETA				STATE CA		ZIP CODE 92562			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	1	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	1	1	1	0	0	0	0	0	2	0	0	0	0	0	5
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	4	2	0	0	0	0	0	3	0	0	0	0	0	10
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	2	1	0	0	0	0	0	1	0	0	0	0	0	4
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66553			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Spartanburg SC - Knopf												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 133 Clinton Street						CITY/TOWN SPARTANBURG				STATE SC		ZIP CODE 29301			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31591				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Waco TX											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 307 Depot Drive								CITY/TOWN WACO			STATE TX		ZIP CODE 76712		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	1	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	5	0	6	0	0	0	0	0	0	0	0	0	0	0	11
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	1	2	0	0	0	0	0	0	0	0	0	0	0	4
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	7	1	11	0	0	0	0	0	1	0	0	0	0	0	20
PRIOR 2022 REPORTING YEAR TOTAL	5	0	10	1	0	0	0	0	2	0	0	0	0	0	18
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16721			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Pompano Beach FL													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 427 N Dixie Hwy						CITY/TOWN POMPANO BEACH				STATE FL		ZIP CODE 33060				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY																
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)																
Unique Entity ID (UEI): Not Applicable																
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)																
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)																
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	1	0	1	0	0	0	0	2	0	0	0	0	0	4	
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 2023 REPORTING YEAR TOTAL	0	1	0	1	0	0	0	0	2	0	0	0	0	0	4	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16697			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Vero Beach FL													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1793 Old Dixie Hwy						CITY/TOWN VERO BEACH				STATE FL		ZIP CODE 32960				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	0	0	0	0	0	0	2	1	0	0	0	0	3	
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 2023 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	2	1	0	0	0	0	3	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56807				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bellingham WA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2020 E Bakerview Road								CITY/TOWN BELLINGHAM				STATE WA		ZIP CODE 98226	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	3	0	0	0	0	1	0	0	0	0	0	0	5
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	3	0	0	0	0	1	0	0	0	0	0	0	5
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	1	0	1	1	0	0	1	0	0	0	0	0	0	0	4
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31317			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME West Palm Beach FL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5621 45Th Street						CITY/TOWN WEST PALM BEACH				STATE FL		ZIP CODE 33407			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	2	0	0	0	0	1	0	0	0	0	0	5
Laborers and Helpers	0	0	2	2	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	6	4	0	0	0	0	2	0	0	0	0	0	13
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	7	3	0	0	0	0	2	0	0	0	0	0	12
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID A414580			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bethlehem PA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3658 Route 378, PO Box 3658						CITY/TOWN BETHLEHEM				STATE PA		ZIP CODE 18015			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	6	0	10	2	0	0	0	1	0	0	0	0	0	0	19
Laborers and Helpers	2	0	5	1	0	0	0	0	0	0	0	0	0	0	8
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	8	0	22	3	0	0	0	1	1	0	0	0	0	0	35
PRIOR 2022 REPORTING YEAR TOTAL	4	0	18	0	0	0	0	0	1	0	0	0	0	0	23
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31353				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Madison WI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5969 Haase Road, Suite B								CITY/TOWN DEFOREST				STATE WI		ZIP CODE 53532	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	9	1	0	0	0	0	0	0	0	0	0	0	10
Laborers and Helpers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	13	1	0	0	0	0	3	0	0	0	0	0	17
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	13	0	0	0	0	0	2	0	0	0	0	0	15
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16323				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Worcester MA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 462 Pleasant St								CITY/TOWN WORCESTER				STATE MA		ZIP CODE 01609	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
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 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA50065			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME San Antonio TX - KAO Logistic												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4530 Tejasco						CITY/TOWN SAN ANTONIO				STATE TX		ZIP CODE 78218			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	8	0	0	2	0	0	0	1	0	0	0	0	0	0	11
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 2023 REPORTING YEAR TOTAL	10	0	0	2	0	0	0	1	0	0	0	0	0	0	13
PRIOR 2022 REPORTING YEAR TOTAL	9	0	0	2	0	0	0	1	0	0	0	0	0	0	12
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16598				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Hialeah FL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1090 East 14th St								CITY/TOWN HIALEAH				STATE FL		ZIP CODE 33010	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	5	0	0	1	0	0	0	0	0	0	0	0	0	0	6
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	5	0	0	1	0	0	0	0	0	0	0	0	0	0	6
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31885			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Syracuse NY												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1810 Lemoyne Ave						CITY/TOWN SYRACUSE				STATE NY		ZIP CODE 13208			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	8	1	0	0	0	0	2	0	0	0	0	0	11
Laborers and Helpers	0	0	1	1	0	0	0	0	1	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	13	2	0	0	0	0	3	0	0	0	0	0	18
PRIOR 2022 REPORTING YEAR TOTAL	0	0	10	2	0	0	0	0	1	0	0	0	0	0	13
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16950			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Grand Prairie TX													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3100 Roy Orr Blvd, Suite 100						CITY/TOWN GRAND PRAIRIE				STATE TX		ZIP CODE 75050				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	4	0	1	0	0	0	0	0	2	1	0	0	0	1	9	
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 2023 REPORTING YEAR TOTAL	4	0	2	0	0	0	0	0	2	1	0	0	0	1	10	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16356			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Salem MA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 45 Mason Street						CITY/TOWN SALEM				STATE MA		ZIP CODE 01970			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EK02983				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME E Jackson MS -Plunk's											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4100 Interstate 55 South								CITY/TOWN JACKSON				STATE MS		ZIP CODE 39212	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	2	0	0	0	0	0	2	0	0	0	0	0	5
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	4	2	0	0	0	0	0	0	0	0	0	0	6
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	1	10	3	0	0	0	0	2	0	0	0	0	0	16
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	4	3	0	0	0	0	2	0	0	0	0	0	9
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56782			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME San Jose CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5995 Hellyer Ave, Suite 10						CITY/TOWN SAN JOSE			STATE CA		ZIP CODE 95138				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	7	0	1	2	4	1	0	1	0	0	0	0	0	0	16
Laborers and Helpers	3	1	1	0	1	0	0	0	0	0	0	0	0	0	6
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	11	1	2	2	5	1	0	1	0	0	0	0	0	0	23
PRIOR 2022 REPORTING YEAR TOTAL	7	1	2	3	3	0	0	1	0	0	0	0	0	0	17
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16813			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME West Bend WI													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 245 Stockhausen Lane						CITY/TOWN WEST BEND				STATE WI		ZIP CODE 53095				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY																
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)																
Unique Entity ID (UEI): Not Applicable																
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)																
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)																
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4	
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17073			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME National City CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 110 E 16th St						CITY/TOWN NATIONAL CITY				STATE CA		ZIP CODE 91950			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	4	0	0	0	0	0	0	0	0	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	1	4	0	0	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17104			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Corona CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 182 Granite St #105						CITY/TOWN CORONA				STATE CA		ZIP CODE 92879			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	5	1	0	0	0	0	0	0	2	0	0	0	0	0	8
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 2023 REPORTING YEAR TOTAL	5	1	0	0	0	0	0	0	2	0	0	0	0	0	8
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16378			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Greenville SC												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1116 Cedar Lane Rd						CITY/TOWN GREENVILLE				STATE SC		ZIP CODE 29617			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	0	0	0	1	0	0	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	0	0	3	0	0	0	1	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EE11321				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Durham NC - Self Service											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1301 S Miami Blvd								CITY/TOWN DURHAM				STATE NC		ZIP CODE 27703	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	1	0	1	0	0	0	0	0	0	0	0	0	0	4
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	1	0	0	0	2
Craft Workers	1	0	1	1	0	0	0	0	0	0	0	0	0	0	3
Operatives	3	0	4	2	0	0	0	1	0	0	0	0	0	0	10
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>8</b>	<b>1</b>	<b>6</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>21</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>8</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID PA92654			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Auto Parts Outlet - Admin													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3804 Coconut Palm Dr						CITY/TOWN TAMPA				STATE FL		ZIP CODE 33619				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	7	9	3	3	0	0	0	0	2	0	0	0	0	1	25	
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
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	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>8</b>	<b>10</b>	<b>4</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>28</b>	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>5</b>	<b>9</b>	<b>3</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>24</b>	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																
8																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30731				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Clayton NC - APO Raleigh											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2928 US Highway 70 East								CITY/TOWN CLAYTON				STATE NC		ZIP CODE 27520	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	1	1	2	0	0	0	0	7
Administrative Support Workers	0	0	0	1	0	0	0	0	1	0	0	0	0	0	2
Craft Workers	1	0	0	1	0	0	0	0	0	0	0	0	0	0	2
Operatives	0	0	6	4	0	0	0	0	0	0	0	0	0	0	10
Laborers and Helpers	0	1	1	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>1</b>	<b>11</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>26</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>10</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30823				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Clearwater FL - Copher SS											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 12501 40Th Street North								CITY/TOWN CLEARWATER				STATE FL		ZIP CODE 33762	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	1	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	1	1	1	0	0	0	0	1	0	0	0	0	0	6
Administrative Support Workers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	5	0	0	0	0	0	1	0	0	0	0	0	8
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>4</b>	<b>1</b>	<b>7</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>17</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>7</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>12</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30868				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tulsa OK - Apex Auto											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 7600 Charles Page Blvd								CITY/TOWN TULSA				STATE OK		ZIP CODE 74127	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	2	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	1	0	0	1	0	1	0	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	3	0	3	0	1	0	0	1	0	0	0	0	0	0	8
Operatives	0	0	4	0	1	0	0	0	0	0	0	0	0	0	5
Laborers and Helpers	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	0	13	1	4	0	1	1	2	0	0	0	0	0	26
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	3	0	12	0	2	0	1	1	2	0	0	0	0	0	21
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP16644			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Colorado Springs CO - US83												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1727 Jetstream Drive								CITY/TOWN COLORADO SPRINGS			STATE CO		ZIP CODE 80921		
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	0	2	0	0	0	0	0	0	0	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	3	0	5	0	0	0	0	0	0	0	0	0	0	0	8
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	2	0	5	0	0	0	0	0	0	0	0	0	0	0	7
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AL73746			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Charlotte NC												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1706 Queen City Drive						CITY/TOWN CHARLOTTE				STATE NC		ZIP CODE 28208			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	3	3	0	0	0	0	0	0	0	0	0	0	7
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	1	1	0	0	0	0	0	4	0	0	0	0	0	7
Administrative Support Workers	0	0	0	1	0	0	0	0	3	0	0	0	0	0	4
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	3	14	0	0	0	1	0	0	0	0	0	0	19
Laborers and Helpers	5	3	7	34	0	0	0	1	0	3	0	0	0	0	53
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	8	4	14	52	0	0	0	2	7	3	0	0	0	0	90
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	6	1	12	20	0	0	0	2	6	0	0	0	0	0	47
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)  4															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID DP29647				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Nashville TN - Regional											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5846 Crossings Blvd								CITY/TOWN ANTIOCH				STATE TN		ZIP CODE 37013	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 551114 - Corporate, Subsidiary, and Regional Managing Offices															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	2	0	61	1	1	0	0	3	13	0	0	0	0	0	81
First/Mid-Level Officials and Managers	10	3	147	4	5	1	1	5	48	9	1	0	0	0	234
Professionals	66	11	414	25	19	1	3	20	129	20	16	0	0	11	735
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	4	3	38	4	1	0	0	0	9	1	0	0	0	0	60
Administrative Support Workers	2	10	34	1	0	0	0	2	46	6	1	0	0	5	107
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	51	2	184	18	5	1	4	2	23	3	0	0	0	2	295
