

**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

SECTION A – TYPE OF REPORT
CONSOLIDATED REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID
1307988

EMPLOYER NAME
HUSBRO INC

ADDRESS
1027 NEWPORT AVENUE

CITY/TOWN
PAWTUCKET

STATE
RI

ZIP CODE
02861

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

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
050389480

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): Not Applicable

YES (Single-Establishment Employer is Federal Contractor) YES (Multi-Establishment Employer is Federal Contractor)

YES (Headquarters is Federal Contractor) YES (Non-Headquarters Establishment is Federal Contractor)

YES (One or More Non-Headquarters Establishments is Federal Contractor)

SECTION G – NAICS INFORMATION

339930 - Doll, Toy, and Game 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	4	4	93	3	10	0	0	3	53	6	4	0	0	1	181
First/Mid-Level Officials and Managers	22	36	429	7	35	0	0	12	414	10	47	0	0	15	1027
Professionals	70	83	763	28	82	4	2	32	595	24	92	0	1	34	1810
Technicians	0	1	12	2	0	0	0	2	5	0	2	0	0	0	24
Sales Workers	3	0	16	0	0	0	0	1	18	2	2	0	0	0	42
Administrative Support Workers	13	39	79	5	6	0	1	5	292	14	20	0	1	8	483
Craft Workers	1	0	15	1	0	0	0	1	7	0	1	0	0	0	26
Operatives	9	3	2	3	0	0	1	0	0	0	0	0	0	0	18
Laborers and Helpers	1	0	1	0	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 2022 REPORTING YEAR TOTAL	123	166	1410	49	133	4	4	56	1386	56	168	0	2	58	3615
PRIOR 2021 REPORTING YEAR TOTAL	91	148	1078	39	104	3	3	28	1240	41	136	0	3	40	2954

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/12/2022 - 12/31/2022

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

Not Applicable

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SECTION K – OFFICIAL CERTIFICATION OF SUBMISSION

EMPLOYER IDENTIFICATION

OFS COMPANY ID
1307988

EMPLOYER NAME
HASBRO INC

ADDRESS
1027 NEWPORT AVENUE

CITY/TOWN
PAWTUCKET

STATE
RI

ZIP CODE
02861

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

11/14/2023 9:56 AM [EST]

EMPLOYER'S CERTIFYING OFFICIAL

Name of Employer's Certifying Official
Alison Martins

Title of Certifying Official
Director, HR Program Management

Email Address of Certifying Official
alison.martins@hasbro.com

Telephone Number of Certifying Official
401-727-5301

PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING

Name of Primary POC
Alison Martins

Title and Employer of Primary POC
Director, HR Program Management
Hasbro Inc.

Email Address of Primary POC
alison.martins@hasbro.com

Telephone Number of Primary POC
401-727-5301