U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2022 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)												EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 08/31/2024					
						E OF R ED REP		I									
		SECT	FION E	B – EMP	LOYE	R IDEN											
OFS COMPANY ID AU77101					Pł	HILIP M		OYER N		NAL IN	С						
ADDRESS														STATE ZIP CODE			
677 Washington Boulev								AMFO				CT 06901					
SECTION C – HI HQ/ESTABLISHMENT-LEVEL UNIT ID	EADQU	ARTE	RS OR			MENT-I QUARTE						able)					
NQ/ESTABLISHMENT-LEVEL UNIT ID					ΠΕΑD	UAKIL	K5 OK E	STADLI	STIVILIN	I-LEVEL	NAME						
HEADQUARTERS OR ESTABLISHME	ENT-LEV	-LEVEL ADDRESS CITY/TOWN										STATE		ZIP CC	DDE		
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 133435103																	
X YES (Employer Is Eligible						FILINC				NO LOI	NGER	IN BUS	INESS				
				-		OR DE											
		Un	ique Er	tity ID (<u>UEI)</u> :	Not App	olicable										
YES (Single-Establishm	-	-															
 ☐ YES (Headquarters is Federal Contractor) ☐ YES (Non-Headquarters Establishment is Federal Contractor) ☐ YES (One or More Non-Headquarters Establishments is Federal Contractor) 																	
		S	ECTIO)NG – 1	NAICS	INFOR	MATIO	DN	iments 1	s Federa	I Contra	actor)					
	SE					r Holdir			ТА								
SECTION H – WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity																	
	Hisp	anic atino			M	lale	Not	Hispar	nic or L	atino	For	nale					
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				ç		or	٦ ر	ses		u		or	5	ses			
JOB CATEGORIES		ø		rica		uiian Islaı	dian	Ra		erica		iian Islaı	dian ative	Ra	Row Total		
	Male	Female	White	r Af erica	Asian	awa ific	a Na	lore	White	Black or an Amer	Asian	awa ific	n In a Na	lore	TOLAI		
	Z	Fel	3	Black or African American	Ä	e H Pac	nerican Indian Alaska Native	٩	>	Bla	Ą	e H Pac	nerican Indian Alaska Native	٩			
				Bla		Native Hawaiian or Other Pacific Islande	American Indian or Alaska Native	Two or More Races		Black or African American		Native Hawaiian or Other Pacific Islande	American Indian or Alaska Native	Two or More Races			
						2 g	4	-				~ 9	4	-			
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	0 5	1 0	6 20	0	0 5	0	0	0	2 8	0 3	2 0	0	0	0	11 43		
Professionals	10	8	32	5	14	0	0	2	33	4	9	0	0	1	43 118		
Technicians Sales Workers	1	0	1	3 0	1	0	0	0	1 0	2 0	0	0	0	0	9 0		
Administrative Support Workers	0	4	3	1	1	0	0	0	6	3	1	0	0	1	20		
Craft Workers Operatives	0	0	4	7 9	0	0	0	0	1 3	0 9	0	0	0	0	12 23		
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Service Workers CURRENT 2022 REPORTING YEAR TOTAL	1 17	0 13	3 70	1 28	0 21	0 1	0	0 2	1 55	0 21	0 12	0	0	0 2	6 242		
PRIOR 2021 REPORTING YEAR TOTAL	13	11	39	7	8	0	0	1	35	6	10	0	0	2	132		
	S	SECTIO	ON I –			E SNAP		PERIO	D					<u></u>			
SECTION J	- HEAI	DQUAI	RTERS			2/17/20 ISHME		VEL CO	OMME	NTS (op	tional)						
Not Applicable		-															

U.S. EQUAL EMPLOYMENT OPPORTUN 2022 EMPLOYER INFORMATION REPOI	OMB Co	EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 08/31/2024				
SECTION K – OFFICIAL	CERTIFICATION OF SUBMISSION					
	ER IDENTIFICATION					
OFS COMPANY ID AU77101	EMPLOYER NAME PHILIP MORRIS INTERNATIONAL I	NC				
ADDRESS	CITY/TOWN	STATE	ZIP CODE			
677 Washington Boulevard, Suite 1100	STAMFORD	СТ	06901			