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	1	2	1	0	0	0	0	0	5	3	0	0	1	0	13
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	136	31	879	53	31	3	8	32	273	42	18	0	1	18	1525
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	47	12	482	37	23	2	1	25	170	32	12	0	0	9	852
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16268				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Glen Burnie MD											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 180 Penrod Court, Suite C								CITY/TOWN GLEN BURNIE				STATE MD		ZIP CODE 21061	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	1	0	0	0	0	2	0	0	0	0	0	5
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	2	1	0	0	0	0	2	0	0	0	0	0	5
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16664			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tampa FL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1212 N 39th St, Suite 303						CITY/TOWN TAMPA				STATE FL		ZIP CODE 33605			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	3	1	0	0	0	0	1	1	0	0	0	0	7
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 2023 REPORTING YEAR TOTAL	1	0	3	1	0	0	0	0	1	1	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
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<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID ET08511			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Monrovia CA - Pick A Part												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3333 Peck Rd						CITY/TOWN MONROVIA				STATE CA		ZIP CODE 91016			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 953072886															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>						<b>Female</b>						
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	0	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	5	0	2	0	0	0	0	1	0	0	0	0	0	0	8
Administrative Support Workers	2	2	1	0	0	0	0	0	1	0	0	0	0	0	6
Craft Workers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	22	0	0	0	0	0	0	1	0	0	0	0	0	0	23
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>34</b>	<b>2</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>43</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>21</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>24</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56672				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Buffalo NY - 1304											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 40 Hopkins St								CITY/TOWN BUFFALO				STATE NY		ZIP CODE 14220	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	5	1	0	0	0	0	0	0	0	0	0	0	6
Operatives	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	7	2	0	0	0	0	1	0	0	0	0	0	10
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	7	1	0	0	0	0	1	0	0	0	0	0	9
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30244			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Charleston WV												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3000 Sissonville Dr						CITY/TOWN CHARLESTON			STATE WV		ZIP CODE 25312				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	11	0	0	0	0	0	0	0	0	0	0	0	11
Laborers and Helpers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	20	0	0	0	0	1	0	0	0	0	0	0	21
PRIOR 2022 REPORTING YEAR TOTAL	0	0	17	0	0	0	0	1	0	0	0	0	0	0	18
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56760			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Springfield OR													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1860 Laura St						CITY/TOWN SPRINGFIELD				STATE OR		ZIP CODE 97477				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	1	0	0	1	0	0	0	0	0	0	0	0	2	
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	1	0	0	0	0	0	0	0	0	3	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31867			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Exeter PA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 48 Slocum Ave						CITY/TOWN EXETER				STATE PA		ZIP CODE 18643			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	8	0	0	0	0	0	0	0	0	0	0	0	10
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	15	0	0	0	0	0	1	0	0	0	0	0	18
PRIOR 2022 REPORTING YEAR TOTAL	3	0	14	0	0	0	0	0	0	0	0	0	0	0	17
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30164			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Vineland NJ - Southern NJ												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4 Main Road						CITY/TOWN VINELAND				STATE NJ		ZIP CODE 08360			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	3	0	0	0	0	0	0	0	0	0	0	0	5
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	7	0	3	0	0	0	0	0	0	0	0	0	0	0	10
Operatives	8	0	1	0	0	0	0	1	1	0	0	0	0	0	11
Laborers and Helpers	4	0	2	0	0	0	0	0	0	0	0	0	0	0	6
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	23	0	10	0	0	0	0	1	1	0	0	0	0	0	35
PRIOR 2022 REPORTING YEAR TOTAL	24	0	9	1	0	0	0	0	0	0	0	0	0	0	34
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID MV45660			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Kettering OH - CVC												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4991 Hempstead Station Dr						CITY/TOWN KETTERING				STATE OH		ZIP CODE 45429			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 336390 - Other Motor Vehicle Parts Manufacturing															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	1	22	3	1	0	1	0	1	1	0	0	0	0	32
Laborers and Helpers	1	1	3	1	0	0	0	0	1	0	0	0	0	0	7
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	3	2	29	4	1	0	1	0	6	1	0	0	0	0	47
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	1	4	0	0	0	0	1	3	0	0	0	0	0	9
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30226			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Syosset NY												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 149 Lafayette Drive						CITY/TOWN SYOSSET			STATE NY		ZIP CODE 11791				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	4	0	0	0	0	1	0	0	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	1	3	0	0	0	1	0	0	0	0	0	0	8
Laborers and Helpers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	4	0	7	3	0	0	0	2	1	0	0	0	0	0	17
PRIOR 2022 REPORTING YEAR TOTAL	6	0	8	4	0	0	0	2	1	0	0	0	0	0	21
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16905				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Earth City MO											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 13730 Shoreline CtSuite E								CITY/TOWN EARTH CITY				STATE MO		ZIP CODE 63045	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	1	0	0	0	0	0	0	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	0	0	4	1	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16367				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Jacksonville FL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 8475 Western Way, Suite 160								CITY/TOWN JACKSONVILLE				STATE FL		ZIP CODE 32256	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	5	0	0	0	0	0	0	1	0	0	0	0	6
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 2023 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	0	1	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID CL18633			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME West Deptford NJ												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 39 Phoenix Drive						CITY/TOWN WEST DEPTFORD				STATE NJ		ZIP CODE 08086			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	3	1	0	0	0	1	1	1	0	0	0	0	9
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	6	0	9	0	0	0	0	0	2	0	0	0	0	0	17
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	13	0	12	9	0	0	0	1	1	1	0	0	0	0	37
Laborers and Helpers	3	0	5	3	0	0	0	1	1	1	0	0	0	0	14
Service Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
CURRENT 2023 REPORTING YEAR TOTAL	25	1	29	13	0	0	0	3	6	3	0	0	0	0	80
PRIOR 2022 REPORTING YEAR TOTAL	17	0	29	12	0	0	0	4	4	2	0	0	0	0	68
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31647			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME York PA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 275A Cross Farm Ln						CITY/TOWN YORK				STATE PA		ZIP CODE 17406				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
JOB CATEGORIES	Race/Ethnicity															
	Hispanic or Latino		Not Hispanic or Latino													Row Total
			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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	1	0	2	0	0	0	0	1	1	0	0	0	0	0	5	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3	
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Operatives	4	0	15	4	0	0	0	0	0	0	0	0	0	0	23	
Laborers and Helpers	0	0	11	5	0	0	0	1	0	0	0	0	0	0	17	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	6	0	31	9	0	0	0	2	2	0	0	0	0	0	50	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	4	0	31	5	0	0	0	0	2	0	0	0	0	0	42	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID DP29537			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Portland OR												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 16393 NE Cameron Blvd						CITY/TOWN PORTLAND				STATE OR		ZIP CODE 97230			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	6	0	0	0	0	0	1	0	0	0	0	0	8
Administrative Support Workers	0	0	0	0	0	0	0	0	3	0	0	0	0	0	3
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	12	1	0	0	1	2	1	0	0	0	0	0	19
Laborers and Helpers	2	0	16	2	2	0	0	1	0	0	0	0	0	0	23
Service Workers	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
CURRENT 2023 REPORTING YEAR TOTAL	5	0	38	3	2	0	1	3	8	0	1	0	0	0	61
PRIOR 2022 REPORTING YEAR TOTAL	5	1	34	1	1	0	1	3	4	0	1	0	0	0	51
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31831			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chattanooga TN												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4600 Central Avenue						CITY/TOWN CHATTANOOGA			STATE TN		ZIP CODE 37410				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Laborers and Helpers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
CURRENT 2023 REPORTING YEAR TOTAL	0	0	12	0	0	0	0	1	2	0	0	0	0	0	15
PRIOR 2022 REPORTING YEAR TOTAL	0	0	12	1	0	0	0	1	1	0	0	0	0	0	15
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66461			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Atlanta GA - Knopf -Boat Rock												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6320 Boat Rock Bd S.W.						CITY/TOWN ATLANTA				STATE GA		ZIP CODE 30336			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	1	1	0	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Operatives	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	19	6	1	9	1	0	0	0	0	0	0	0	0	0	36
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	20	8	6	10	1	0	0	1	1	0	0	0	0	0	47
PRIOR 2022 REPORTING YEAR TOTAL	10	7	2	17	0	0	0	1	1	0	0	0	0	0	38
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17370				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME San Antonio TX - Earl Owens											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS Rittiman East DC Building #10, 5810-5922 Busniess Park D								CITY/TOWN SAN ANTONIO				STATE TX		ZIP CODE 78219	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	7	0	1	0	0	0	0	1	0	0	0	0	0	0	9
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 2023 REPORTING YEAR TOTAL	7	0	3	0	0	0	0	1	0	0	0	0	0	0	11
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66517				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Atlanta GA - Knopf - Core											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4585 Frederick S.W.								CITY/TOWN ATLANTA				STATE GA		ZIP CODE 30336	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	4	4	2	1	0	0	0	1	0	0	0	0	0	0	12
Service Workers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	5	6	3	2	0	0	0	1	0	0	0	0	0	0	17
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	5	1	2	1	0	0	0	0	0	0	0	0	0	0	9
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31555			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME McAllen TX												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5001 Tanya Avenue, Ste 100						CITY/TOWN MCALLEN				STATE TX		ZIP CODE 78503			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	1	0	0	0	0	0	1	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	10	1	0	0	0	0	0	1	0	0	0	0	0	0	12
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	4	1	0	0	0	0	0	0	0	0	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	18	3	0	0	0	0	0	2	0	0	0	0	0	0	23
PRIOR 2022 REPORTING YEAR TOTAL	18	2	0	0	0	0	0	2	0	0	0	0	0	0	22
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30574				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Anaheim CA - PYP											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1235 S Beach Boulevard								CITY/TOWN ANAHEIM				STATE CA		ZIP CODE 92804	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 953406551															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	7	2	1	0	0	0	0	1	0	0	0	0	0	0	11
Administrative Support Workers	3	2	0	0	0	0	0	0	0	0	0	0	0	0	5
Craft Workers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	20	0	1	2	1	0	0	3	0	0	0	0	0	0	27
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>33</b>	<b>4</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>47</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>14</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>17</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31840				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Milford CT											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 138 Furniture Road								CITY/TOWN MILFORD				STATE CT		ZIP CODE 06460	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	1	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	1	4	0	0	0	1	0	0	0	0	0	0	8
Laborers and Helpers	1	0	3	0	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>3</b>	<b>0</b>	<b>6</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>15</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>3</b>	<b>0</b>	<b>6</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>16</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17095			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Montclair CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4809 Holt Ave						CITY/TOWN MONTCLAIR				STATE CA		ZIP CODE 91763			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	1	0	0	0	0	0	0	1	0	0	0	0	0	6
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 2023 REPORTING YEAR TOTAL	4	1	0	0	0	0	0	0	1	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16411			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Stockbridge GA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 7237-A Daniel Dr						CITY/TOWN STOCKBRIDGE				STATE GA		ZIP CODE 30281			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	1	0	0	0	0	1	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	0	0	2	1	0	0	0	0	1	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661		
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID HF15002				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Houston TX												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1101 East Richey Road								CITY/TOWN HOUSTON				STATE TX		ZIP CODE 77073		
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	2	1	1	0	0	0	0	0	1	0	0	0	0	0	0	5
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	16	4	4	7	0	0	0	1	0	0	0	0	0	0	0	32
Administrative Support Workers	0	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	12	3	2	10	0	0	0	0	1	0	0	0	0	0	0	28
Laborers and Helpers	12	0	1	3	0	0	0	1	1	0	0	0	0	0	0	18
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>43</b>	<b>11</b>	<b>9</b>	<b>20</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>88</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>42</b>	<b>5</b>	<b>10</b>	<b>15</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>76</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31115			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Grand Rapids MI - MDC												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1120 36th St SE, Ste 540						CITY/TOWN GRAND RAPIDS				STATE MI		ZIP CODE 49508			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	5	0	0	0	0	0	4	1	0	0	0	0	10
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	6	1	0	0	0	0	13
PRIOR 2022 REPORTING YEAR TOTAL	0	2	5	0	0	0	0	0	6	0	0	0	0	0	13
