EEOC Standard Form 100 (SF 100)

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			С	ONSOL	IDATE	D REP	ORT								
		SECT	TON B	- EMP	LOYE	R IDEN									
OFS COMPANY ID								OYER N							
M149641							CMS	ENER	GY						
ADDRESS							CI	TY/TOW	/N			STATE		ZIP CO	DE
1 ENERGY P	LAZA						JA	ACKSO	N			MI		4920)1
SECTION C - HE	ADQU	ARTE	RS OR									ıble)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEADQ	UARTE	RS OR ES	STABLIS	HMENT	-LEVEL	NAME				
HEADQUARTERS OR ESTABLISHME	NT-LEV	EL ADE	DRESS				CI	TY/TOW	VN			STATE		ZIP CO	DE
	SECTI	ON D -	ЕМРІ	LOYER			TION N	UMBE	R (EIN)					
					380442										
		-		EMPL	-										
X YES (Employer Is Eligible											NGER I	N BUS	INESS		
SEC	CTION	TION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) <u>Unique Entity ID (UEI)</u> : UNAVAILABLE													
_															
☐ YES (Single-Establishme	ent Emp	t Employer is Federal Contractor) X YES (Multi-Establishment Employer is Federal Contractor)													
X YES (H	leadqua	rters is l	Federal	Contrac	tor)	YES (N	on-Head	dquarter	s Establ	ishment	is Feder	al Contr	ractor)		
		XY	ES (Or	ne or Mo	ore Non	-Headqu	arters E	stablish	ments is	s Federa	l Contra	actor)			
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			22112	22 - Elec	ctric Po	wer Dis	tributio	n							
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				Black or African American		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	ke a	Two or More Races	Row
JOB CATEGORIES	•	<u>e</u>	a	ck or Afric American	u	ajis Isl	nerican Indian Alaska Native	e R	۵	or Jeri	_	aiis	American Indian Alaska Native	e R	Total
	Male	Female	White	r A	Asian	aw	n N	lor	White	Black or	Asian	aw	- E	lor	
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Executive/Senior Level Officials and Managers	1												28		
First/Mid-Level Officials and Managers	34	14	827	56	21	0	3	10	330	31	5	0	4	6	1341
Professionals Table in income	42	28	1307	67	55	1	8	14	739	71	31	1	6	11	2381
Technicians Sales Workers	13 0	7	370 31	18	13 0	0	0	6	255 14	30 0	7	0	0	6	727 48
Administrative Support Workers	8	38	222	33	1	2	5	3	480	94	10	0	2	9	907
Craft Workers	63	5	2002	92	12	0	25	15	95	16	0	0	5	2	2332
Operatives	46	6													
Laborers and Helpers	2	0	42	5	0	0	0	1	0	1	0	0	0	0	51
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

Not Applicable

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 M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** 49201 MI 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 5/2/2024 10:53 AM [EST] EMPLOYER'S CERTIFYING OFFICIAL Name of Employer's Certifying Official Title of Certifying Official **Derek Pratt** Employee Relations & EEO Program Manager Email Address of Certifying Official Telephone Number of Certifying Official derek.v.pratt@cmsenergy.com 616-216-7003

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

Name of Primary POC

Derek Pratt

Email Address of Primary POC

derek.v.pratt@cmsenergy.com

Title and Employer of Primary POC

Employee Relations & EEO Program Manager

CMS Energy

616-216-7003

Telephone Number of Primary POC

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

			_									
	SECTION A - T	YPE OF REPORT										
	HEADQUAR	RTERS REPORT										
	SECTION B - EMPLO	OYER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	I E									
M149641		Consumers Energy										
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA DR JACKSON MI 49201												
	SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)											

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

X 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

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	- DI	201101	1	· OILIII	ORCE	DEMO	Race/E								
		anic					Not	Hispan	ic or L	atino					
	or La	atino			М	ale					Fen	nale			
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	1	0	7	2	2	0	0	0	6	2	0	0	0	0	20
First/Mid-Level Officials and Managers	3	4	118	3	7	0	0	2	98	4	0	0	0	2	241
Professionals	3	7	248	15	27	0	2	2	198	13	16	1	2	2	536
Technicians	0	0	27	1	9	0	0	0	17	0	1	0	0	0	55
Sales Workers	0	0	4	0	0	0	0	0	3	0	0	0	0	0	7
Administrative Support Workers	1	5	17	2	0	0	1	1	74	5	0	0	0	0	106
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	8	16	421	23	45	0	3	5	396	24	17	1	2	4	965
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049

		TO TOOM OF ELVE I)	Expiration	on Date: 11/30/2026							
	SECTION A - T	TYPE OF REPORT									
	ESTABLISH	IMENT REPORT									
	SECTION B - EMPLO	OYER IDENTIFICATION									
OFS COMPANY ID		EMPLOYER NAME									
M149641		CMS ENERGY									
ADDRESS CITY/TOWN STATE ZIP CODE											
1 ENERGY PLAZA JACKSON MI 49201											
SECTION C -	HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E								
I767001		Consumers Energy									
HEADQUARTERS OR ESTABLISH	IMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE							
1 CONSUMERS	ENERGY PKWY	CLARE	MI	48617							
		ENTIFICATION NUMBER (EIN) 0442310	<u> </u>								
	SECTION E – EMPLOY	ER FILING ELIGIBILITY									
X YES (Employer Is Elig	ible to File) NO (Employer Is Not	Eligible to File)	R IN BUSINI	ESS							
	CECTION E PEDEDAT CONTR	OTTOD DEGLOS A PRODUCE TO 11									

SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)

<u>Unique Entity ID (UEI):</u> unavailable

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution SECTION H – WORKFORCE DEMOGRAPHIC DATA