CEDTIEICAT	ION COMMENTS (optional)					
Company is expanding its business, due to which there were signifi an acquisition in 2022. These factors together resulted in the increa		. no company a				
"I certify that the information, including any workforce demograp and was prepared in conformity with the direc Knowingly and willfully false statements on this r	ctions set forth in the form and accompany eport are punishable by law, US Code,	ying instructions.	"			
	OF CERTIFICATION					
	023 2:33 PM [EST]					
	S CERTIFYING OFFICIAL					
Name of Employer's Certifying Official	Title of Ce	rtifying Official				
Ana Rexha	Payroll I	_ead - US				
Email Address of Certifying Official	Telephone Numb	er of Certifying Officia	1			
ana.rexha@pmi.com	347-5	74-0836				
		TINC				
PRIMARY POINT OF CONTACT (I Name of Primary POC	POC) FOR EEO-1 COMPONENT 1 REPOR Title and Emplo	RTING over of Primary POC				
Ana Rexha		Lead - US				
		Services Inc.				
Email Address of Primary POC		nber of Primary POC				
	-	-				
ana.rexha@pmi.com	347-5	74-0836				

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2022 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)												EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 08/31/2024				
						E OF R										
		SECT	FION H	B – EMF	LOYE	R IDEN	TIFICA	ATION								
OFS COMPANY ID								OYER N								
AU77101					Pł	HILIP M	ORRIS	INTER	NATIO	NAL IN	С					
ADDRESS							C	ITY/TOV	VN			STATE		ZIP CC	DDE	
677 Washington Boulev								TAMFO				СТ		0690	01	
SECTION C – HI	ADQU	ARTE	RS OR	ESTAR	BLISH	MENT-I	LEVEL	IDENT	'IFICA'	FION (i	f applic	able)				
HQ/ESTABLISHMENT-LEVEL UNIT ID						QUARTE										
AU77101			DEGG		F	HILIP M								ZID CC	DE	
HEADQUARTERS OR ESTABLISHME 677 Washington Boulev								ity/tov f <mark>amfo</mark>				STATE CT		ZIP CC 069		
				OVED	IDEN	TIFICA)		CI		0090	01	
					133435	5103			-)						
X YES (Employer Is Eligible						FILING					NCFR	IN RUS	INFSS			
				-	-	FOR DE					UGER	IN DUS				
5EX	/11011					Not App			n appite	u0ic)						
YES (Single-Establishm	ent Emp	oloyer is	Federa	ıl Contra	ctor)	YES (Multi-Es	stablishr	nent Em	ployer is	s Federa	l Contra	ctor)			
YES (H	leadqua	rters is	Federal	Contrac	tor) 🔲	YES (N	lon-Hea	dquarter	s Establ	ishment	is Fede	ral Conti	actor)			
		🗆 Y	ES (O	ne or M	ore Nor	n-Headqu	uarters H	Establisł	nments i	s Federa	ıl Contr	actor)				
		S		DNG-	NAICS	INFOR r Holdin	MATIC)N								
	SE	CTIO	NH - V	VORKE	ORCE	DEMO	GRAP	HIC DA	ТА							
							Race/E									
	Hispanic Not Hispanic or Latino															
	or La	atino			N	lale					Fer	nale	1		_	
						r r	L	s					<u>۔</u>	s		
				an		n o and)e o	ace		can		n o and	ln o	ace	Row	
JOB CATEGORIES		e	۵	fric	c	aiia	ativ	e R	۵	or	c	aiia Isl	ndia ativ	e R	Total	
	Male	Female	White	ck or Afric American	Asian	law	a N	Mor	White	Black or an Amer	Asian	lav Sific	an Ir a N	Mor		
	~	Ъ	5	Black or African American	◄	/e⊢ Pac	nerican Indian Alaska Native	or	5	Bla	◄	/e⊢ Pac	nerican Indian Alaska Native	or		
				Bla		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		Black or African American		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		
						zğ	◄	Ĥ				zğ	∢	É		
Executive/Senior Level Officials and Managers	0	1	3	0	0	0	0	0	0	0	2	0	0	0	6	
