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

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

OMB Control Number: 3046-0049

| | Expiration Date: 11/30/ | | | | | | | | | | | | | 2026 | |
|--|-------------------------|----------|------------------------|------------------------------|--------|--|-------------------------------------|-------------------|----------|------------------------------|-------|--|----------------------------------|-------------------|------------|
| | | | SECT | TION A | – TYPI | E OF RI | EPORT | | | | | | | | |
| | | | C | ONSOL | LIDATE | D REP | ORT | | | | | | | | |
| | | SECT | TON E | B – EMP | LOYE | R IDEN | TIFICA | TION | | | | | | | |
| OFS COMPANY ID | | | | | | | | OYER N | AME | | | | | | |
| 7589881 | AAR CORP | | | | | | | | | | | | | | |
| ADDRECC | | | | | | | | STATE ZIP CODE | | | | | | | |
| ADDRESS | | | | CITY/TOWN | | | | | | | | | | | |
| 1100 NORTH WOOD DALE ROAD | | | | WOOD DALE | | | | | | | | IL 60191 | | | |
| SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) | | | | | | | | | | | | | | | |
| HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE | | | | | | | | | | | | | | DE | |
| HEADQUARTERS OR ESTABLISHMENT-LEVEL ADI | | | KESS | | | CITY/IOWI | | | | | | STATE ZIPC | | ZIFCC | DE |
| | | | | | | | | | | | | | | | |
| | SECTION | ON D - | EMPI | LOYER | IDENT | TIFICA' | TION N | UMBE | R (EIN |) | | | | | |
| | | | | 3 | 362334 | 820 | | | | | | | | | |
| SECTION E – EMPLOYER FILING ELIGIBILITY | | | | | | | | | | | | | | | |
| YES (Employer Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): EULWGLS7QNF6 | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| ☐ YES (Single-Establishment Employer is Federal Contractor) ▼ YES (Multi-Establishment Employer is Federal Contractor) | | | | | | | | | | | | | | | |
| YES (Headquarters is Federal Contractor) YES (Non-Headquarters Establishment is Federal Contractor) | | | | | | | | | | | | | | | |
| X YES (One or More Non-Headquarters Establishments is Federal Contractor) | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| SECTION G – NAICS INFORMATION 551114 Corporate Subsidiany and Regional Managing Offices | | | | | | | | | | | | | | | |
| 551114 - Corporate, Subsidiary, and Regional Managing Offices | | | | | | | | | | | | | | | |
| SECTION H – WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity | | | | | | | | | | | | | | | |
| | L | | 1 | | | | | | , | | | | | | |
| | Hisp | | Not Hispanic or Latino | | | | | | | | | | ⊣ ∣ | | |
| | or Latino | | | 1 | IVI | Male | | | F | | | emale | | | |
| | | | | | | _ | | | | | | | | 1 | |
| | | | | _ | | Native Hawaiian or Other Pacific Islander | þ | Two or More Races | | = | | Native Hawaiian or Other Pacific Islander | p | Two or More Races | |
| JOB CATEGORIES | | | | Black or African American | | an | American Indian or Alaska Native | Sac | | Black or African American | | Native Hawaiian Other Pacific Islan | American Indian Alaska Native | Sac | Row |
| JOB CATEGORIES | a) | e | Q) | ck or Afric American | _ | aii s | ndi Iat | ė | gy. | Black or an Amer | _ | aii s | ndi Iat | ė | Total |
| | Male | Female | White | or A | Asian | a⊊ | a P | or Io | White | ck | Asian | aĕ | a = = | ō | |
| | 2 | Fe | ≥ | ko | Ä | E S | Sk | 2 | ≥ | 3la an | Ä | E S | ca | 2 | |
| | | | | ac | | ŘΨ | leri Na | 00 | | H S | | Ν̈́ | leri Na | 0 | |
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| | | | | | | 2 0 | _ | _ | | | | 2 0 | _ | _ | |
| Executive/Senior Level Officials and Managers | 6 | 0 | 76 | 4 | 4 | 0 | 0 | 0 | 17 | 1 | 0 | 0 | 0 | 0 | 105 |
| First/Mid-Level Officials and Managers | 114 | 22 | 233 | 1 22 | 20 | 2 | 2 | 3 | 85 | 9 | 10 | 1 | 2 | 2 | 527 |
| Professionals | 106 | 50 | 151 | 21 | 26 | 0 | 2 | 8 | 65 | 14 | 13 | 0 | 1 | 2 | 459 |
| Technicians | 6 | 2 | 22 | 6 | 5 | 1 | 0 | 2 | 4 | 4 | 0 | 1 | 0 | 0 | 53 |
| Sales Workers | 3 | 1 | 17 | 1 | 3 | 0 | 0 | 1 | 9 | 1 | 1 | 0 | 0 | 1 | 38 |
| Administrative Support Workers | 50 | 53 | 86 | 21 | 5 | 1 | 0 | 3 | 99 | 19 | 5 | 0 | 1 | 3 | 346 |
| Craft Workers | 795 | 39 | 497 | 109 | 50 | 3 | 13 | 16 | 49 | 7 | 2 | 0 | 1 | 2 | 1583 |
| Operatives Laborers and Helpers | 168 73 | 11 29 | 57 119 | 13 38 | 4 | 0 | 1 4 | 3 | 23 53 | 11 | 0 | 0 | 0 | 3 | 283 342 |
| | | | | | | | | | | | | | | | |

SECTION I - WORKFORCE SNAPSHOT PERIOD

10/14/2023 - 10/27/2023

SECTION J - HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)

Not Applicable

Service Workers

CURRENT 2023 REPORTING YEAR TOTAL

PRIOR 2022 REPORTING YEAR TOTAL

EEOC Standard Form 100 (SF 100) U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) Revised 08/2023 OMB Control Number: 3046-0049 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1) Expiration Date: 11/30/2026 SECTION K - OFFICIAL CERTIFICATION OF SUBMISSION EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME 7589881 **AAR CORP** ADDRESS CITY/TOWN STATE ZIP CODE WOOD DALE 1100 NORTH WOOD DALE ROAD IL 60191 CERTIFICATION COMMENTS (optional) No Certification Comments Provided CERTIFICATION STATEMENT "I certify that the information, including any workforce demographic data, provided in this report is correct and true to the best of my knowledge and was prepared in conformity with the directions set forth in the form and accompanying instructions." Knowingly and willfully false statements on this report are punishable by law, US Code, Title 18, Section 1001. DATE OF CERTIFICATION 5/30/2024 12:54 PM [EST] EMPLOYER'S CERTIFYING OFFICIAL Name of Employer's Certifying Official Title of Certifying Official Natalie Boettcher **HR** Analyst Email Address of Certifying Official Telephone Number of Certifying Official Natalie.Boettcher@aarcorp.com 630-227-2905 PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING Title and Employer of Primary POC Name of Primary POC **HR** Analyst Natalie Boettcher AAR CORP.

Telephone Number of Primary POC 630-227-2905

Email Address of Primary POC

Natalie.Boettcher@aarcorp.com