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP39911				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Conway AR - Preferred Auto											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 650 Simon Road								CITY/TOWN CONWAY				STATE AR		ZIP CODE 72032	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	8	0	0	0	0	0	0	0	0	0	0	0	8
Administrative Support Workers	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2
Craft Workers	0	0	5	1	0	0	0	0	0	0	0	0	0	0	6
Operatives	2	0	5	2	0	0	0	1	0	0	0	0	0	0	10
Laborers and Helpers	0	0	1	4	0	0	0	0	0	0	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>1</b>	<b>23</b>	<b>7</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>35</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>20</b>	<b>8</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>31</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID DP29495			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Indianapolis IN													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 849 Whitaker Road Suite 190						CITY/TOWN PLAINFIELD				STATE IN		ZIP CODE 46168				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
First/Mid-Level Officials and Managers	1	1	3	1	0	0	0	0	2	0	0	0	0	0	8	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3	
Administrative Support Workers	0	0	0	1	0	0	0	0	1	0	0	0	0	0	2	
Craft Workers	0	0	8	1	0	0	0	0	1	0	0	0	0	0	10	
Operatives	1	1	17	9	0	0	0	2	0	0	0	0	0	0	30	
Laborers and Helpers	2	0	10	4	0	0	0	2	3	1	0	0	0	0	22	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
CURRENT 2023 REPORTING YEAR TOTAL	4	2	42	16	0	0	0	4	7	1	0	0	0	0	76	
PRIOR 2022 REPORTING YEAR TOTAL	5	1	34	15	0	0	0	1	5	2	0	0	0	0	63	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  4																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV54114			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Edgewood MD												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1706 Pulaski Highway						CITY/TOWN EDGEWOOD				STATE MD		ZIP CODE 21040			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	2	1	0	0	0	0	1	0	0	0	0	0	4
Craft Workers	0	0	3	1	0	0	0	0	0	0	0	0	0	0	4
Operatives	2	0	5	1	0	0	1	1	0	0	0	0	0	0	10
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 2023 REPORTING YEAR TOTAL	2	0	13	4	0	0	1	1	2	0	0	0	0	0	23
PRIOR 2022 REPORTING YEAR TOTAL	0	0	6	2	0	0	1	1	2	0	0	0	0	0	12
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30482			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Houston TX - Wallisville - SS													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 9314 Wallisville Road						CITY/TOWN HOUSTON				STATE TX		ZIP CODE 77013				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY																
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)																
Unique Entity ID (UEI): Not Applicable																
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)																
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)																
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	1	1	1	0	0	0	0	0	0	0	0	0	0	3	
Professionals	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	4	2	0	0	0	0	0	0	1	0	0	0	0	1	8	
Administrative Support Workers	1	2	0	1	0	0	0	0	0	0	0	0	0	0	4	
Craft Workers	0	0	0	2	0	0	0	0	0	0	0	0	0	0	2	
Operatives	5	0	1	3	0	0	0	0	0	0	0	0	0	0	9	
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 2023 REPORTING YEAR TOTAL	10	6	2	7	0	0	0	0	1	0	0	0	0	1	27	
PRIOR 2022 REPORTING YEAR TOTAL	4	4	2	5	0	0	0	1	1	0	0	0	0	1	18	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30532			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Waterloo IA - Keystone												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 100 E 5Th Street						CITY/TOWN WATERLOO				STATE IA		ZIP CODE 50703			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 339999 - All Other Miscellaneous Manufacturing															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	12	0	0	0	0	0	1	0	0	0	0	0	13
PRIOR 2022 REPORTING YEAR TOTAL	0	0	12	0	0	0	0	0	0	0	0	0	0	0	12
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17392			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Oklahoma City OK - Earl Owens												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1101 Enterprise Ave						CITY/TOWN OKLAHOMA CITY				STATE OK		ZIP CODE 73128			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	1	1	0	0	0	0	0	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	3	0	1	1	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30143				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME York Haven PA - Penn Mar												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 269 River Road								CITY/TOWN YORK HAVEN				STATE PA		ZIP CODE 17370		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	2	0	6	0	0	0	0	0	0	0	0	0	0	0	8	
Operatives	0	0	3	1	0	0	0	0	0	0	0	0	0	0	4	
Laborers and Helpers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
CURRENT 2023 REPORTING YEAR TOTAL	2	0	17	1	0	0	0	0	0	0	0	0	0	0	20	
PRIOR 2022 REPORTING YEAR TOTAL	2	0	16	0	0	0	0	1	1	0	0	0	0	0	20	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31335			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Greensboro NC												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4224 Tudor Lane, Ste 105						CITY/TOWN GREENSBORO				STATE NC		ZIP CODE 27410			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	6	0	0	0	0	0	0	0	0	0	0	0	7
Professionals	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	13	0	0	0	0	0	2	0	0	0	0	0	16
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	30	9	0	0	0	1	0	0	0	0	0	0	41
Laborers and Helpers	0	0	3	1	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	54	10	0	0	0	1	4	0	0	0	0	0	72
PRIOR 2022 REPORTING YEAR TOTAL	3	0	47	13	0	0	0	1	2	0	0	0	0	0	66
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31160				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Springfield IL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2840 Old Rochester Road								CITY/TOWN SPRINGFIELD				STATE IL		ZIP CODE 62703	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
Laborers and Helpers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	5	2	0	0	0	0	0	0	0	0	0	0	7
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	6	1	0	0	0	0	0	0	0	0	0	0	7
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)  <div style="border: 1px solid black; height: 150px; margin-top: 10px;"></div>															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31292			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME New Orleans LA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5620 Blessey Street						CITY/TOWN HARAHAN				STATE LA		ZIP CODE 70123				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	1	0	5	8	0	0	0	0	1	0	0	0	0	0	15	
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	3	2	0	1	0	0	1	0	0	0	0	0	7	
Laborers and Helpers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
CURRENT 2023 REPORTING YEAR TOTAL	2	0	12	10	0	1	0	0	3	0	0	0	0	0	28	
PRIOR 2022 REPORTING YEAR TOTAL	2	0	12	9	0	1	0	1	2	0	0	0	0	0	27	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30081			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Stanton CA - PYP												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 8188 Katella Drive						CITY/TOWN STANTON				STATE CA		ZIP CODE 90680			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 953406551															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	0	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	4	3	0	0	0	0	0	0	0	0	0	0	0	1	8
Administrative Support Workers	1	2	0	0	0	0	0	0	0	0	1	0	0	0	4
Craft Workers	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3
Operatives	9	0	0	0	0	0	0	0	0	0	0	0	0	0	9
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 2023 REPORTING YEAR TOTAL	19	5	0	0	0	0	0	0	1	0	1	0	0	1	27
PRIOR 2022 REPORTING YEAR TOTAL	10	1	0	0	1	0	0	0	1	0	1	0	0	0	14
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31894				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Rochester NY											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 72 Spencerport Road								CITY/TOWN ROCHESTER				STATE NY		ZIP CODE 14606	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	1	0	0	0	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	9	5	0	0	0	0	0	0	0	0	0	0	16
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	3	0	16	5	0	0	1	1	0	0	0	0	0	0	26
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	1	0	15	5	0	0	1	1	0	0	0	0	0	0	23
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16576			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Huntsville AL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1795 Sportsman Lane						CITY/TOWN HUNTSVILLE				STATE AL		ZIP CODE 35816			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56683				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Leominster MA - ABC Auto Part											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1525 Central Street								CITY/TOWN LEOMINSTER				STATE MA		ZIP CODE 01453	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	8	0	0	0	0	0	1	0	0	0	0	0	11
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	0	15	1	0	0	0	0	2	0	0	0	0	0	21
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	5	0	12	0	0	0	0	0	0	0	0	0	0	0	17
Operatives	2	0	10	0	0	0	0	0	0	0	0	0	0	0	12
Laborers and Helpers	4	0	3	0	0	0	0	0	0	0	0	0	0	0	7
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	16	0	48	1	0	0	0	0	3	0	0	0	0	0	68
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	14	0	41	1	0	0	1	0	3	0	0	0	0	0	60
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EB29983				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME South Bend IN - Self Service												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1602 S Lafayette Blvd								CITY/TOWN SOUTH BEND				STATE IN		ZIP CODE 46613		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Professionals	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	1	0	0	0	0	0	0	2	1	0	0	0	1	5	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	5	2	0	0	0	0	0	0	0	0	0	0	7	
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 2023 REPORTING YEAR TOTAL	0	1	7	2	0	0	0	0	3	1	0	0	0	1	15	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	4	1	0	0	0	0	2	0	0	0	0	1	8	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66012				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME West Fargo ND - KAO Logistics												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 830 11Th Ave Ne								CITY/TOWN WEST FARGO				STATE ND		ZIP CODE 58078		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	1	0	8	1	0	0	1	0	0	0	0	0	0	0	11	
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 2023 REPORTING YEAR TOTAL	1	0	9	1	0	0	1	0	1	0	0	0	0	0	13	
PRIOR 2022 REPORTING YEAR TOTAL	1	0	9	1	0	0	1	0	1	0	0	0	0	0	13	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31564			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tyler TX												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 13681 Sydney Road						CITY/TOWN WHITEHOUSE				STATE TX		ZIP CODE 75791			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	1	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	0	7	2	0	0	0	1	1	0	0	0	0	0	13
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
Laborers and Helpers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	11	4	0	0	0	1	2	0	0	0	0	0	21
PRIOR 2022 REPORTING YEAR TOTAL	2	0	9	3	0	0	0	1	2	0	0	0	0	0	17
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID MV45682			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Prescott Valley AZ												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 9551 E Lorna Lane, Suite E						CITY/TOWN PRESCOTT VALLEY				STATE AZ		ZIP CODE 86314			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	1	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
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 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	1	1	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	1	0	0	0	0	0	0	2
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID CI07048			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Salisbury NC												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1212 Webb Road						CITY/TOWN SALISBURY				STATE NC		ZIP CODE 28146			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	1	0	0	0	0	2	0	0	0	0	0	7
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	3	3	1	0	0	0	0	0	0	0	0	0	7
Operatives	0	0	9	2	0	0	0	0	0	0	0	0	0	0	11
Laborers and Helpers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	18	6	1	0	0	0	3	0	0	0	0	0	28
PRIOR 2022 REPORTING YEAR TOTAL	1	0	10	4	1	0	0	0	3	0	0	0	0	0	19
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56742			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tooele UT												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 455 North Industrial Loop Road						CITY/TOWN TOOELE				STATE UT		ZIP CODE 84074			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	1	0	15	1	0	0	0	0	0	0	0	0	0	0	17
Operatives	2	0	13	0	0	0	0	0	0	0	0	0	0	0	15
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 2023 REPORTING YEAR TOTAL	3	0	34	1	0	0	0	0	0	0	0	0	0	0	38
PRIOR 2022 REPORTING YEAR TOTAL	1	0	17	0	0	0	0	0	0	0	0	0	0	0	18
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17346			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fairbanks AK												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3501 Lathrop Street, Suite E						CITY/TOWN FAIRBANKS				STATE AK		ZIP CODE 99701			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	2	0	0	0	0	0	1	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	1	0	2	0	0	0	0	0	1	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31793			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Romulus MI												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 36555 Ecorse Rd						CITY/TOWN ROMULUS				STATE MI		ZIP CODE 48174			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	1	0	0	0	1	0	0	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Administrative Support Workers	0	1	1	0	0	0	0	0	2	0	0	0	0	0	4
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	19	9	0	0	0	1	0	0	0	0	0	0	31
Laborers and Helpers	1	2	15	18	0	1	0	2	5	2	0	0	0	1	47
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	3	41	28	0	1	0	4	8	2	0	0	0	1	91
PRIOR 2022 REPORTING YEAR TOTAL	4	2	38	21	0	0	0	4	9	4	0	0	0	0	82
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56771			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Grants Pass OR													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2001 NE Foothill Blvd, Suite E9						CITY/TOWN GRANTS PASS				STATE OR		ZIP CODE 97526				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	0	0	0	0	1	0	1	0	0	0	0	0	2	
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 2023 REPORTING YEAR TOTAL	1	0	0	0	0	0	1	0	1	0	0	0	0	0	3	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	1	0	1	0	0	0	0	0	2	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID DB02671			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Phoenix AZ - All Models												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5670 S 32nd St						CITY/TOWN PHOENIX				STATE AZ		ZIP CODE 85040			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31207				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Greenville SC											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1136 White Horse Road								CITY/TOWN GREENVILLE			STATE SC		ZIP CODE 29605		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	5	5	0	0	0	0	0	0	0	0	0	0	11
Laborers and Helpers	2	0	2	0	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	14	5	0	0	0	0	2	0	0	0	0	0	24
PRIOR 2022 REPORTING YEAR TOTAL	2	0	17	4	0	0	0	1	1	0	0	0	0	0	25
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17313				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Seattle WA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11548 Pinehurst Way NE								CITY/TOWN SEATTLE				STATE WA		ZIP CODE 98125	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b>															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	1	0	0	1	0	0	0	0	0	0	4
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	2	0	1	0	0	1	0	0	0	0	0	0	4
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17051				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Vista CA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1265 Distribution Way								CITY/TOWN VISTA				STATE CA		ZIP CODE 92081	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	1	0	0	0	0	0	0	0	0	0	0	0	0	5