	SE	CTION	N H – V	VORKE	ORCE	DEMO	GRAPI	HC DA	TA						
							Race/E	thnicity	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Professionals	0	0	4	0	0	0	0	0	4	0	0	0	0	0	8
Technicians	0	0	8	0	0	0	0	0	3	0	0	0	0	0	11
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Craft Workers	0	0	28	0	0	0	0	0	0	0	0	0	0	0	28
Operatives	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	48	0	0	0	0	0	9	0	0	0	0	0	57
PRIOR 2022 REPORTING YEAR TOTAL	0	0	49	0	0	0	0	0	9	0	0	0	0	0	58
		SECTIO	NI I	WODK	FODCI	CNIAD	CHOTI	DEDIAI	<u> </u>						

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

U.S. EOUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)

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

•	INFORMATION REPORT (EF	` /		on Date: 11/30/2026									
		TYPE OF REPORT											
	ESTABLISH	MENT REPORT											
	SECTION B - EMPLO	OYER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME											
M149641		CMS ENERGY											
ADDRES	ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201													
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)													
HQ/ESTABLISHMENT-LEVEL UNIT ID													
HQ/ESTABLISHMENT-LEVEL UNIT ID M664364 HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Consumers Energy													
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
10021 MARIN	E CITY HWY	IRA	MI	48023									
		ENTIFICATION NUMBER (EIN)											
		0442310											
_		ER FILING ELIGIBILITY											
X YES (Employer Is Elig	ible to File)	Eligible to File) EMPLOYER NO LONGE	R IN BUSIN	ESS									
		ACTOR DESIGNATION (if applicable)											
	Unique Entity ID (UE	<u>I)</u> : UNAVAILABLE											
☐ YES (Single-Establish	☐ YES (Single-Establishment Employer is Federal Contractor) ☒ YES (Multi-Establishment Employer is Federal Contractor)												
X YE	S (Headquarters is Federal Contractor)	YES (Non-Headquarters Establishment is Fed	deral Contrac	tor)									
	X YES (One or More	Non-Headquarters Establishments is Federal Cor	ntractor)										

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution
SECTION H - WORKEORCE DEMOGRAPHIC DATA

	SE	CTION	1 H – V	VORKF	ORCE	DEMO	GRAPI	HIC DA	TA						
							Race/E	thnicit	у						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
						_						_			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	6	1	0	0	0	0	0	0	0	0	0	0	7
Professionals	0	1	8	0	0	0	0	0	0	0	0	0	0	0	9
Technicians	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
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	0	0	21	0	0	0	0	0	0	0	0	0	0	0	21
Operatives	0	0	7	0	0	0	0	0	1	0	0	0	0	0	8
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	1	45	1	0	0	0	0	3	0	0	0	0	0	50
PRIOR 2022 REPORTING YEAR TOTAL	0	1	44	1	0	0	0	0	3	0	0	0	0	0	49

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

EEOC Standard Form 100 (SF 100)

