

**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)  
2024 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)**

EEOC Standard Form 100 (SF 100)  
Revised 08/2023  
OMB Control Number: 3046-0049  
Expiration Date: 11/30/2026

**SECTION A – TYPE OF REPORT**  
CONSOLIDATED REPORT

**SECTION B – EMPLOYER IDENTIFICATION**

OFS COMPANY ID CF62494	EMPLOYER NAME BRIXMOR			
ADDRESS 100 Park Avenue Suite 600N	CITY/TOWN NEW YORK	STATE NY	ZIP CODE 10017	

**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)**  
261381083

**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): Unavailable

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**

531120 - Lessors of Nonresidential Buildings (except Miniwarehouses)

**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	19	0	0	0	0	0	7	1	0	0	0	0	27
First/Mid-Level Officials and Managers	3	6	90	3	3	0	0	3	62	3	2	1	0	4	180
Professionals	3	0	30	3	7	0	0	2	21	1	3	1	0	1	72
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	17	1	0	0	0	0	17	0	0	0	0	1	37
Administrative Support Workers	1	10	9	2	3	0	0	0	68	16	4	1	0	5	119
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	1	14	1	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
<b>CURRENT 2024 REPORTING YEAR TOTAL</b>	<b>10</b>	<b>18</b>	<b>179</b>	<b>10</b>	<b>13</b>	<b>0</b>	<b>0</b>	<b>5</b>	<b>175</b>	<b>21</b>	<b>9</b>	<b>3</b>	<b>0</b>	<b>11</b>	<b>454</b>
<b>PRIOR 2023 REPORTING YEAR TOTAL</b>	<b>12</b>	<b>26</b>	<b>200</b>	<b>12</b>	<b>14</b>	<b>0</b>	<b>0</b>	<b>3</b>	<b>198</b>	<b>28</b>	<b>10</b>	<b>3</b>	<b>0</b>	<b>9</b>	<b>515</b>

**SECTION I – WORKFORCE SNAPSHOT PERIOD**  
12/14/2024 - 12/27/2024

**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  
CF62494

EMPLOYER NAME  
BRIXMOR

ADDRESS

100 Park Avenue Suite 600N

CITY/TOWN

NEW YORK

STATE

NY

ZIP CODE

10017

**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**

6/5/2025 2:45 PM [EST]

**EMPLOYER'S CERTIFYING OFFICIAL**

Name of Employer's Certifying Official

PAUL HEWITT

Title of Certifying Official

VP, Compensation & Benefits

Email Address of Certifying Official

paul.hewitt@brixmor.com

Telephone Number of Certifying Official

610-834-7609

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

Name of Primary POC

PAUL HEWITT

Title and Employer of Primary POC

VP, Compensation & Benefits  
Brixmor

Email Address of Primary POC

paul.hewitt@brixmor.com

Telephone Number of Primary POC

610-834-7609