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	1	0	0	0	0	0	0	0	0	0	0	0	0	5
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31858			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Mobile AL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5235 Kooiman Road Bldg 1						CITY/TOWN THEODORE				STATE AL		ZIP CODE 36582			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	4	0	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	1	0	0	0	0	3	0	0	0	0	0	8
Laborers and Helpers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	10	1	0	0	0	0	8	0	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	0	0	10	4	0	0	0	0	5	0	0	0	0	0	19
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
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<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID GA29991			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Nashville TN - PYP SS													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2030 Lucas Lane						CITY/TOWN NASHVILLE				STATE TN		ZIP CODE 37207				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
JOB CATEGORIES	Race/Ethnicity															
	Hispanic or Latino		Not Hispanic or Latino													Row Total
			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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	1	0	0	0	0	1	1	0	0	0	0	3	
Administrative Support Workers	4	0	0	0	0	0	0	0	0	1	0	0	0	0	5	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	4	1	6	2	0	0	0	0	0	0	0	0	0	0	13	
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	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>8</b>	<b>1</b>	<b>7</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>22</b>	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>8</b>	<b>0</b>	<b>4</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>15</b>	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)  <div style="border: 1px solid black; height: 100px; width: 100%;"></div>																



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66407				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Watseka IL - Geiger TruckPart											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1489 East Walnut St								CITY/TOWN WATSEKA				STATE IL		ZIP CODE 60970	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	1	0	5	0	0	0	0	0	0	0	0	0	0	0	6
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	13	0	0	0	0	0	2	0	0	0	0	0	16
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	11	0	0	0	0	0	0	0	0	0	0	0	11
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31124			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Jacksonville FL													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4101-1 Bulls Bay Highway						CITY/TOWN JACKSONVILLE				STATE FL		ZIP CODE 32219				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	1	0	0	0	0	3	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	3	1	0	0	0	0	2	0	0	0	0	0	6	
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	2	0	10	7	0	0	0	0	0	1	0	0	0	0	20	
Laborers and Helpers	0	0	3	5	0	0	0	0	0	0	0	0	0	0	8	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
CURRENT 2023 REPORTING YEAR TOTAL	2	0	18	13	0	0	0	0	3	2	0	0	0	0	38	
PRIOR 2022 REPORTING YEAR TOTAL	2	0	14	12	0	0	1	0	4	2	0	0	0	0	35	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FC94154				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Evansville IN - Depot											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2300 Kotter Ave, Suite A								CITY/TOWN EVANSVILLE				STATE IN		ZIP CODE 47715	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66041				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Moosic PA - KAO A&A											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4801 Birney Ave								CITY/TOWN MOOSIC				STATE PA		ZIP CODE 18507	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	1	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	3	0	0	0	0	1	0	0	0	0	0	0	4
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	4	0	0	0	0	1	0	0	0	0	0	0	5
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17016				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Minneapolis MN - APO											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1715 Broadway St NE								CITY/TOWN MINNEAPOLIS				STATE MN		ZIP CODE 55413	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	1	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	2	0	0	0	0	1	0	0	0	0	0	0	3
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID MV45743			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME West Hartford CT - APO												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 141 South St, Unit E						CITY/TOWN WEST HARTFORD				STATE CT		ZIP CODE 06110			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	1	0	0	0	0	0	0	0	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17247			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Stockton CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 27 S Grant Street						CITY/TOWN STOCKTON				STATE CA		ZIP CODE 95202			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	3	0	0	0	0	0	0	0	0	0	0	0	0	6
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 2023 REPORTING YEAR TOTAL	3	3	0	0	0	0	0	0	0	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16466			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Florence SC												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 210 North Irby St						CITY/TOWN FLORENCE				STATE SC		ZIP CODE 29501			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV23581				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Dayton OH - Depot											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1751 Stanley Ave								CITY/TOWN DAYTON				STATE OH		ZIP CODE 45404	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	2	0	0	0	0	0	0	0	0	0	0	5
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	3	2	0	0	0	0	1	0	0	0	0	0	6
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	1	2	0	0	0	0	0	0	0	0	0	0	3
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FC89130			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME West Monroe LA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 208 Franklin Drive						CITY/TOWN WEST MONROE				STATE LA		ZIP CODE 71292			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Operatives	0	0	1	3	0	0	0	0	0	0	0	0	0	0	4
Laborers and Helpers	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	13	4	0	0	0	0	3	0	0	0	0	0	20
PRIOR 2022 REPORTING YEAR TOTAL	1	0	7	4	0	0	0	0	2	0	0	0	0	0	14
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31757				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Pittsburgh PA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 615 ALPHA DRIVE REAR								CITY/TOWN PITTSBURGH				STATE PA		ZIP CODE 15238	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	2	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
Administrative Support Workers	0	0	0	0	1	0	0	0	3	1	0	0	0	0	5
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	10	2	0	0	0	0	0	1	0	0	0	0	13
Laborers and Helpers	0	0	7	2	0	0	1	1	1	0	0	0	0	0	12
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	28	4	1	0	1	1	4	4	0	0	0	0	43
PRIOR 2022 REPORTING YEAR TOTAL	1	0	27	5	1	0	1	1	5	3	0	0	0	0	44
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC22112			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Janesville WI - Star Auto												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2101 Beloit Avenue						CITY/TOWN JANESVILLE				STATE WI		ZIP CODE 53546			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	11	0	0	0	0	0	2	0	0	0	0	0	13
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	9	0	0	0	0	0	2	0	0	0	0	0	11
Administrative Support Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Craft Workers	1	0	11	0	0	0	0	1	0	0	0	0	0	0	13
Operatives	3	0	24	3	0	0	0	1	0	0	0	0	0	0	31
Laborers and Helpers	2	0	6	2	0	0	0	0	0	0	0	0	0	0	10
Service Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
CURRENT 2023 REPORTING YEAR TOTAL	6	0	63	5	0	0	0	2	6	0	0	0	0	0	82
PRIOR 2022 REPORTING YEAR TOTAL	3	0	48	2	0	0	0	1	6	0	0	0	0	0	60
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FA71781			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME San Bernardino CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 434 6Th Street						CITY/TOWN SAN BERNARDINO				STATE CA		ZIP CODE 92410			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 953406551															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	4	1	0	1	0	0	0	0	0	0	0	0	0	0	6
Administrative Support Workers	1	3	1	0	0	0	0	0	1	0	0	0	0	0	6
Craft Workers	2	0	2	0	0	0	0	0	0	0	0	0	0	0	4
Operatives	22	0	1	1	0	0	0	0	0	1	0	0	0	0	25
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	30	4	4	2	0	0	0	0	1	1	0	0	0	0	42
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	10	0	1	3	0	0	0	0	1	2	0	0	0	0	17
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30808			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Spokane WA - KAO Warehouse												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 9212 W. Hallet Rd						CITY/TOWN SPOKANE				STATE WA		ZIP CODE 99004			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	1	0	5	0	0	0	0	1	0	0	0	0	0	0	7
Professionals	0	0	1	0	0	0	0	0	1	1	0	0	0	0	3
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	23	1	1	0	0	1	3	0	0	0	0	0	32
Laborers and Helpers	7	2	35	5	3	3	0	3	6	1	0	0	0	1	66
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	11	3	65	6	4	3	0	5	10	2	0	0	0	1	110
PRIOR 2022 REPORTING YEAR TOTAL	5	2	37	5	2	0	1	5	5	0	0	0	1	1	64
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16631				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Daytona Beach FL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 825 Mason Avenue								CITY/TOWN DAYTONA BEACH				STATE FL		ZIP CODE 32119	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	1	1	0	0	0	0	0	0	0	0	0	0	3
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	1	1	0	0	0	0	0	0	0	0	0	0	3
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV54316				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Gainesville FL - Self Service											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 8910 Nw 13Th Street								CITY/TOWN GAINESVILLE				STATE FL		ZIP CODE 32653	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	1	2	0	0	0	0	3
Administrative Support Workers	1	0	1	1	0	0	0	0	0	0	0	0	0	0	3
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	4	1	0	0	0	0	0	0	0	0	0	0	7
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>3</b>	<b>1</b>	<b>5</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>15</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>7</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>11</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31270				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Springfield MO											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2727 North Oak Grove Ave								CITY/TOWN SPRINGFIELD				STATE MO		ZIP CODE 65803	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	10	1	0	0	0	1	1	0	0	0	0	0	13
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
Laborers and Helpers	0	0	5	1	0	0	0	0	0	0	0	0	0	0	6
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	22	2	0	0	0	1	3	0	0	0	0	0	28
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	22	2	0	0	0	1	1	0	0	0	0	0	26
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16400			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Cumming GA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 306 Tribble Gap Road						CITY/TOWN CUMMING				STATE GA		ZIP CODE 30040			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>						<b>Female</b>						
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16125				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Mishawaka IN											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 945 E 12th Street								CITY/TOWN MISHAWAKA				STATE IN		ZIP CODE 46544	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	1	2	0	0	0	0	0	1	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	0	1	2	0	0	0	0	0	1	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56870			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Saraland AL-KAO LogisSaraland												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 246-A Jacintoport Boulevard						CITY/TOWN SARALAND				STATE AL		ZIP CODE 36571			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	7	2	0	0	0	0	1	0	0	0	0	0	10
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 2023 REPORTING YEAR TOTAL	0	0	10	2	0	0	0	0	1	0	0	0	0	0	13
PRIOR 2022 REPORTING YEAR TOTAL	1	0	11	3	0	0	0	0	1	0	0	0	0	0	16
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31573				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Corpus Christi TX											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2310 Joyce Dr								CITY/TOWN CORPUS CHRISTI				STATE TX		ZIP CODE 78401	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	2	0	1	0	0	0	0	0	0	0	0	0	0	6
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
Laborers and Helpers	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	9	3	1	1	0	0	0	0	0	0	0	0	0	0	14
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	3	1	1	1	0	0	0	0	0	0	0	0	0	0	6
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31510				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Phoenix AZ											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5670 S 32Nd Street								CITY/TOWN PHOENIX			STATE AZ		ZIP CODE 85040		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	3	0	5	0	0	0	0	1	1	0	0	0	0	0	10
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	14	2	22	2	1	1	1	0	0	0	0	0	0	1	44
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	1	7	1	0	1	0	0	2	0	0	0	0	0	15
Laborers and Helpers	20	0	3	0	0	3	1	1	0	0	0	0	0	0	28
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	40	3	38	3	1	5	2	2	4	0	0	0	0	1	99
PRIOR 2022 REPORTING YEAR TOTAL	37	1	36	3	1	8	1	2	2	0	0	0	0	1	92
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30458				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chicago IL Wheel Plant											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5328 W 123rd Pl								CITY/TOWN ALSIP				STATE IL		ZIP CODE 60803	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	10	0	1	4	0	0	0	0	0	0	0	0	0	0	15
Laborers and Helpers	0	0	0	2	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	11	0	2	6	0	0	0	0	0	1	0	0	0	0	20
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	1	0	0	1	0	0	0	0	0	1	0	0	0	0	3
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16380			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chattanooga TN												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6234 Perimeter Dr, Unit G104						CITY/TOWN CHATTANOOGA				STATE TN		ZIP CODE 37416			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID PA92645			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Billings MT												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 926 3rd Ave North						CITY/TOWN BILLINGS				STATE MT		ZIP CODE 59101			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66654			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fort Wayne IN - Self Service												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4820 Moeller Road						CITY/TOWN FORT WAYNE				STATE IN		ZIP CODE 46806			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	1	0	0	0	0	0	2	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	1	1	0	0	0	0	2
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	0	0	3	1	0	0	0	0	2	0	0	0	0	0	6
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 2023 REPORTING YEAR TOTAL	0	1	6	1	0	0	0	0	5	1	0	0	0	0	14
PRIOR 2022 REPORTING YEAR TOTAL	2	0	4	1	0	0	0	0	3	1	0	0	0	0	11
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16932			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Springfield IL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4285 Camp Butler Road						CITY/TOWN SPRINGFIELD				STATE IL		ZIP CODE 62707			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA31044				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Exeter PA - KAO Operations											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 44 Tunkhannock Ave								CITY/TOWN EXETER				STATE PA		ZIP CODE 18643	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	20	0	0	0	0	0	3	0	0	0	0	0	23