SECTION A - TYPE OF REPORT ESTABLISHMENT REPORT OFS COMPANY ID M149641 OFS COMPANY ID M149641 ADDRESS 1 ENERGY PLAZA ADDRESS 1 ENERGY PLAZA ADDRESS 1 ENERGY PLAZA ADCRESS 1 ENERGY PLAZA CONSUMERS Energy HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Consumers Energy HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 SECTION E - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 SECTION F - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 SECTION F - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): UNAVAILABLE TYPES (Single-Establishment Employer is Federal Contractor) YES (Headquarters is Federal Contractor) YES (One or Morro Non-Headquarters Establishment is Federal Contractor) SECTION G - NAICS INFORMATION 221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA Recompany Row Total AND ADDRESS ROW Total PART OF THE ADDRESS AND ADDRE	2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)													Revised ontrol Nu- ation Dat	mber: 304	
SECTION B - EMPLOYER IDENTIFICATION M149641 ADDRESS				SECT	ION A	– TYPI	E OF RI	EPORT					-			
OFS COMPANY ID M149641 CMS ENERGY ADDRESS 1 ENERGY PLAZA ADDRESS 1 ENERGY PLAZA JACKSON MI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HOVESTABLISHMENT-LEVEL UNTID 1767414 Consumers Energy HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME LYONS STATE ZIP CODE M1 48851 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 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 is Federal Contractor) YES (One or More Non-Headquarters Establishment is Federal Contractor) SECTION B - NAICS INFORMATION 221122 - Flederic Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA Recoef Ethnicity Not Hispanic or Latino Female Or Latino Female OR SHERGY AND ASSOCIATION Not Hispanic or Latino Female OR SHERGY AND ASSOCIATION Total				ES	STABLI	SHME	NT REF	PORT								
ADDRESS 1 ENERGY ADDRESS 2 CITYTOWN STATE ZIPCODE 3 JACKSON MII 49201 SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQESTABLISHMENT-LEVEL UNIT ID 1767414 CONSUMERS RESTABLISHMENT-LEVEL NAME CONSUMERS ENERGY HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITYTOWN STATE ZIPCODE 8720 PECKINS RD SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 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 (Single-Establishment Employer is Federal Contractor) YES (One or More Non-Headquarters Establishment is Federal Contractor) SECTION F – NAICS INFORMATION 221122 - Electric Power Distribution SECTION H – WORKFORCE DEMOGRAPHIC DATA RecofEthnicity Hispanic Or Latino Male RecofEthnicity Hispanic Or Latino Or Latino RecofEthnicity Hispanic Or Latino RecofEthnicity Hisp			SECT	ION B	- EMP	LOYE	R IDEN	TIFICA	TION							
ADDRESS 1 ENERGY PLAZA 1 ENERGY PLAZA 1 ENERGY PLAZA 1 ENERGY PLAZA 3 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQESTABLISHMENT-LEVEL INIT ID 1767414 Consumers Energy HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITYTOWN STATE VIP CODE 8720 PECKINS RD SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 SECTION E - EMPLOYER FILING ELIGIBILITY SECTION F - EMPLOYER IN SELIGIBILITY YES (Employer Is Eligible to File) NO (Employer is Not Eligible to File) Ployer in Section of Pederal Contractor) SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): UNAVAIL ABLE VES (Single-Establishment Employer is Federal Contractor) YES (Multi-Establishment is Federal Contractor) YES (Cone or More Non-Headquarters Establishments is Federal Contractor) SECTION G - NAICS INFORMATION 221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity Not Hispanic or Latino Or Latino Male Female JOB CATEGORIES RIVE (2IP CODE MII 49201 AND A STATE APPLOYER (IF applicable) LIF CODE MII 49201 AND A STATE APPLOYER (IF applicable) LIF CODE MII 49201 AND A STATE APPLOYER (IF applicable) LIF CODE APPLOYER IDENTIFICATION (If applicable) LIF CODE MII 48851 SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): UNAVAIL ABLE MI 48851 SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) LIF CODE MII 48851 SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) LIF CODE MII 48851 SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) LIF CODE MII 48851 SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) LIF CODE MI 48851 SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) LIF CODE MI 48851 SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) LIF CODE MI 48851 SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) LIF CODE MI 48851 SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) LIF CODE MI 48851 SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) LIF C	OFS COMPANY ID									AME						
SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)	M149641							CMS	ENER	GY						
SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQÆSTABLISHMENT-LEVEL NAME 1767414 CONSUMERS ENERGY HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CONSUMERS ENERGY MI 48851 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 SECTION F - EMPLOYER TELING ELIGIBILITY X YES (Employer Is Eligible to File)	ADDRESS							Cl	TY/TOW	VΝ			STATE		ZIP CC	DE
HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME TOTAT144 Consumers Energy	1 ENERGY F	LAZA						J/	ACKSO	N			MI		4920)1
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 48851	SECTION C - HI	EADQU	ARTEI	RS OR	ESTAB	LISHN	1ENT-L	EVEL	IDENT	IFICA	ΓΙΟΝ (if	f applica	able)			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS STATE LYONS MI 48851 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 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 is Federal Contractor) YES (Gene or More Non-Headquarters Establishment is Federal Contractor) SECTION G - NAICS INFORMATION 221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity Hispanic Not Hispanic or Latino O Latino Male Page Male Ma						HEADQ	UARTE	RS OR ES	STABLIS	HMENT	Γ-LEVEL	NAME	•			
SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 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 (Non-Headquarters Establishment is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) XECTION G - NAICS INFORMATION 221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity	1767414							Consu	mers Ei	nergy						
SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 SECTION E - EMPLOYER FILING ELIGIBILITY X 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 (Non-Headquarters Establishment is Federal Contractor) X YES (One or More Non-Headquarters Establishments is Federal Contractor) SECTION G - NAICS INFORMATION 221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity Hispanic	HEADQUARTERS OR ESTABLISHME	NT-LEV	EL ADD	RESS				Cl	TY/TOW	/N			STATE		ZIP CO	DE
SECTION E - EMPLOYER FILING ELIGIBILITY X 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 (Multi-Establishment is Federal Contractor) YES (Multi-Establishment is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) SECTION G - NAICS INFORMATION 221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity Not Hispanic Or Latino Male Female Fe	8720 PECKIN	IS RD							LYONS	;			MI		4885	51
SECTION E - EMPLOYER FILING ELIGIBILITY X 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 (Multi-Establishment is Federal Contractor) YES (Multi-Establishment is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) SECTION G - NAICS INFORMATION 221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity Not Hispanic Or Latino Male Female Fe		SECTI	ON D -	EMPI	OYER	IDENT	TIFICA'	TION N	UMBE	R (EIN)					
SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): UNAVAILABLE SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): UNAVAILABLE SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): UNAVAILABLE SECTION G - NAICS INFORMATION 221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity Hispanic or Latino Of Latino Wale Hispanic or Latino Wale Hispanic or Latino Of Latino Of Latino Wale Hispanic or Latino Of Latino					3	80442	310				,					
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 (Multi-Establishment is Federal Contractor) YES (Non-Headquarters Establishment is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More																
Unique Entity ID (UEI): UNAVAILABLE YES (Single-Establishment Employer is Federal Contractor) YES (Multi-Establishment Employer is Federal Contractor) YES (Multi-Establishment Employer is Federal Contractor) YES (Non-Headquarters Establishment is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor)	X YES (Employer Is Eligible															
TYES (Single-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	SEG	CTION	TION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)													
JOB CATEGORIES YES (Headquarters is Federal Contractor) YES (Non-Headquarters Establishment is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) YES (One or More Non-Headquarters Establishments is Federal Contractor) SECTION G - NAItS INFORMATION																
Wale Agian Other Pacific Islander American Indian or More Races Not More Races No	☐ YES (Single-Establishm	ent Emp	oloyer is	Federa	l Contrac	ctor) 🔀	YES (N	Multi-Es	tablishm	nent Em	ployer is	Federa	l Contra	ctor)		
Wale Agian Other Pacific Islander American Indian or More Races Not More Races No	X YES (F	[eadquai	rters is I	Federal	Contrac	tor) X	YES (N	Ion-Head	dauarter	s Establ	ishment	is Feder	al Contr	actor)		
SECTION G – NAICS INFORMATION 221122 - Electric Power Distribution SECTION H – WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity Hispanic or Latino Other Pacific Islander on More Races Asian Asian of More Pacific Islander of African Indian or More Races and Indian or More Rac		1							-					,		
SECTION H - WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity Hispanic or Latino Other Pacific Islander Awaiian or Wore Races Not More Pacific Islander Alaska Native Hawaiian or A										ments i	s redera	Conu	actor)			
SECTION H – WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity Not Hispanic or Latino Other Pacific Islander American Indian or Alaska Native			3.													
Male Paint or More Races American Indian or Alaska Native Hawaiian or Other Pacific Islander American Indian or Alaska Native Hawaiian or Other Pacific Islander American Indian or Alaska Native Hawaiian or Other Pacific Islander American Indian or Alaska Native Hawaiian or Alas		SE	CTION							TA						
Male Female Black or African American Indian or Alaska Native Black or African American Indian or Alaska Native American Indian or Alaska Native American Indian or Alaska Native Two or More Races								Race/E	thnicity	у						
Male Female White Black or African American Indian or Alaska Native Black or Alaska Native American Indian or Alaska Native American Indian or Alaska Native Two or More Races								Not	Hispan	ic or L	atino					
		or La	atino		l 1	M	ale	l			1	Fer	nale	l		
					_		or der	p	es		u		or der	o	es	
	IOR CATEGORIES				ical		ian	ian ive	Зас		. <u>i</u>		ian	ian ive	Зас	Row
	JOB CATEGORIES	e	ale	te	Afri	Ē	vaii	Indi	re	te	ner T	ur.	vaii	Indi	ē	Total
		Mal	em	Λhi	or	Asia	Ha	an ka I	Мо	۸	ack A	Asia	E Fa	an ka I	β	
			Ľ.		A P	•	— е В	eric las	or		Bi	•	- e	əric Ias	ō	
			Blac													
Function (Option) and Official and Managers																
Executive/Senior Level Utilicials and Managers U U U U U U U U U	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 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0																
Professionals 0 <																
Sales Workers 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0																