First/Mid-Level Officials and Managers Professionals	4 10	0	10 15	0	4	0	0	0	5 19	2	0 7	0	0	0	25 66	
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	4	0	1	0	0	0	0	3	1	1	0	0	0	10	
Craft Workers 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	1	0	3	1	0	0	0	0	1	0	0	0	0	0	6	
CURRENT 2022 REPORTING YEAR TOTAL	15	11	31	2	9	0	0	1	28	5	10	0	0	1	113	
PRIOR 2021 REPORTING YEAR TOTAL	12	10	25	1	5	0	0	1	27	4	9	0	0	1	95	
	٤	SECTI	ON I –			E SNAP		PERIO	D		1					
SECTION I	12/4/2022 - 12/17/2022															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional) Additional ASM information: Vectura, Inc. was acquired and though their registered business address in 2022 is same as the HQ address,																
Additional ASM information: Vectura, Inc.	was ac	quired		Additional ASM information: vectura, inc. was acquired and though their registered business address in 2022 is same as the HQ address, their employee information has not been included in the HQ data as we have filed their information under a separate establishment,												
Additional ASM information: Vectura, Inc. their employee information has not been in	was ac	quired I in the	HQ da	ata as w	e have	e filed th								388,		
Additional ASM information: Vectura, Inc.	was ac	quired I in the	HQ da	ata as w	e have	e filed th								355,		
Additional ASM information: Vectura, Inc. their employee information has not been in	was ac	quired I in the	HQ da	ata as w	e have	e filed th								355,		
Additional ASM information: Vectura, Inc. their employee information has not been in	was ac	quired I in the	HQ da	ata as w	e have	e filed th								255,		
Additional ASM information: Vectura, Inc. their employee information has not been in	was ac	quired I in the	HQ da	ata as w	e have	e filed th								÷55,		

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2022 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)												EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 08/31/2024			
				FION A - STABLI								r			
		SECT		B – EMP				TION							
OFS COMPANY ID		blei	10111				EMPL	OYER N							
AU77101					Pl	HILIP M	ORRIS	INTER	NATIO	NAL IN	С				
ADDRESS												STATE	DDE		
677 Washington Boule												СТ		069	01
SECTION C – HI HQ/ESTABLISHMENT-LEVEL UNIT ID	EADQU	JARTE	RS OR									able)			
PQ79971		HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Vectura, Inc.													
HEADQUARTERS OR ESTABLISHME								TY/TOV				STATE		ZIP CO	
677 Washington Boules								AMFO				СТ		069	01
					71613	3428)					
X YES (Employer Is Eligible				- EMPLO oyer Is N						NO LOI	NGER	IN BUS	INESS		
SEC	CTION			L CONT				TION (if applic	able)					
			-	ntity ID (
YES (Single-Establishm	-	•													
YES (F	Ieadqua	rters is l	Federal	Contract	tor) 🗌	YES (N	Non-Head	lquarter	rs Establ	ishment	is Fede	ral Cont	ractor)		
				ne or Mo		-			nments i	s Federa	ıl Contr	actor)			
541715 - Research and Develop	mont ir			DNG-N						anotoch	nology	and Bi	otechno		
	SE	ECTION	NH-V	VORKF	ORCE	DEMO	GRAPH	HC DA	TA	anoteer	nology		oteenn	Jiogy)	
							Race/E		-						
		oanic			N		Not	Hispar	nic or L	atino.	For	nalo			_
		or Latino Male Fema										liale			_
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
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	1	0	0	0	0	0	0	0	0	0	4