First/Mid-Level Officials and Managers	0	0	28	0	0	0	0	0	15	0	0	0	0	0	43
Professionals	0	0	41	1	0	0	0	0	34	1	0	0	0	1	78
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	1	20	0	0	0	0	0	13	0	0	0	0	0	35
Administrative Support Workers	0	0	11	0	0	0	0	0	30	1	0	0	0	0	42
Craft Workers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Operatives	1	0	41	1	0	0	0	1	0	0	0	0	0	0	44
Laborers and Helpers	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
Service Workers	0	4	6	0	0	0	0	0	21	1	0	0	0	0	32
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	2	5	178	2	0	0	0	1	116	3	0	0	0	1	308
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	122	2	0	0	0	1	42	1	0	0	0	0	168
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31023				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Dothan AL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2700 Reeves Street								CITY/TOWN DOTHAN				STATE AL		ZIP CODE 36303	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	3	1	0	0	0	0	0	0	0	0	0	0	4
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)  <div style="border: 1px solid black; height: 100px; width: 100%;"></div>															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP38545			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Austin TX - AFAS												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 7900 South Congress Avenue						CITY/TOWN AUSTIN				STATE TX		ZIP CODE 78745			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	2	0	0	0	0	0	0	0	0	1	0	0	0	0	3
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	0	2	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	3	0	2	2	0	0	0	1	0	0	0	0	0	0	8
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 2023 REPORTING YEAR TOTAL	6	1	4	5	0	0	0	1	1	0	0	0	0	0	18
PRIOR 2022 REPORTING YEAR TOTAL	1	0	2	1	0	0	0	0	1	1	0	0	0	0	6
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID CI07050			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Manchester TN												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3055 Hillsboro Highway						CITY/TOWN MANCHESTER				STATE TN		ZIP CODE 37355			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b>															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	11	0	0	0	0	0	1	0	0	0	0	0	12
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	3	0	4	0	0	0	0	0	0	0	0	0	0	0	7
Operatives	1	0	38	1	0	0	0	0	1	0	0	0	0	0	41
Laborers and Helpers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>4</b>	<b>0</b>	<b>64</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>72</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>3</b>	<b>0</b>	<b>46</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>54</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID HF14825				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Mt Sterling KY - Cockrell											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4631 Camargo Rd								CITY/TOWN MT. STERLING				STATE KY		ZIP CODE 40353	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Operatives	0	0	13	0	0	0	1	0	0	0	0	0	0	0	14
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 2023 REPORTING YEAR TOTAL	0	0	19	0	0	0	1	0	0	0	0	0	0	0	20
PRIOR 2022 REPORTING YEAR TOTAL	0	0	17	0	0	0	1	0	0	0	0	0	0	0	18
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31692			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tampa FL - Coast to Coast												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3104 Cherry Palm Dr, Suite 260						CITY/TOWN TAMPA				STATE FL		ZIP CODE 33619			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	2	0	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	1	0	3	0	0	0	0	0	2	0	0	0	0	0	6
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16158			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chicago IL - APO												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4500 W Chicago Ave						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60651			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b>															
<input checked="" type="checkbox"/> <b>YES</b> (Employer Is Eligible to File) <input type="checkbox"/> <b>NO</b> (Employer Is Not Eligible to File) <input type="checkbox"/> <b>EMPLOYER NO LONGER IN BUSINESS</b>															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> <b>YES</b> (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> <b>YES</b> (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> <b>YES</b> (Headquarters is Federal Contractor) <input type="checkbox"/> <b>YES</b> (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> <b>YES</b> (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	2	1	0	0	0	0	0	0	0	0	0	0	0	3
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID HF15068				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Newnan GA - GPS											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 32 Dart Road								CITY/TOWN NEWNAN				STATE GA		ZIP CODE 30265	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	6	0	0	0	0	0	1	0	0	0	0	0	7
Professionals	0	0	6	0	0	0	0	1	0	0	0	0	0	0	7
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	1	1	0	0	0	0	2
Administrative Support Workers	0	0	5	1	0	0	0	0	1	0	0	0	0	0	7
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	1	23	44	1	0	0	2	6	11	0	0	0	1	91
Laborers and Helpers	0	0	6	12	0	0	0	0	5	6	0	0	0	0	29
Service Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>1</b>	<b>46</b>	<b>57</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>16</b>	<b>18</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>145</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>0</b>	<b>0</b>	<b>11</b>	<b>12</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>34</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31151			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Plover WI													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3100 Patton Drive						CITY/TOWN PLOVER				STATE WI		ZIP CODE 54467				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3	
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30713				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Omaha NE - Midwest											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 8901 Irvington Rd								CITY/TOWN OMAHA				STATE NE		ZIP CODE 68122	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Operatives	1	0	7	0	0	0	0	1	0	0	0	0	0	0	9
Laborers and Helpers	0	0	1	3	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	16	3	0	0	0	1	0	0	0	0	0	0	21
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	14	1	0	0	0	1	0	0	0	0	0	0	16
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC21584				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Redding CA - Northern CA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2850 Viking Way								CITY/TOWN REDDING				STATE CA		ZIP CODE 96003	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 364261871															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	12	0	0	0	2	0	0	0	0	0	0	0	15
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	12	0	1	0	1	1	0	0	0	0	0	0	15
Administrative Support Workers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	2	0	24	2	1	2	0	3	0	0	0	0	0	0	34
Operatives	5	0	37	0	2	0	2	1	1	0	0	0	0	0	48
Laborers and Helpers	0	0	8	0	0	1	0	0	0	0	0	0	0	0	9
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>8</b>	<b>0</b>	<b>93</b>	<b>3</b>	<b>4</b>	<b>3</b>	<b>5</b>	<b>5</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>122</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>5</b>	<b>0</b>	<b>74</b>	<b>2</b>	<b>2</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>95</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID BA27813			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Hutchins TX - North TX												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 904 I-45 South						CITY/TOWN HUTCHINS				STATE TX		ZIP CODE 75141			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	4	0	0	0	0	0	1	0	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	11	1	19	0	1	0	0	1	2	0	0	0	0	0	35
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	1	0	1	1	0	0	0	0	0	0	0	0	0	0	3
Laborers and Helpers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>13</b>	<b>3</b>	<b>25</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>47</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>25</b>	<b>2</b>	<b>31</b>	<b>15</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>81</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JV43364			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Huntington IN												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1870 Riverfork Drive						CITY/TOWN HUNTINGTON				STATE IN		ZIP CODE 46750			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 551114 - Corporate, Subsidiary, and Regional Managing Offices															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	1	0	0	0	0	0	0	1	0	0	0	0	2
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	1	0	0	0	0	0	0	1	0	0	0	0	2
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66241				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Richmond IN - KAO Logistics											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 910 West Industries Rd.								CITY/TOWN RICHMOND				STATE IN		ZIP CODE 47374	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	27	1	1	0	0	0	0	0	0	0	0	0	29
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	29	1	1	0	0	0	0	0	0	0	0	0	31
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	30	1	1	0	0	0	0	0	0	0	0	0	32
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17368			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Houston TX - Earl Owens												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2700 Greens Road Building I, Suite 100						CITY/TOWN HOUSTON				STATE TX		ZIP CODE 77032			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	0	6	0	0	0	0	0	0	0	0	0	0	8
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 2023 REPORTING YEAR TOTAL	2	0	0	6	0	0	0	0	0	0	0	0	0	0	8
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC20981			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Melbourne FL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 7298 Waelti Drive						CITY/TOWN MELBOURNE				STATE FL		ZIP CODE 32940			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	1	1	0	0	0	0	0	7
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	5	0	0	0	0	0	0	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	10	1	0	0	0	0	0	0	0	0	0	0	11
Operatives	3	0	16	8	0	1	0	1	0	0	0	0	0	0	29
Laborers and Helpers	1	0	5	1	0	0	0	0	0	1	0	0	0	0	8
Service Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
CURRENT 2023 REPORTING YEAR TOTAL	5	0	42	10	0	1	0	2	1	1	0	0	0	0	62
PRIOR 2022 REPORTING YEAR TOTAL	1	0	32	9	1	1	0	0	1	1	0	0	0	0	46
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID DP29636			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Fridley MN												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 60 51st Way NE						CITY/TOWN FRIDLEY			STATE MN		ZIP CODE 55421				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	1	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	13	0	0	0	0	0	3	0	0	0	0	0	16
Administrative Support Workers	0	0	0	0	0	0	0	0	3	0	0	0	1	1	5
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	13	0	1	0	1	0	1	0	0	0	0	0	18
Laborers and Helpers	2	0	16	5	0	0	0	0	0	0	0	0	0	0	23
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	4	0	44	5	1	0	1	1	7	0	0	0	1	1	65
PRIOR 2022 REPORTING YEAR TOTAL	4	0	47	2	0	0	1	3	4	0	0	0	1	0	62
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17335				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Anchorage AK											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2375 E 63rd Avenue								CITY/TOWN ANCHORAGE				STATE AK		ZIP CODE 99507	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	1	1	0	0	0	0	0	4
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	2	0	0	0	0	1	1	0	0	0	0	0	4
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30577			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Phoenix AZ - KAO Logistics													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3949 W Van Buren St Ste A						CITY/TOWN PHOENIX				STATE AZ		ZIP CODE 85009				
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
JOB CATEGORIES	Race/Ethnicity															
	Hispanic or Latino		Not Hispanic or Latino													Row Total
			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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	2	0	2	0	0	0	0	0	0	0	0	0	0	0	4	
Professionals	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	6	0	0	0	0	0	0	0	0	0	0	0	0	0	6	
Laborers and Helpers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	11	1	2	0	0	0	0	0	0	1	0	0	0	0	15	
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	10	1	2	0	0	0	0	0	0	1	0	0	0	0	14	
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16521			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Roanoke VA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1930 Salem Ave SW						CITY/TOWN ROANOKE				STATE VA		ZIP CODE 24016			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	0	1	0	0	0	0	2	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	1	0	0	1	0	0	0	0	2	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GN78700			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Cincinnati OH - PYP												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2040 East Kemper Road						CITY/TOWN CINCINNATI				STATE OH		ZIP CODE 45241			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	0	0	1	0	0	0	0	1	0	0	0	0	0	5
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	5	1	0	0	0	0	0	0	0	0	0	0	0	0	6
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 2023 REPORTING YEAR TOTAL	11	1	1	1	0	0	0	0	1	0	0	0	0	0	15
PRIOR 2022 REPORTING YEAR TOTAL	4	1	0	0	0	0	0	0	1	0	0	0	0	0	6
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30401				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Ft. Myers FL - US21												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5001 State Road 82								CITY/TOWN FORT MYERS				STATE FL		ZIP CODE 33905		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	
Craft Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
Operatives	1	0	8	1	0	0	0	0	0	0	0	0	0	0	10	
Laborers and Helpers	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
CURRENT 2023 REPORTING YEAR TOTAL	4	0	13	1	0	0	0	0	0	0	0	0	0	1	19	
PRIOR 2022 REPORTING YEAR TOTAL	4	0	9	1	0	0	0	0	0	0	0	0	0	1	15	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30404			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Grand Prairie TX - Dallas												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1102 West Carrier Pkwy, Suite 300						CITY/TOWN GRAND PRAIRIE				STATE TX		ZIP CODE 75050			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	23	3	4	13	0	0	0	3	0	0	0	0	0	0	46
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 2023 REPORTING YEAR TOTAL	25	3	5	13	0	0	0	3	0	0	0	0	0	0	49
PRIOR 2022 REPORTING YEAR TOTAL	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31546			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Schertz TX												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 17745 Lookout Road, Ste 100								CITY/TOWN SCHERTZ			STATE TX		ZIP CODE 78154		
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	1	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	5	2	4	8	0	0	0	1	1	1	1	0	0	0	23
Administrative Support Workers	1	2	0	0	0	0	0	0	0	0	0	0	0	0	3
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	8	0	0	1	0	0	0	0	1	0	0	0	0	0	10
Laborers and Helpers	7	1	1	3	0	0	0	0	0	0	0	0	0	0	12
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>21</b>	<b>5</b>	<b>7</b>	<b>13</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>52</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>15</b>	<b>2</b>	<b>7</b>	<b>10</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>39</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31171				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME North Charleston SC											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4550 Rivers Avenue								CITY/TOWN NORTH CHARLESTON				STATE SC		ZIP CODE 29405	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	1	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	2	1	0	0	0	0	0	0	0	0	0	0	4