SECTION I - WORKFORCE SNAPSHOT PERIOD 12/16/2023 - 12/31/2023

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

null

Administrative Support Workers

CURRENT 2023 REPORTING YEAR TOTAL

PRIOR 2022 REPORTING YEAR TOTAL

Craft Workers

Service Workers

Laborers and Helpers

Operatives

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

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	SECTION A - TYPE OF REPORT ESTABLISHMENT REPORT												
	SECTION B - EMPLO	OYER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME											
M149641 CMS ENERGY													
ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERGY PLAZA JACKSON MI 49201													
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ										
1767065		Consumers Energy											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE													
820 W MAIN ST FREMONT MI 49412													
	SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)												

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

) DE	CHO	111 - V	OKKI	OKCE	DEMO									
							Race/E	thnicit	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Professionals	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Craft Workers	0	0	15	0	0	0	0	0	0	0	0	0	0	0	15
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	22	0	0	0	0	1	1	0	0	0	0	0	24
PRIOR 2022 REPORTING YEAR TOTAL	0	0	22	0	0	0	0	1	1	0	0	0	0	0	24

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

2020 EMI 2012N		TO TOOM ONE (TI)	Expiration	on Date: 11/30/2026									
	SECTION A - T	TYPE OF REPORT											
	ESTABLISH	MENT REPORT											
	SECTION B - EMPLO	OYER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME											
M149641													
ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERGY PLAZA JACKSON MI 49201													
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E										
PC56152		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
ene	ergy	MADISON HEIGHTS	MI	48071									
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310													
	SECTION E - EMPLOY	ER FILING ELIGIBILITY	•										
X YES (Employer Is Elig	gible to File) NO (Employer Is Not	Eligible to File)	R IN BUSINI	ESS									

SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable)

Unique Entity ID (UEI): UNAVAILABLE

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHON	(II – V	VOKKI	OKCE	DEMO	GKAPI	HC DA	IA						
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	1	0	0	0	0	0	1	5
Professionals	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	3	0	34	9	0	0	3	0	0	0	0	0	0	0	49
Laborers and Helpers	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	40	10	0	0	3	1	2	0	0	0	0	1	60
PRIOR 2022 REPORTING YEAR TOTAL	3	0	39	10	0	0 E CN A D	3	1	2	0	0	0	0	1	59

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

2023 EMPLOYER	INFORMATION REPORT (EF	EO-1 COMPONENT 1)	OMB Control Number: 3046-0049 Expiration Date: 11/30/2026										
		YPE OF REPORT											
		MENT REPORT											
	SECTION B - EMPLO	OYER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME											
M149641 CMS ENERGY													
ADDRES	S	CITY/TOWN	STATE	ZIP CODE									
1 ENERG	Y PLAZA	JACKSON	MI	49201									
SECTION C -	HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ										
1767054		Consumers Energy											
HEADQUARTERS OR ESTABLISI	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
12201 E PLEAS	SANT LAKE RD	MANCHESTER	MI	48158									
		ENTIFICATION NUMBER (EIN) 0442310											
	SECTION E - EMPLOY	ER FILING ELIGIBILITY	·	_									
X YES (Employer Is Elig	ible to File) NO (Employer Is Not	Eligible to File) EMPLOYER NO LONGE	R IN BUSIN	ESS									
	SECTION F – FEDERAL CONTRA	ACTOR DESIGNATION (if applicable)	·	_									
	Unique Entity ID (UE	I): UNAVAILABLE											

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHOP	111 - V	OKKI	OKCE	DEMO									
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	1	2	0	0	0	0	0	0	0	0	0	0	0	3
Technicians	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
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	0	0	7	1	0	0	0	0	0	0	0	0	0	0	8
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	1	12	2	0	0	0	0	2	0	0	0	0	0	17
PRIOR 2022 REPORTING YEAR TOTAL	0	1	12	2	0	0	0	0	2	0	0	0	0	0	17

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		YPE OF REPORT MENT REPORT											
	SECTION B - EMPLO	YER IDENTIFICATION											
OFS COMPANY ID EMPLOYER NAME													
M149641 CMS ENERGY													
ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERG	SY PLAZA	JACKSON	MI	49201									
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ΙΕ										
M664276		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
1945 W PARNALL RD JACKSON MI 49201													
		ENTIFICATION NUMBER (EIN) 442310											