Professionals Technicians	0	0	2	0	2	0	0	0	4	1	0	0	0	0	9
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers Craft Workers	0	0	0	0	0	0	0	0	1	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 Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2022 REPORTING YEAR TOTAL	0	0	6	0	3	0	0	0	5	1	0	0	0	0	15
PRIOR 2021 REPORTING YEAR TOTAL															
)22 - 1	2/17/20	22								
SECTION J Additional ASM information: Vectura, Inc. their employee information has not been in information under a separate establishme	was ac ncludeo	quired d in the	and th HQ da	ough the ata so as	eir reg s to av	istered l oid doul	busines ble cour	s addre	ess in 2 Iem, an	022 is s d we ha	same a ave file	d their	Q addre	ess,	

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2022 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)												EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049			
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						NT REF									
		SECT	FION E	8 – EMF	PLOYE	R IDEN		ATION LOYER N							
OFS COMPANY ID AU77101					PH	HILIP M				NAL IN	с				
ADDRESS							С	ITY/TOV	VN			STATE		ZIP CC	DE
677 Washington Boulev								ramfo				СТ		0690)1
SECTION C – HI HQ/ESTABLISHMENT-LEVEL UNIT ID	EADQU	ARTE	RS OR	ESTAE	BLISHN HEADO	MENT-I QUARTE	LEVEL RS OR E	IDENT STABLIS	IFICA'	<mark>ΓΙΟΝ</mark> (i Γ-LEVEL	f applica	able)			
KT68953															
HEADQUARTERS OR ESTABLISHME												STATE		ZIP CC	
1399 New York Ave I	NW, Sui			LOYER	IDEN	TIFICA		SHING)		DC		2000)5
				(030494					,					
X YES (Employer Is Eligible										NO LOI	NGER	IN BUS	INESS		
SEC	CTION								if applic	able)					
VES (Single-Establishm	ent Emp		-	-		Not App			nent Em	plover is	Federa	1 Contra	ctor)		
 YES (Single-Establishment Employer is Federal Contractor) YES (Multi-Establishment Employer is Federal Contractor) YES (Headquarters is Federal Contractor) YES (Non-Headquarters Establishment is Federal Contractor) 															
YES (Headquarters is Federal Contractor) YES (Non-Headquarters Establishment is Federal Contractor)															
		S	ECTIO	DNG-1	NAICS	INFOR	MATIO	ON							
						nd Reg				S					
SECTION H – WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity															
	Hisp or La				N	lale	Not	Hispar	nic or L	atino	Fer	nale			-
															-
				an		n or inde	n or e	Ices		an		n or inde	n or e	seot	_
JOB CATEGORIES	e e e e e e e e e e e e e e e e e e e	le	e	\fric can	L	aiia S Isla	ndia lativ	e Ra	ø	or neric	۲	raiia S Isla	ndia lativ	e Ra	Row Total
	Male	Female	White	ck or Afric American	Asian	Haw acific	an Ir ka N	Mor	White	Black or an Amer	Asian	Haw acific	an lı ka N	Mor	
		ш	_	Black or African American		Native Hawaiian or Other Pacific Islandeı	American Indian or Alaska Native	Two or More Races	_	Black or African American		Native Hawaiian or Other Pacific Islande	American Indian or Alaska Native	Two or More Races	
				В		Nat Othe	Αu	Ť		Af		Othe	Αu	Τw	
Executive/Senior Level Officials and Managers	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4
First/Mid-Level Officials and Managers Professionals	1 0	0	1 8	0 1	0 2	0	0	0	2 7	0 1	0	0	0	0	4 23
Technicians 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 Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2022 REPORTING YEAR TOTAL	1	2	11	1	2	0	0	0	12	1	2	0	0	0	32