Laborers and Helpers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	4	1	0	0	0	0	4	0	0	0	0	0	10
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	1	0	4	1	0	0	0	0	3	0	0	0	0	0	9
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16103				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Burton MI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4189 Fenton Rd								CITY/TOWN BURTON				STATE MI		ZIP CODE 48529	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GN78828			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Lynchburg VA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1142 Owen Dr						CITY/TOWN GOODE				STATE VA		ZIP CODE 24556			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	2	0	0	0	0	0	1	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	0	0	3	2	0	0	0	0	0	1	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	1	0	0	0	0	0	0	4
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31804				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Lansing MI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1149 S Pennsylvania Avenue								CITY/TOWN LANSING			STATE MI		ZIP CODE 48912		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	3	2	0	0	1	0	0	0	0	0	0	0	7
Laborers and Helpers	1	0	2	1	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	9	3	0	0	1	0	0	0	0	0	0	0	15
PRIOR 2022 REPORTING YEAR TOTAL	2	0	8	5	0	0	0	0	0	0	0	0	0	0	15
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV52116			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME West Palm Beach FL - ABC												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 451 Benoist Farms Road						CITY/TOWN WEST PALM BEACH				STATE FL		ZIP CODE 33411			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b>															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	1	0	0	0	0	0	1	0	0	0	0	0	0	3
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	1	1	1	0	0	0	0	3	0	0	0	0	0	7
Administrative Support Workers	0	3	0	0	0	0	0	0	0	0	0	0	0	0	3
Craft Workers	1	0	0	2	0	0	0	0	0	0	0	0	0	0	3
Operatives	5	0	2	5	0	0	0	0	0	0	0	0	0	0	12
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>8</b>	<b>5</b>	<b>4</b>	<b>8</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>29</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>6</b>	<b>3</b>	<b>3</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>22</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP13832				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Hutchins TX Wheel Plant											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 415 North I45								CITY/TOWN HUTCHINS				STATE TX		ZIP CODE 75141	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 339999 - All Other Miscellaneous Manufacturing															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	21	0	3	3	0	0	0	0	0	0	0	0	0	0	27
Laborers and Helpers	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>23</b>	<b>1</b>	<b>5</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>32</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FC95016				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME North Platte NE											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2415 E 4Th St Suite 3								CITY/TOWN NORTH PLATTE				STATE NE		ZIP CODE 69101	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	5	0	0	0	0	0	2	0	0	0	0	0	7
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	4	0	0	0	0	0	2	0	0	0	0	0	6
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID CN97221			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Springfield MO - PROformance												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2720 North Airport Commerce Ave						CITY/TOWN SPRINGFIELD				STATE MO		ZIP CODE 65803			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 333618 - Other Engine Equipment Manufacturing															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	0	1	6	0	0	0	0	0	2	0	0	0	0	0	9
Professionals	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	1	0	0	0	0	0	4	0	0	0	0	0	5
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	1	95	9	1	0	2	7	19	2	1	0	0	1	142
Laborers and Helpers	0	0	13	1	1	0	0	0	4	0	0	0	0	0	19
Service Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	2	119	10	2	0	2	7	30	2	1	0	0	1	180
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	2	16	0	0	0	0	0	4	0	0	0	0	0	22
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)  <div style="border: 1px solid black; height: 150px; margin-top: 10px;"></div>															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31445				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Knoxville TN											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3475 North Bend Circle								CITY/TOWN ALCOA				STATE TN		ZIP CODE 37701	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	9	0	0	0	0	0	0	0	0	0	0	0	9
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
CURRENT 2023 REPORTING YEAR TOTAL	0	0	17	0	0	0	0	0	1	0	0	0	0	0	18
PRIOR 2022 REPORTING YEAR TOTAL	0	0	15	1	0	0	0	0	1	0	0	0	0	0	17
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16444			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME North Charleston SC												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 7275 Cross County Rd, Suite A						CITY/TOWN NORTH CHARLESTON				STATE SC		ZIP CODE 29418			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	1	0	0	0	0	0	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	0	0	3	1	0	0	0	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FM66173			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Peckville PA - KAO A&A												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1537 Main St						CITY/TOWN PECKVILLE				STATE PA		ZIP CODE 18452			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
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 2023 REPORTING YEAR TOTAL	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EW17532				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Billings MT - KC Montana											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 10148 Rudio Road								CITY/TOWN BILLINGS				STATE MT		ZIP CODE 59101	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17005			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Elitek - Omaha												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1945 SW 5th St						CITY/TOWN LINCOLN				STATE NE		ZIP CODE 68522			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12102023 - 12232023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID HF16487			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Glen Burnie MD - ERS Cool Sys												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 113 Holsum Way						CITY/TOWN GLEN BURNIE				STATE MD		ZIP CODE 21060			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	4	1	1	0	0	0	0	0	0	0	0	0	6
Operatives	0	0	1	0	0	0	0	1	0	0	0	0	0	0	2
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 2023 REPORTING YEAR TOTAL	0	0	6	1	1	0	0	1	0	0	0	0	0	0	9
PRIOR 2022 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	2	1	0	0	0	0	0	8
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16961			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Midland TX												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2308 W Front						CITY/TOWN MIDLAND				STATE TX		ZIP CODE 79701			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2
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 2023 REPORTING YEAR TOTAL	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17194			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bakersfield CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2530 Chester Avenue						CITY/TOWN BAKERSFIELD				STATE CA		ZIP CODE 93301			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	2	0	0	0	0	0	0	0	0	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	3	2	0	0	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GN78781			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Portsmouth OH - Depot												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 344 Sperry Rd.						CITY/TOWN SOUTH PORTSMOUTH				STATE KY		ZIP CODE 41174			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31326			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Buffalo NY												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2871 Broadway St Suite 500								CITY/TOWN BUFFALO			STATE NY		ZIP CODE 14227		
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	8	0	0	0	0	0	3	1	0	0	0	0	12
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	7	5	0	0	0	0	2	0	0	0	0	0	14
Laborers and Helpers	1	0	7	7	0	0	0	1	0	0	0	0	0	0	16
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	25	12	0	0	0	1	6	1	0	0	0	0	46
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	2	0	26	4	0	0	0	0	9	0	0	0	0	0	41
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID HF15035				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Ontario CA - California Core											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 405 S. Wanamaker Ave.								CITY/TOWN ONTARIO				STATE CA		ZIP CODE 91761	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	1	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	0	1	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	2	0	0	3	0	0	0	0	0	0	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	0	1	4	0	0	0	0	1	0	0	0	0	0	10
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	1	0	1	0	0	0	0	0	1	0	0	0	0	0	3
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID DP29473			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tampa FL - Keystone Largo												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 9862 Currie Davis Dr						CITY/TOWN TAMPA				STATE FL		ZIP CODE 33619			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	2	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	4	0	0	0	0	0	2	0	0	0	0	0	7
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	7	1	4	8	0	0	0	1	0	0	0	0	0	0	21
Laborers and Helpers	7	0	0	1	0	0	0	0	0	0	0	0	0	0	8
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	16	2	10	9	0	0	0	1	3	0	0	0	0	0	41
PRIOR 2022 REPORTING YEAR TOTAL	13	0	13	8	0	0	0	1	3	0	0	0	0	0	38
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EP17975				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Janesville WI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2101 Beloit Ave								CITY/TOWN JANESVILLE			STATE WI		ZIP CODE 53546		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16391			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Norcross GA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6325 Regency Parkway						CITY/TOWN NORCROSS				STATE GA		ZIP CODE 30071			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	2	0	1	0	0	0	0	0	0	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID HF15343			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Houston TX - APO													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1020 Northville Street						CITY/TOWN HOUSTON				STATE TX		ZIP CODE 77038				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY																
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)																
Unique Entity ID (UEI): Not Applicable																
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)																
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)																
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Laborers and Helpers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
CURRENT 2023 REPORTING YEAR TOTAL	2	1	0	0	0	0	0	0	0	0	0	0	0	0	3	
PRIOR 2022 REPORTING YEAR TOTAL	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
8																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT																
<b>SECTION B – EMPLOYER IDENTIFICATION</b>																
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661		
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID GN78873				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Brownstown MI - KAO Warehouse												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 17950 Dix Toledo Highway								CITY/TOWN BROWNSTOWN				STATE MI		ZIP CODE 48193		
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557																
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>																
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	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	0	0	6	0	0	0	0	1	1	0	0	0	0	0	0	8
Professionals	0	0	2	0	0	0	0	0	0	1	0	0	0	0	0	3
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	0	23	1	0	0	1	1	1	0	0	0	0	0	0	29
Laborers and Helpers	2	0	22	27	0	0	0	2	8	8	0	0	0	0	0	69
Service Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	0	54	28	0	0	1	4	12	9	0	0	0	0	0	112
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	2	0	22	5	0	0	0	1	4	1	0	0	0	0	0	35
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023																
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)																

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30372				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Grand Rapids MI - SS											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4676 Division Street								CITY/TOWN WAYLAND				STATE MI		ZIP CODE 49348	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	0	2	0	0	0	0	0	1	0	0	0	0	0	5
Administrative Support Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	6	0	0	0	0	0	2	0	0	0	0	0	9
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>3</b>	<b>0</b>	<b>11</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>18</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>1</b>	<b>0</b>	<b>10</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>14</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16422			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Marietta GA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 503 Commerce Park Drive SE, Suite G						CITY/TOWN MARIETTA				STATE GA		ZIP CODE 30060			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	1	0	0	0	0	0	1	0	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	1	0	1	0	0	0	0	0	1	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16554				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tallahassee FL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1660-3 Norman Park Dr								CITY/TOWN TALLAHASSEE				STATE FL		ZIP CODE 32304	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31683				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME San Diego CA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 7411 Goen Pl, Suite B								CITY/TOWN SAN DIEGO				STATE CA		ZIP CODE 92120	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	1	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	0	1	0	1	0	0	0	1	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	7	0	1	1	0	3	0	0	0	0	0	0	0	0	12
Laborers and Helpers	5	0	2	1	0	0	0	1	0	0	0	0	0	0	9
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	16	0	4	2	2	3	0	1	1	0	0	0	0	0	29
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	12	0	5	0	7	2	0	2	1	0	0	0	0	0	29
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16213			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Grand Rapids MI												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4259 40th St SE						CITY/TOWN GRAND RAPIDS				STATE MI		ZIP CODE 49512			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	8	0	1	0	0	0	1	0	0	0	0	0	11
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 2023 REPORTING YEAR TOTAL	1	0	9	0	1	0	0	0	2	0	0	0	0	0	13
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661		
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17172				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME San Leandro CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1991 Burroughs Ave								CITY/TOWN SAN LEANDRO				STATE CA		ZIP CODE 94577		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	1	0	1	0	0	1	0	0	0	0	0	0	0	3	
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 2023 REPORTING YEAR TOTAL	0	1	0	1	0	0	1	0	0	0	0	0	0	0	3	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16477			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Statesville NC												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1809 W Front St						CITY/TOWN STATESVILLE				STATE NC		ZIP CODE 28677			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16712			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Miami FL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 10430 SW 187th St						CITY/TOWN MIAMI				STATE FL		ZIP CODE 33157			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	1	0	0	0	0	0	0	0	0	0	0	0	0	4
