U.S. EQUAL EMPLO 2022 EMPLOYER IN												OMB C	Revised ontrol Nu)46-0049
				FION A				,							
		SECT	FION I	B – EMP	LOYE	R IDEN									
OFS COMPANY ID N164986						ME	EMPL	OYER N R-TOLE		.C					
ADDRESS							C	ITY/TOV	WN			STATE		ZIP CC	ODE
1900 POLARIS F	PARKW	AY					CC	OLUMB	US			OH 43240			
SECTION C – H	EADQU	JARTE	RS OR	ESTAE								able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEADQ	QUARTE.				Γ-LEVEL	NAME				
HEADQUARTERS OR ESTABLISHM	ENT-LEV	/EL ADI	DRESS				C	ITY/TOV	VN			STATE ZIP CODE			
					341538	8688				D	•				
YES (Employer Is Eligible				• EMPL oyer Is N	-					NO LOI	NGER	IN BUSI	INESS		
SE	CTION			L CONT				TION (if applic	able)					
			-	ntity ID (
YES (Single-Establishm	ent Emp	oloyer is	Federa	l Contra	ctor) 🔀	YES (I	Multi-Es	stablishr	nent Em	ployer is	Federa	l Contra	ctor)		
X YES (I	Headqua	rters is	Federal	Contrac	tor) 🗌	YES (N	lon-Hea	dquartei	s Establ	ishment	is Feder	ral Contr	actor)		
		X X	ES (O	ne or Mo	ore Nor	n-Headqu	uarters E	Establish	nments i	s Federa	l Contra	actor)			
3339	98 - All	S Other I	ECTIC Miscell	DN G – I aneous	NAICS Gener	INFOR al Purpo	MATIC ose Ma)N chinery	Manuf	acturing					
	SE	ECTIO	N H – V	VORKF	ORCE										
			r			Race/Ethnicity									
		Hispanic Not Hispanic or Latino Or Latino Male Female											-		
JOB CATEGORIES	Male	Female	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	Row Total
						0						0			
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	0 23	0 13	21 268	0 11	2 31	0	0	0	6 107	0	0 15	0	0	0	29 479
Professionals	38	22	395	19	53	0	1	9	178	28	38	0	0	4	785
Technicians	88	19	432	44	97	3	1	14	26	6	24	0	1	1	756
Sales Workers Administrative Support Workers	17 19	10 22	224 83	12 25	16 11	0	3	5 3	76 121	10 53	11 12	0	1	2	387 354
Craft Workers	7	0	18	2	2	0	0	0	2	0	0	0	0	0	31
Operatives Laborers and Helpers	35 51	6 144	149 24	16 12	17 32	0	1	3	12 6	3 8	7 90	0	0	1	250 371
Service Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
CURRENT 2022 REPORTING YEAR TOTAL	278	236	1615	141	261	3	6	37	534	116	197	2	4	13	3443
PRIOR 2021 REPORTING YEAR TOTAL	250	207 SECTI	1492	139 WORK	241 FORC	2 E SNAP	4 SHOT	28 PERIO	495 D	107	196	2	2	12	3177
			0111			2/31/20									
SECTION J Not Applicable	– HEA	DQUA	RTERS	S OR ES	TABL	[SHME]	NT-LEV	VEL CO	OMME	NTS (op	tional)				

U.S. EQUA 2022 EMPI	R OMB Con	EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 08/31/2024						
	SECTION K – OFFICIAL C	ERTIFICATION OF SUBMISSION						
	EMPLOYER	IDENTIFICATION						
OFS COMPANY ID N164986		EMPLOYER NAME METTLER-TOLEDO LLC						
AI	DDRESS	CITY/TOWN	STATE	ZIP CODE				
1900 POL	ARIS PARKWAY	COLUMBUS	ОН	43240				
	CERTIFICATION	N COMMENTS (optional)						
and was pr	including any workforce demographic repared in conformity with the directio willfully false statements on this repo	TION STATEMENT data, provided in this report is correct ns set forth in the form and accompany. ort are punishable by law, US Code, T	ing instructions."	,				
		CERTIFICATION 4:18 PM [EST]						
		ERTIFYING OFFICIAL						
Name of Empl	loyer's Certifying Official		tifying Official					
JULIE	O'MORROW	HR CORPORAT	E COMPLIANCE					
Email Addre	ess of Certifying Official	Telephone Number	r of Certifying Official	1				
Julie.ON	Aorrow@mt.com	614-43						
		C) FOR EEO-1 COMPONENT 1 REPOR						
Name	e of Primary POC	Title and Employ	loyer of Primary POC TE COMPLIANCE					
JULIE	O'MORROW	HR CORPORATI Mettler-To						
Email Ad	dress of Primary POC		ber of Primary POC					
Julie.ON	Morrow@mt.com	614-43	8-4350					