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CTION	V H – V	VORKF	ORCE	DEMO	GRAPI	IIC DA	TA						
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
	or La	atino			М	ale					Fen	nale			
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	4	0	0	0	0	0	0	0	0	0	0	0	4
First/Mid-Level Officials and Managers	2	4	104	3	7	0	0	0	46	1	2	0	1	0	170
Professionals	11	2	292	14	11	0	2	4	163	8	8	0	1	2	518
Technicians	0	0	42	0	1	0	0	2	33	1	0	0	0	1	80
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	17	1	0	0	0	1	32	1	0	0	0	0	52
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	13	6	460	18	19	0	2	7	274	11	10	0	2	3	825
PRIOR 2022 REPORTING YEAR TOTAL	13	6	453	17	18	0	2	6	269	11	10	0	2	3	810

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

EEOC Standard Form 100 (SF 100)

~	2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1) SECTION A – TYPE OF REPORT Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026											
		MENT REPORT										
OFG COLD LINE	SECTION B - EMPLO	OYER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641		CMS ENERGY										
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
		SHMENT-LEVEL IDENTIFICATION (if appl										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	E									
I767010		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
6505 SW	AN AVE	NEWAYGO	MI	49337								
		ENTIFICATION NUMBER (EIN) 1442310										
	SECTION E – EMPLOY	ER FILING ELIGIBILITY										
X YES (Employer Is Elig	ible to File) NO (Employer Is Not	Eligible to File) EMPLOYER NO LONGE	R IN BUSIN	ESS								
	SECTION F – FEDERAL CONTRA Unique Entity ID (UE	ACTOR DESIGNATION (if applicable) <u>I)</u> : UNAVAILABLE										
☐ YES (Single-Establis	shment Employer is Federal Contractor	YES (Multi-Establishment Employer is Feder	eral Contracto	or)								
X YE	X YES (Headquarters is Federal Contractor) X YES (Non-Headquarters Establishment is Federal Contractor)											
		Non-Headquarters Establishments is Federal Cor	ntractor)									
	2-00110	ICS INFORMATION c Power Distribution										

	SE	CTION	1 H – V	VORKF	ORCE	DEMO	GRAPI	HIC DA	TA						
							Race/E	thnicit	У						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	9	0	0	0	0	0	0	0	0	0	0	0	9
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	11	0	0	0	0	0	1	0	0	0	0	0	12
PRIOR 2022 REPORTING YEAR TOTAL	0	0	11	0	0	0	0	0	1	0	0	0	0	0	12

SECTION I – WORKFORCE SNAPSHOT PERIOD 12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

Ехрианоп раце. 11/30/2020												
	SECTION A - T	YPE OF REPORT										
	ESTABLISH	MENT REPORT										
	SECTION R - EMPLO	YER IDENTIFICATION										
OFS COMPANY ID	SECTION B EMILE	EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE								
1 ENERG	Y PLAZA	JACKSON	MI	49201								
SECTION C -	- HEADQUARTERS OR ESTABLIS	SHMENT-LEVEL IDENTIFICATION (if app	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E									
A515734		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
1125 W G	REEN ST	HASTINGS	MI	49058								
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310												
		442310										

SECTION E – EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

) JE	CHO	4 11 — A	OKK	OKCE	DEMO									
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	3	0	0	0	0	0	4	0	0	0	0	0	7
Technicians	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Sales Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Administrative Support Workers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Craft Workers	0	0	23	1	0	0	0	1	3	0	0	0	0	1	29
Operatives	0	0	11	0	0	0	0	1	0	0	0	0	0	0	12
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	47	1	0	0	0	2	10	0	0	0	0	1	61
PRIOR 2022 REPORTING YEAR TOTAL	0	0	47	1	0	0	0	2	10	0	0	0	0	1	61

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		YPE OF REPORT MENT REPORT											
	SECTION B - EMPLO	YER IDENTIFICATION											
OFS COMPANY ID EMPLOYER NAME													
M149641 CMS ENERGY													
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE									
1 ENERG	SY PLAZA	JACKSON	MI	49201									
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E										
1166066		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
4000 CLAY AVE SW GRAND RAPIDS MI 49548													
		ENTIFICATION NUMBER (EIN) 442310											

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CTION	N H – V	VORKF	ORCE	DEMO	GKAPI	HC DA	IA						
							Race/E	thnicit	у						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	1	0	0	0	0	0	2
First/Mid-Level Officials and Managers	6	1	47	3	0	0	0	0	17	1	0	0	0	0	75
Professionals	5	1	96	3	3	0	0	1	32	6	1	0	1	1	150
Technicians	1	3	19	1	0	0	0	0	25	3	1	0	0	1	54
Sales Workers	0	0	7	0	0	0	0	0	1	0	0	0	0	1	9
Administrative Support Workers	0	8	29	5	0	0	0	0	62	11	1	0	0	4	120
Craft Workers	7	1	98	4	2	0	1	3	4	0	0	0	0	0	120
Operatives	0	0	25	2	1	0	0	1	3	2	1	0	1	0	36
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	19	14	322	18	6	0	1	5	145	23	4	0	2	7	566
PRIOR 2022 REPORTING YEAR TOTAL	21	14	306	17	5	0	1	5	145	23	4	0	2	7	550

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		TYPE OF REPORT											
	ESTABLISH	MENT REPORT											
	SECTION B - EMPLO	OYER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME											
M149641		CMS ENERGY											
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE									
1 ENERG	SY PLAZA	JACKSON	MI	49201									
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E										
1767263		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
9440 NA	9440 NAPIER RD NORTHVILLE MI 48167												
		ENTIFICATION NUMBER (EIN) 1442310											