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	3	1	0	0	0	0	0	0	0	0	0	0	0	0	4
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO			STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30027			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bloomington CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 221 East Santa Ana Ave						CITY/TOWN BLOOMINGTON			STATE CA		ZIP CODE 92316				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 953072886															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	1	0	0	0	0	0	0	0	0	0	0	0	0	4
Administrative Support Workers	0	3	0	0	0	0	0	0	1	0	0	0	0	1	5
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	10	0	2	1	1	0	0	0	0	0	0	0	0	0	14
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 2023 REPORTING YEAR TOTAL	13	5	3	1	1	0	0	0	1	0	0	0	0	1	25
PRIOR 2022 REPORTING YEAR TOTAL	11	1	3	2	0	0	1	1	0	0	0	0	0	0	19
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17293				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Santa Barbara CA											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 137 S Quarantina Street								CITY/TOWN SANTA BARBARA				STATE CA		ZIP CODE 93103	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	1	0	0	0	0	0	0	0	0	0	0	0	4
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	3	0	1	0	0	0	0	0	0	0	0	0	0	0	4
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EV54051				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Mt. Airy MD											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3923 Twin Arch Road								CITY/TOWN MOUNT AIRY				STATE MD		ZIP CODE 21771	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	1	2
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	4	0	5	1	0	0	0	0	1	0	0	0	0	0	11
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	0	8	1	0	0	0	0	4	0	0	0	0	1	18
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	2	0	4	1	0	0	0	0	1	0	0	0	0	0	8
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EW17202			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Stockton CA - ACME												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1016 South Wilson Way						CITY/TOWN STOCKTON				STATE CA		ZIP CODE 95205			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952907390															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>						<b>Female</b>						
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	1	3	0	0	0	1	0	0	0	0	0	0	0	6
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	3	0	1	0	0	0	0	0	0	0	0	0	5
Administrative Support Workers	1	1	0	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	7	0	2	0	0	0	0	0	0	0	0	0	0	0	9
Operatives	3	0	0	1	1	0	0	1	0	0	0	0	0	0	6
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>14</b>	<b>2</b>	<b>8</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>29</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>8</b>	<b>1</b>	<b>10</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>22</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EK02415				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Crystal River FL - Service											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4950 West Norvell Bryant Hwy								CITY/TOWN CRYSTAL RIVER				STATE FL		ZIP CODE 34429	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	6	0	0	0	0	0	1	0	0	0	0	0	7
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															



<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56694				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chicago IL -South Chicago PYP											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3130 S St Louis Ave								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60623	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Professionals	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	2	4	0	0	0	0	0	0	0	2	0	0	0	0	8
Administrative Support Workers	0	2	1	0	0	0	0	0	0	0	0	0	0	0	3
Craft Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	13	0	2	2	0	0	0	0	1	0	0	0	0	0	18
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	16	7	4	2	0	0	0	0	2	2	0	0	0	0	33
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	7	4	1	0	0	0	0	0	1	2	0	0	0	0	15
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JB60381			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Eastvale CA - KAO Warehouse												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 15640 Cantu-Galleano Ranch Road						CITY/TOWN EASTVALE				STATE CA		ZIP CODE 91752			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
First/Mid-Level Officials and Managers	2	0	5	0	1	0	0	0	0	2	0	0	0	0	10
Professionals	1	1	3	0	0	0	0	0	0	0	0	0	0	0	5
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	2	4	0	0	0	0	1	1	0	0	0	1	0	10
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	23	1	9	2	1	0	0	1	1	0	0	0	0	0	38
Laborers and Helpers	42	14	8	1	4	0	1	2	7	0	1	0	0	0	80
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	69	18	31	3	6	0	1	4	9	2	1	0	1	0	145
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	24	1	15	2	3	0	0	0	2	0	0	0	0	0	47
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30363				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Southwick MA - Route 16											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 58 Sam West Road								CITY/TOWN SOUTHWICK				STATE MA		ZIP CODE 01001	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	1	0	1	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	1	0	1	0	0	0	0	0	0	0	0	0	2
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31252				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tucson AZ											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6050 South Country Club Road								CITY/TOWN TUCSON				STATE AZ		ZIP CODE 85706	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	1	0	0	0	0	1	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	4	0	0	0	0	0	0	0	0	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	0	0	0	0	1	0	0	0	0	0	0	4
Laborers and Helpers	1	2	0	0	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	6	2	4	0	0	0	0	2	0	0	0	0	0	0	14
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	6	1	4	0	0	0	0	1	0	0	0	0	0	0	12
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JT56834			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Elitek - DFW												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1910 Crown Dr						CITY/TOWN FARMERS BRANCH				STATE TX		ZIP CODE 75234			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
First/Mid-Level Officials and Managers	2	0	1	1	0	0	0	0	3	1	0	0	0	0	8
Professionals	0	0	5	0	0	0	0	0	1	1	0	0	0	0	7
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	1	0	0	0	0	0	0	1	1	0	0	0	0	3
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	2	0	1	0	0	0	0	0	0	0	0	0	6
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	1	1	1	0	0	0	0	0	1	3	0	0	0	0	7
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>7</b>	<b>2</b>	<b>11</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>6</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>34</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>3</b>	<b>1</b>	<b>7</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>18</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12102023 - 12232023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30170				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Bangor ME											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 345 Target Industrial Circle								CITY/TOWN BANGOR				STATE ME		ZIP CODE 04401	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30895				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Transmetco - Huntington IN											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1750 East Riverfork Drive								CITY/TOWN HUNTINGTON				STATE IN		ZIP CODE 46750	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 339999 - All Other Miscellaneous Manufacturing															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	31	1	0	0	0	0	3	0	0	0	0	0	35
Laborers and Helpers	0	0	9	0	0	0	0	0	1	0	0	0	0	0	10
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	46	1	0	0	0	0	4	0	0	0	0	0	51
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID MV45752			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Columbus OH - APO												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1600 Integrity Drive						CITY/TOWN COLUMBUS				STATE OH		ZIP CODE 43209			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	0	0	0	0	0	1	1	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	1	1	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID BZ78962			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Houston TX - Northville - SS												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1100 Northville Road						CITY/TOWN HOUSTON				STATE TX		ZIP CODE 77038			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	2	1	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	5	4	0	0	0	0	0	0	0	0	0	0	0	0	9
Administrative Support Workers	1	3	0	0	0	0	0	0	0	0	0	0	1	0	5
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	11	0	3	6	0	0	0	0	0	0	0	0	0	0	20
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	4	0	0	0	0	0	0	0	3	0	0	0	0	7
CURRENT 2023 REPORTING YEAR TOTAL	18	14	4	6	0	0	0	0	0	3	0	0	1	0	46
PRIOR 2022 REPORTING YEAR TOTAL	8	4	4	2	0	0	0	0	0	0	0	0	0	0	18
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID FA74017			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Northfield MN - Viking Auto												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 26548 Chippendale Ave West						CITY/TOWN NORTHFIELD				STATE MN		ZIP CODE 55057			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	6	0	0	1	0	0	0	0	0	0	0	0	7
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	3	0	0	0	0	0	2	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	4	0	8	0	0	0	0	0	0	0	0	0	0	0	12
Operatives	0	0	20	1	0	0	1	2	2	0	0	0	0	0	26
Laborers and Helpers	1	0	5	1	1	0	0	2	0	0	0	0	0	0	10
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	5	1	42	2	1	1	1	4	5	0	0	0	0	0	62
PRIOR 2022 REPORTING YEAR TOTAL	2	0	38	4	0	0	1	2	6	0	0	0	0	0	53
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16653			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Largo FL												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6460 126TH Ave N						CITY/TOWN LARGO				STATE FL		ZIP CODE 33771			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	3	0	0	0	0	0	1	0	0	0	0	1	5
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 2023 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	1	0	0	0	0	1	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GN78736			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Adelanto CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11200 Alden Road						CITY/TOWN ADELANTO				STATE CA		ZIP CODE 92301			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 364261867															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	7	0	1	2	0	0	0	0	0	0	0	0	0	0	10
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	14	0	3	3	0	0	0	4	0	0	0	0	0	0	24
Operatives	32	0	5	3	1	0	0	5	1	0	0	0	0	0	47
Laborers and Helpers	3	0	0	2	0	0	0	0	0	0	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	56	1	9	10	1	0	0	9	1	0	0	0	0	0	87
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	37	1	7	2	0	0	0	7	0	0	0	0	0	0	54
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30511				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Toledo OH - Goody's											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6180 Hagman Rd								CITY/TOWN TOLEDO				STATE OH		ZIP CODE 43612	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	4	0	0	0	0	0	8
Professionals	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	1	0	17	1	0	0	0	0	0	0	0	0	0	0	19
Operatives	0	0	2	1	0	0	0	0	1	0	0	0	0	0	4
Laborers and Helpers	0	0	2	1	0	0	1	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>31</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>6</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>43</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>1</b>	<b>0</b>	<b>15</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>19</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17148			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Garden Grove CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 13772 Harbor Blvd						CITY/TOWN GARDEN GROVE				STATE CA		ZIP CODE 92843			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	5	3	0	0	0	0	0	1	0	0	0	0	0	0	9
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 2023 REPORTING YEAR TOTAL	5	3	0	0	0	0	0	1	0	0	0	0	0	0	9
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30045			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Oceanside CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2315 Carpenter Rd						CITY/TOWN OCEANSIDE				STATE CA		ZIP CODE 92054			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 953072886															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b>															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>						<b>Female</b>						
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	6	0	1	0	0	0	0	0	0	0	0	0	0	0	7
Administrative Support Workers	1	3	0	0	0	0	0	0	0	0	0	0	0	0	4
Craft Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Operatives	11	1	0	0	0	0	0	0	0	0	0	0	0	0	12
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>18</b>	<b>4</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>24</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>8</b>	<b>3</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>11</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16490				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Charlotte NC											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2732 Interstate St, Suite B								CITY/TOWN CHARLOTTE				STATE NC		ZIP CODE 28208	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	2	0	0	0	0	1	1	0	0	0	0	5
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	0	0	1	2	0	0	0	0	1	1	0	0	0	0	5
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17183			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Dublin CA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6805 Sierra Court, Suite E						CITY/TOWN DUBLIN				STATE CA		ZIP CODE 94568				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	1	3	0	0	0	0	0	0	0	0	0	0	0	4	
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 2023 REPORTING YEAR TOTAL	0	1	3	0	0	0	0	0	0	0	0	0	0	0	4	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16235				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Northern Light Refinishing MI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 157 West Beech Street								CITY/TOWN CEDAR SPRINGS				STATE MI		ZIP CODE 49319	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 339999 - All Other Miscellaneous 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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	1	18	0	0	0	0	0	5	0	1	0	0	1	26
Laborers and Helpers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	1	19	0	0	0	1	0	8	0	1	0	0	1	31
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID HF25605				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Kennewick WA - Tri Cities											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 501 N Quay Street, Suite B-106								CITY/TOWN KENNEWICK				STATE WA		ZIP CODE 99336	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	2	0	0	0	0	0	0	0	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	3	0	3	0	0	0	0	0	0	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	4	0	1	0	0	0	0	0	0	0	0	0	0	0	5
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA49991			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Elkhart IN - Stag Pkwy												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 401 Northpointe Blvd						CITY/TOWN ELKHART				STATE IN		ZIP CODE 46514			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	3	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB31923				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Louisville KY											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2701 Progressive Blvd								CITY/TOWN SELLERSBURG				STATE IN		ZIP CODE 47172	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable  <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Operatives	0	0	11	1	0	0	0	2	1	0	0	0	0	0	15