PRIOR 2021 REPORTING YEAR TOTAL	1	1	6	1	1	0	0	0	6	2	1	0	0	1	20
	S	SECTIO	ON I –			E SNAP		PERIO	D			1			1
SECTION J	– HEAI	DQUAI	RTERS			2/17/20 ISHME		VEL CO	OMME	NTS (op	tional)				
No Comments Provided		-													

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2022 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)												EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049					
SECTION A – TYPE OF REPORT ESTABLISHMENT REPORT													Expiration Date: 08/31/2024				
		CEO						TION									
OFS COMPANY ID		SECI	TION E	B – EMF	PLOYE	R IDEN		ATION LOYER N	IAME								
AU77101					PH	HILIP M	ORRIS	INTER	NATIO	NAL IN	С						
ADDRESS		d. Suite 1100 CTTY/TOWN												ZIP CC	DDE		
677 Washington Boulev	vard, Su	uite 110	00			CT 06901											
SECTION C – HI HQ/ESTABLISHMENT-LEVEL UNIT ID	EADQU	ARTE	RS OR	ESTAE	BLISHN	MENT-I	LEVEL	IDENT	IFICA'	FION (i	f applica	able)					
KT68771					HEAD	JUANIE		iaga Ind			NAME						
HEADQUARTERS OR ESTABLISHME	ENT-LEV	-										STATE		ZIP CO	DDE		
1900 Stantonsburg R								WILSO	N			NC		278	93		
	SECTI	ON D -	- EMPI	LOYER	IDEN' 872201		TION	NUMBE	CR (EIN)							
				- EMPL	OYER	FILING											
X YES (Employer Is Eligible											NGER	IN BUS	INESS				
SEC	CTION			L CON					if applic	able)							
YES (Single-Establishm	ont Emr		-	<u>ntity ID (</u> 1 Contra					oont Em	nlover is	Fadara	1 Contra	ctor)				
	-	-															
YES (Headquarters is Federal Contractor) YES (Non-Headquarters Establishment is Federal Contractor)																	
YES (One or More Non-Headquarters Establishments is Federal Contractor) SECTION G – NAICS INFORMATION																	
	SF	CTION		230 - To VORKF					ТА								
	5E		<u> </u>	UKKI	ORCE			thnicit									
		anic					Not	Hispar	nic or L	atino.							
	or La	atino			N	lale	<u> </u>	<u> </u>			Fer	nale	<u> </u>		-		
				_		or der	ъ	Se		-		or der	5	Se			
JOB CATEGORIES				ican		ian slan	ive	Sac		, ical		ian ilan	ian ive	Raci	Row		
JOB CATEGORIES	Male	ale	ite	Wille Black or African American Asian Asian Asian Asian or Other Pacific Islander American Indian or Alaska Native Two or More Races White Black or Black or						Asian	wai ic Is	Ind Nat	orel	Total			
	Ма	Female	White	k or	Asi	Ha	can ska	Ň	٩Ŋ	slac an A	Asi	Ha	nerican Indian Alaska Native	r Mo			
		_		lac		tive er P	neri Ala:	ō		frica		Native Hawaiian or Other Pacific Islande	American Indian or Alaska Native	Two or More Races			
				ш		Oth Na	Ar	Ě		◄		Oth Na	Ar	ř			
Executive/Senior Level Officials and 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	2	0	0	0	0	1	1	0	0	0	0	10		
Professionals Technicians	0 1	0	7	4	5 1	0	0	1 0	3 1	0	0	0	0	0	20 9		
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
Administrative Support Workers Craft Workers	0	0	3 4	0 7	1 0	0	0	0	1 1	2 0	0	0	0	1 0	8 12		
Operatives Laborers and Helpers	0	0	1 0	9 0	0	1	0	0	3 0	9 0	0	0	0	0	23 0		
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
CURRENT 2022 REPORTING YEAR TOTAL	1	0	22	25	7	1	0	1	10	14	0	0	0	1	82		
PRIOR 2021 REPORTING YEAR TOTAL	0	0	7	5	2	0	0	0	2	0	0	0	0	0	16		
	5	SECTIO	ON I –	WORK		E SNAP 2/17/20		PERIO	D								
SECTION J No Comments Provided	– HEAI	DQUAI	RTERS					VEL CO	OMME	NTS (op	tional)						
No comments Provided																	