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

) JE	CHON	4 11 — A	OKK	OKCE	DEMO									
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	1	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	3	1	0	0	0	0	1	1	0	0	0	0	6
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	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	8	1	0	0	0	0	3	0	0	0	0	0	12
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	14	3	0	0	0	0	5	1	0	0	0	0	23
PRIOR 2022 REPORTING YEAR TOTAL	0	0	14	3	0	0	0	0	5	1	0	0	0	0	23

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

			Expirati	on Date: 11/30/2026								
	SECTION A - T	TYPE OF REPORT										
	ESTABLISH	MENT REPORT										
	SECTION B - EMPLO	OYER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E									
GP12297		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
165 W MICHIGAN AVE JACKSON MI 49201												
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310												
	CECTION E EMPLOY	ED EII ING EI IGIDII ITW		·								

SECTION E – EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity															
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	5	1	0	0	0	0	2	1	0	0	0	0	9
Technicians	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
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	3	0	0	0	0	0	3
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	7	1	0	0	0	0	6	1	0	0	0	0	15
PRIOR 2022 REPORTING YEAR TOTAL	1	0	7	1	0	0	0	0	8	1	0	0	0	0	18

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

			Expirati	on Date: 11/30/2020								
	SECTION A - T	TYPE OF REPORT										
	ESTABLISH	MENT REPORT										
	SECTION B - EMPLO	OYER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	olicable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ИE									
PC56163		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
27432 Groesbeck Hwy. ROSEVILLE MI 48066												
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310												
	CECTIONE EMPLOY	TED THE INC DE LOIDIE ETT										

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution
SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CTION	1 H – V	VORKF	ORCE	DEMO	GRAPI	IIC DA	TA						
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino				-	
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	1	0	1	1	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	2	0	41	3	0	0	0	0	0	0	0	0	0	0	46
Laborers and Helpers	0	0	11	3	0	0	0	0	0	0	0	0	0	0	14
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	57	6	0	0	1	0	1	1	0	0	0	0	68
PRIOR 2022 REPORTING YEAR TOTAL	2	0	57	6	0	0	1	0	1	1	0	0	0	0	68

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

Consumers Energy

CITY/TOWN

WHITE PIGEON

STATE

MI

ZIP CODE

49099

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

Race/Ethnicity															
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	9	0	0	0	0	0	0	0	0	0	0	0	9
Operatives	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	12	0	0	0	0	0	2	0	0	0	0	0	14
PRIOR 2022 REPORTING YEAR TOTAL	0	0	12	0	0	0	0	0	2	0	0	0	0	0	14

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

null

1767423

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS

68536 A RD

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		YPE OF REPORT MENT REPORT										
	SECTION B - EMPLO	OYER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRES	S	CITY/TOWN	STATE	ZIP CODE								
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	I E									
FT51708		Consumers Energy										
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE												
4100 V	4100 W M 76 WEST BRANCH MI 48661											
	SECTION D EMDLOVED ID	ENTIFICATION NUMBED (FIN)		·								

SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
							Race/E	thnicity	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Professionals	0	1	9	0	0	0	0	0	4	0	0	0	0	0	14
Technicians	0	0	7	0	0	0	0	0	1	0	0	0	0	0	8
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	5	0	0	0	0	0	6	0	0	0	0	0	11
Craft Workers	0	0	49	0	0	0	1	0	1	0	0	0	1	0	52
Operatives	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	1	78	0	0	0	1	0	14	0	0	0	1	0	95
PRIOR 2022 REPORTING YEAR TOTAL	0	1	78	0	0	0	1	0	15	0	0	0	1	0	96

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)

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

2023 EMPLOYER	INFORMATION REPORT (EF	CO-1 COMPONENT 1)		on Date: 11/30/2026								
	2-0	TYPE OF REPORT										
	ESTABLISH	MENT REPORT										
	SECTION B - EMPLO	OYER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641		CMS ENERGY										
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)												
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E									
1766947		Consumers Energy										
HEADQUARTERS OR ESTABLISI	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
3247 H	art Rd.	JACKSON	MI	49201								
		ENTIFICATION NUMBER (EIN) 0442310										
	SECTION E – EMPLOY	ER FILING ELIGIBILITY										
X YES (Employer Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS												
		ACTOR DESIGNATION (if applicable)										
	Unique Entity ID (UE	<u>I)</u> : UNAVAILABLE										

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
İ															
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
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	0	0	0	0	0	0	0	3	0	0	0	0	0	3
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	4	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	4	0	0	0	0	0	5

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME FH11332 **Consumers Energy** HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 6543 W BUTTERFIELD HWY **BELLEVUE** MI 49021

${\bf SECTION\,D-EMPLOYER\,IDENTIFICATION\,NUMBER\,(EIN)}$

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
							Race/E	thnicit	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
PRIOR 2022 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

			_										
	SECTION A - T	YPE OF REPORT											
	ESTABLISH	MENT REPORT											
	SECTION B - EMPLO	YER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME	,										
M149641 CMS ENERGY													
ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERGY PLAZA JACKSON MI 49201													
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ										
M664254		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
135 W TRAIL ST JACKSON MI 49201													
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310													

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

1	51	01101	1	, 011111	ONCE		Dece/E								
								thnicity							
		anic					Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Professionals	0	0	17	0	0	0	0	0	3	0	0	0	0	0	20
Technicians	0	1	18	1	0	0	0	0	7	0	0	0	0	0	27
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	2	0	0	0	0	0	3	0	0	0	0	0	5
Craft Workers	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	1	49	1	0	0	0	0	14	0	0	0	0	0	65
PRIOR 2022 REPORTING YEAR TOTAL	0	1	48	1	0	0	0	0	14	0	0	0	0	0	64

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)