Laborers and Helpers	1	0	5	0	0	0	0	0	0	0	0	0	0	0	6
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	1	0	26	1	0	0	0	2	1	0	0	0	0	0	31
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	0	0	26	1	0	0	0	2	0	0	0	0	0	0	29
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID DY29800			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Sun Valley CA - PYP												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 9128 Tujunga Street						CITY/TOWN SUN VALLEY				STATE CA		ZIP CODE 91352			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 953406551															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	2	0	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	7	4	2	0	0	0	0	0	0	0	0	0	0	1	14
Administrative Support Workers	0	5	0	0	0	0	0	0	0	0	0	0	0	0	5
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	27	0	4	1	0	0	0	2	0	0	0	0	0	0	34
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	35	11	6	1	0	0	0	2	0	0	0	0	0	1	56
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	22	9	2	1	0	0	0	0	0	0	0	0	0	1	35
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16972			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Las Vegas NV												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3140 Venture Drive						CITY/TOWN LAS VEGAS				STATE NV		ZIP CODE 89101			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	0	3	0	0	0	0	0	0	0	0	0	0	0	7
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 2023 REPORTING YEAR TOTAL	4	0	3	0	0	0	0	0	0	0	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID JB60527			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Philadelphia PA-APO												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3250 S 76th Street, Suite 500						CITY/TOWN PHILADELPHIA				STATE PA		ZIP CODE 19153			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	2	0	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	1	0	1	1	0	0	0	0	0	0	0	0	0	0	3
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	2	1	1	0	0	0	0	0	0	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	1	2	0	1	0	0	0	0	0	0	0	0	0	0	4
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026						
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT																
SECTION B – EMPLOYER IDENTIFICATION																
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE													
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661				
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)																
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16543			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Augusta GA													
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1437 Reynolds Street						CITY/TOWN AUGUSTA				STATE GA		ZIP CODE 30901				
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557																
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS																
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)																
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers																
SECTION H – WORKFORCE DEMOGRAPHIC DATA																
JOB CATEGORIES	Race/Ethnicity															
	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	Row Total	
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Operatives	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6	
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 2023 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6	
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023																
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)																
9																

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16914			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Jefferson City MO												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1501A Legion Lane						CITY/TOWN JEFFERSON CITY				STATE MO		ZIP CODE 65101			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
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 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GN78691				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chattanooga TN - PYP											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 400 Workman Rd								CITY/TOWN CHATTANOOGA				STATE TN		ZIP CODE 37410	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Administrative Support Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	1	0	7	1	0	0	0	0	0	0	0	0	0	0	9
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 2023 REPORTING YEAR TOTAL	1	0	19	1	0	0	0	0	0	0	0	0	0	0	21
PRIOR 2022 REPORTING YEAR TOTAL	0	0	15	1	0	0	0	0	0	0	0	0	0	0	16
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP17236			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME San Jose CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1660 Monterey Road						CITY/TOWN SAN JOSE				STATE CA		ZIP CODE 95112			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	Hispanic or Latino		Not Hispanic or Latino												
			Male							Female				Row Total	
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	4	0	1	0	0	0	0	0	0	0	0	0	0	0	5
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 2023 REPORTING YEAR TOTAL	4	0	1	0	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EK02608			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Crestview FL - Greenleaf												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2497 Panhandle Lane						CITY/TOWN BONIFAY				STATE FL		ZIP CODE 32425			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Craft Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	0	0	13	1	0	0	0	0	1	0	0	0	0	0	15
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	25	1	0	0	0	0	3	0	0	0	0	0	29
PRIOR 2022 REPORTING YEAR TOTAL	0	0	24	3	0	0	0	0	2	1	0	0	0	0	30
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB29905			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME LaVergne TN - Nashville												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 501 Mason Rd Suite 260						CITY/TOWN LA VERGNE				STATE TN		ZIP CODE 37086			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	6	1	0	0	0	0	3	0	0	0	0	0	10
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	2	1	19	8	0	0	0	1	3	0	0	0	0	1	35
Laborers and Helpers	1	0	6	5	0	0	0	0	0	1	0	0	0	0	13
Service Workers	0	0	6	0	0	0	0	0	2	0	0	0	0	0	8
CURRENT 2023 REPORTING YEAR TOTAL	3	1	43	14	0	0	0	1	10	1	0	0	0	1	74
PRIOR 2022 REPORTING YEAR TOTAL	2	0	39	10	0	0	0	2	9	0	0	0	0	1	63
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID GA30110			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Thousand Palms CA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 27600 N Sierra Del Sol						CITY/TOWN THOUSAND PALMS				STATE CA		ZIP CODE 92276			
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 953072886															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	3	1	0	0	0	0	0	0	0	0	0	0	0	0	4
Administrative Support Workers	0	2	0	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	5	0	2	0	0	0	0	0	0	0	0	0	0	0	7
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	10	3	3	0	0	0	0	0	0	0	0	0	0	0	16
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	5	2	3	0	0	0	0	0	0	0	0	0	0	0	10
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30134			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Caseyville IL - MetroAutoPart												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2450 Black Lane						CITY/TOWN CASEYVILLE				STATE IL		ZIP CODE 62232			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Operatives	0	0	11	0	0	0	0	0	0	0	0	0	0	0	11
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 2023 REPORTING YEAR TOTAL	0	0	18	0	0	0	0	0	1	0	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	0	0	7	2	0	0	0	1	0	0	0	0	0	0	10
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30538			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Tampa FL - Tampa Truck												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1019 South 50Th St.						CITY/TOWN TAMPA				STATE FL		ZIP CODE 33619			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	3	0	3	2	1	0	0	0	0	0	0	0	0	0	9
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	10	4	1	0	0	0	1	0	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	1	0	8	2	0	0	0	0	1	0	0	0	0	0	12
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID X822941			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Kansas City KS - KAO Whse												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 90 Shawnee Ave.						CITY/TOWN KANSAS CITY				STATE KS		ZIP CODE 66105			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
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	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
First/Mid-Level Officials and Managers	1	1	8	3	0	0	0	0	0	1	0	0	0	0	14
Professionals	1	0	4	1	0	0	0	0	3	0	0	0	0	0	9
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	2	0	0	0	0	0	1	0	0	0	0	0	4
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	3	0	17	4	0	0	0	1	0	0	0	0	0	1	26
Laborers and Helpers	6	0	4	18	1	0	0	0	3	5	0	0	0	1	38
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	11	2	39	26	1	0	0	1	8	6	0	0	0	2	96
PRIOR 2022 REPORTING YEAR TOTAL	8	1	31	5	2	0	0	1	3	1	0	0	0	1	53
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)  4															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID MV45633				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Chambersburg PA -TripleNickel											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2956 Lincoln Way West								CITY/TOWN CHAMBERSBURG				STATE PA		ZIP CODE 17202	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	1	0	9	0	0	0	0	0	1	0	0	0	0	0	11
Operatives	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
Laborers and Helpers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>1</b>	<b>0</b>	<b>24</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>27</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>1</b>	<b>17</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>21</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16642				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Cocoa FL											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 809 N Cocoa Blvd								CITY/TOWN COCOA				STATE FL		ZIP CODE 32922	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
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 2023 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB29895			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Savannah GA												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 60 Telfair Place						CITY/TOWN SAVANNAH				STATE GA		ZIP CODE 31415			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	3	0	0	0	0	0	2	0	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	0	4	0	0	0	0	0	1	0	0	0	0	0	6
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	5	1	0	1	0	0	0	0	0	0	0	0	7
Operatives	3	0	8	10	0	0	0	0	0	0	0	0	0	0	21
Laborers and Helpers	0	0	0	2	0	0	0	0	2	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	5	0	20	13	0	1	0	0	6	0	0	0	0	0	45
PRIOR 2022 REPORTING YEAR TOTAL	2	0	12	11	0	1	0	2	4	0	0	0	0	0	32
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
8															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID AC21243				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Belleville MI											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 41247 E Huron River								CITY/TOWN BELLEVILLE				STATE MI		ZIP CODE 48111	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 952920557															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
<b>JOB CATEGORIES</b>	<b>Race/Ethnicity</b>														<b>Row Total</b>
	<b>Hispanic or Latino</b>		<b>Not Hispanic or Latino</b>												
			<b>Male</b>							<b>Female</b>					
	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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	8	0	0	0	0	0	1	0	0	0	0	0	9
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	8	0	0	0	0	0	4	0	0	0	0	0	12
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	1	0	8	1	0	0	0	0	0	0	0	0	0	0	10
Operatives	1	0	4	1	0	0	0	1	0	0	0	0	0	0	7
Laborers and Helpers	1	0	2	2	0	0	0	0	2	0	0	0	0	0	7
Service Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	<b>3</b>	<b>0</b>	<b>32</b>	<b>4</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>8</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>48</b>
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	<b>2</b>	<b>0</b>	<b>21</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>2</b>	<b>8</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>35</b>
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)															
8															

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
SECTION A – TYPE OF REPORT ESTABLISHMENT-LEVEL REPORT															
SECTION B – EMPLOYER IDENTIFICATION															
OFS COMPANY ID AC16425			EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE												
ADDRESS 500 W MADISON ST STE 2800						CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661			
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID QP16114			HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Saginaw MI												
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3965 Fortune Rd						CITY/TOWN SAGINAW				STATE MI		ZIP CODE 48603			
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 952920557															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): Not Applicable															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
JOB CATEGORIES	Race/Ethnicity														
	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	Row Total
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
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 2023 REPORTING YEAR TOTAL	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/10/2023 - 12/23/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
9															

<b>U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)</b> <b>2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)</b>										EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
<b>SECTION A – TYPE OF REPORT</b> ESTABLISHMENT-LEVEL REPORT															
<b>SECTION B – EMPLOYER IDENTIFICATION</b>															
OFS COMPANY ID AC16425				EMPLOYER NAME CHICAGO IL - CORPORATE OFFICE											
ADDRESS 500 W MADISON ST STE 2800								CITY/TOWN CHICAGO				STATE IL		ZIP CODE 60661	
<b>SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION</b> (if applicable)															
HQ/ESTABLISHMENT-LEVEL UNIT ID EB30612				HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Wilmington CA - PYP											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 1232 Blinn Avenue								CITY/TOWN WILMINGTON				STATE CA		ZIP CODE 90744	
<b>SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)</b> 953406551															
<b>SECTION E – EMPLOYER FILING ELIGIBILITY</b> <input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
<b>SECTION F – FEDERAL CONTRACTOR DESIGNATION</b> (if applicable) Unique Entity ID (UEI): Not Applicable <input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor) <input type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor) <input type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
<b>SECTION G – NAICS INFORMATION</b> 423140 - Motor Vehicle Parts (Used) Merchant Wholesalers															
<b>SECTION H – WORKFORCE DEMOGRAPHIC DATA</b>															
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	3	0	0	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	7	3	1	0	0	0	0	0	0	0	0	0	0	0	11
Administrative Support Workers	4	3	0	0	0	0	0	0	0	0	3	0	0	0	10
Craft Workers	2	0	1	0	0	1	0	0	0	0	0	0	0	0	4
Operatives	30	0	0	0	0	0	0	0	0	0	0	0	0	0	30
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	46	6	2	0	0	1	0	0	0	0	3	0	0	0	58
<b>PRIOR 2022 REPORTING YEAR TOTAL</b>	25	2	1	0	0	1	0	0	0	0	2	0	0	0	31
<b>SECTION I – WORKFORCE SNAPSHOT PERIOD</b> 12/10/2023 - 12/23/2023															
<b>SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS</b> (optional)  <div style="border: 1px solid black; height: 150px; margin-top: 10px;"></div>															