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

2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1) OMB Control Number: 3046-0049 Expiration Date: 11/30/2026										
		YPE OF REPORT								
	ESTABLISH	MENT REPORT								
	SECTION B - EMPLO	YER IDENTIFICATION								
OFS COMPANY ID		EMPLOYER NAME								
M149641 CMS ENERGY										
ADDRES	ADDRESS CITY/TOWN STATE ZIP CODE									
1 ENERG	Y PLAZA	JACKSON	MI	49201						
SECTION C -	HEADQUARTERS OR ESTABLE	SHMENT-LEVEL IDENTIFICATION (if appl	icable)							
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ							
1767252		Consumers Energy								
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE						
679 S S1	ATE ST	SPARTA	MI	49345						
		ENTIFICATION NUMBER (EIN) 442310								
	SECTION E – EMPLOY	ER FILING ELIGIBILITY								
X YES (Employer Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS										
	SECTION F – FEDERAL CONTRA Unique Entity ID (UE	ACTOR DESIGNATION (if applicable) <u>I)</u> : UNAVAILABLE								

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution SECTION H – WORKFORCE DEMOGRAPHIC DATA

	5r	CHON	1 H – V	VOKKE	OKCE	DEMO	GKAPI	HC DA	IA						
							Race/E	thnicity	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	2	0	0	0	0	0	6
Professionals	0	0	4	0	0	0	0	0	4	0	0	0	0	0	8
Technicians	1	0	2	0	0	0	0	0	2	0	0	0	0	0	5
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	4	0	0	0	0	0	3	0	0	0	0	0	7
Craft Workers	1	0	26	0	0	0	2	0	1	0	0	0	0	0	30
Operatives	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	42	0	0	0	2	0	13	0	0	0	0	0	59
PRIOR 2022 REPORTING YEAR TOTAL	2	0	42	0	0	0	2	0	13	0	0	0	0	0	59

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

EEOC Standard Form 100 (SF 100)

	OMMISSION (EEOC) CO-1 COMPONENT 1)	OMB Cont	evised 08/2023 rol Number: 3046-0049 on Date: 11/30/2026						
	SECTION A - T	TYPE OF REPORT							
	ESTABLISH	MENT REPORT							
	SECTION B - EMPLO	OYER IDENTIFICATION							
OFS COMPANY ID		EMPLOYER NAME							
M149641 CMS ENERGY									
ADDRESS CITY/TOWN STATE ZIP CODE									
1 ENERGY PLAZA JACKSON MI 49201									
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	icable)						
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	E						
1766938	I766938 Consumers Energy								
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE					
100 N E	AST ST	BOYNE CITY	MI	49712					
		ENTIFICATION NUMBER (EIN) 1442310							
	SECTION E – EMPLOY	ER FILING ELIGIBILITY							
X YES (Employer Is Elig	rible to File) NO (Employer Is Not	Eligible to File) EMPLOYER NO LONGE	R IN BUSIN	ESS					
	SECTION F – FEDERAL CONTRA Unique Entity ID (UE	ACTOR DESIGNATION (if applicable) <u>I)</u> : UNAVAILABLE							
☐ YES (Single-Establis	shment Employer is Federal Contractor	YES (Multi-Establishment Employer is Feder	eral Contracto	or)					
X YES (Headquarters is Federal Contractor) X YES (Non-Headquarters Establishment is Federal Contractor)									
	X YES (One or More	Non-Headquarters Establishments is Federal Cor	ntractor)						
		ICS INFORMATION							
221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA									

	SE	CTION	N H – V	VORKE	ORCE	DEMO	GRAPI	HIC DA	TA						
							Race/E	thnicit	у						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	3	0	0	0	0	0	1	0	0	0	0	0	5
Professionals	0	0	3	0	0	0	0	0	3	0	0	0	0	0	6
Technicians	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	0	0	27	0	1	0	1	0	0	0	0	0	0	0	29
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	41	0	1	0	1	0	4	0	0	0	0	0	48
PRIOR 2022 REPORTING YEAR TOTAL	1	0	41	0	1	0	1	0	4	0	0	0	0	0	48

SECTION I – WORKFORCE SNAPSHOT PERIOD 12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME 1767076 **Consumers Energy**

${\bf SECTION\,D-EMPLOYER\,IDENTIFICATION\,NUMBER\,(EIN)}$

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS

201 MURNER RD

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

CITY/TOWN

GAYLORD

STATE

MI

ZIP CODE

49735

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHON	v п – v	VUKKI	OKCE	DEMO	GKAPI	HC DA	IA						
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	1	0	0	0	0	0	1
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		-									
	SECTION A - T	YPE OF REPORT									
	ESTABLISH	MENT REPORT									
SECTION B – EMPLOYER IDENTIFICATION											
OFS COMPANY ID											
M149641 CMS ENERGY											
ADDRESS CITY/TOWN STATE ZIP CODE											
1 ENERG	1 ENERGY PLAZA JACKSON MI 49201										
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ								
1767186		Consumers Energy									
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE							
3525 S LAKESHORE DR LUDINGTON MI 49431											
	SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310										

SECTION E – EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHON	v п – v	VUKKI	OKCE	DEMO	GKAPI	HC DA	IA						
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
İ															
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
Professionals	1	0	11	1	0	0	0	0	1	0	0	0	0	0	14
Technicians	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
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	1	0	19	0	0	0	1	0	0	0	0	0	0	0	21
Operatives	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	40	1	0	0	1	0	4	0	0	0	0	0	49
PRIOR 2022 REPORTING YEAR TOTAL	3	0	41	1	0	0	1	0	4	0	0	0	0	0	50

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT ESTABLISHMENT REPORT												
SECTION B - EMPLOYER IDENTIFICATION												
OFS COMPANY ID EMPLOYER NAME												
M149641	M149641 CMS ENERGY											
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERG	Y PLAZA	JACKSON	MI	49201								
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Ι Ε									
J027126		Consumers Energy										
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE												
1100 WASH	1100 WASHINGTON ST MIDLAND MI 48640											
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)												

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

-	51		111 /	VOKKI	ORCL		Race/E								
		anic					Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	6	1	0	0	0	0	5	0	0	0	0	0	12
Professionals	1	0	9	0	0	0	0	0	8	0	0	0	1	0	19
Technicians	0	0	8	0	0	0	0	0	2	0	0	0	0	0	10
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	1	0	4	0	0	0	0	0	3	0	0	0	0	0	8
Craft Workers	1	1	34	2	1	0	1	0	1	0	0	0	0	0	41
Operatives	0	1	10	0	0	0	0	0	0	0	0	0	0	0	11
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	2	71	3	1	0	1	0	19	0	0	0	1	0	101
PRIOR 2022 REPORTING YEAR TOTAL	3	2	70	3	1	0	1	0	17	0	0	0	1	0	98

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT ESTABLISHMENT REPORT											
SECTION B – EMPLOYER IDENTIFICATION											
OFS COMPANY ID EMPLOYER NAME											
M149641	M149641 CMS ENERGY										
ADDRESS CITY/TOWN STATE ZIP CODE											
1 ENERG	SY PLAZA	JACKSON	MI	49201							
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Ι Ε								
W327161		Consumers Energy									
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE											
4501 407	TH ST SE	KENTWOOD	MI	49512							
SECTION D - EMPLOYER IDENTIFICATION NUMBER (FIN)											

380442310

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	- DI	201101	1	, 011111	ORCE	DEMO									
							Race/E								
		anic					Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	4	1	0	0	0	0	0	0	0	0	0	0	5
Professionals	0	0	3	0	0	0	0	0	0	0	0	0	1	0	4
Technicians	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	16	0	0	0	0	0	0	0	0	0	0	0	16
Operatives	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	25	1	0	0	0	0	2	1	0	0	1	0	30
PRIOR 2022 REPORTING YEAR TOTAL	0	0	26	1	0	0	0	0	2	1	0	0	1	0	31

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

	Expiration Date: 11/30/2026										
	SECTION A - T	TYPE OF REPORT	_								
	ESTABLISH	IMENT REPORT									
SECTION B – EMPLOYER IDENTIFICATION											
OFS COMPANY ID EMPLOYER NAME											
M149641	M149641 CMS ENERGY										
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE							
1 ENERG	SY PLAZA	JACKSON	MI	49201							
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Æ.								
J027051		Consumers Energy									
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE							
311 E MICH	311 E MICHIGAN AVE BATTLE CREEK MI 49014										
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310											
	SECTION E – EMPLOYER FILING ELIGIBILITY										
<u> </u>	E EMILOI										

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	51	201101	111 /	VOKKI	ORCL		Race/E								
		anic					Not	Hispan	ic or L	atino					
	or La	atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	2	0	0	0	0	0	5	0	0	0	0	0	8
Professionals	0	0	12	0	1	0	0	0	5	1	0	0	0	0	19
Technicians	0	0	2	0	0	0	0	0	1	1	0	0	0	0	4
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	2	0	0	0	0	0	3	0	0	0	0	0	5
Craft Workers	0	0	59	2	0	0	0	0	1	0	0	0	0	1	63
Operatives	1	0	4	0	0	0	0	0	0	0	0	0	0	0	5
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	81	2	1	0	0	0	15	2	0	0	0	1	104
PRIOR 2022 REPORTING YEAR TOTAL	2	0	82	2	1	0	0	0	15	2	0	0	0	1	105

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049

	•	•	Expiration	n Date: 11/30/2026									
	SECTION A - T	YPE OF REPORT											
	ESTABLISH	MENT REPORT											
	SECTION R _ EMPLO	OYER IDENTIFICATION											
OFS COMPANY ID	OFS COMPANY ID EMPLOYER NAME												
	M149641 CMS ENERGY												
M149641 CMS ENERGY													
ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERGY PLAZA JACKSON MI 49201													
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ΙΕ										
J027115		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
4141 WIL	LDER RD	BAY CITY	MI	48706									
SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)													
	380442310												
<u></u>		ER FILING ELIGIBILITY											
VFS (Employer Is Elic	rible to File) NO (Employer Is Not	Eligible to File) FMPLOVER NO LONGE	R IN RUSINE	22									

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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	51	201101	1	, OILII	Once	DEMO									1
	Race/Ethnicity Hispanic Not Hispanic or Latino														
	Hisp	anic					Not	Hispan	ic or L	atino					
	or La	atino			M	lale					Fer	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	2	17	0	0	0	0	0	6	0	0	0	0	0	25
Professionals	0	0	41	0	0	0	0	1	24	0	1	0	0	0	67
Technicians	0	1	19	0	0	0	1	0	5	0	0	0	0	0	26
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	1	0	0	0	0	0	0	5	0	0	0	0	0	6
Craft Workers	1	0	43	0	0	0	0	0	3	0	0	0	0	0	47
Operatives	1	0	10	0	0	0	0	0	0	0	0	0	0	0	11
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	4	130	0	0	0	1	1	43	0	1	0	0	0	182
PRIOR 2022 REPORTING YEAR TOTAL	2	3	131	0	0	0	1	1	40	0	1	0	0	0	179

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		YPE OF REPORT MENT REPORT										
		YER IDENTIFICATION										
OFG COMPANY ID	SECTION B - EMPLO											
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ΙE									
1166143		Consumers Energy										
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE												
4600 COOLIDGE HWY, STE CE ROYAL OAK MI 48073												
	SECTION D - EMPLOYER ID	ENTIFICATION NUMBER (EIN)										

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHOP	111 - V	OKKI	OKCE	DEMO									
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	23	7	1	0	0	2	12	6	0	0	0	0	52
Professionals	4	2	17	7	2	0	0	0	25	14	0	0	0	1	72
Technicians	2	1	12	3	0	0	0	1	7	11	2	0	0	1	40
Sales Workers	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	12	11	0	0	0	0	17	32	1	0	0	2	75
Craft Workers	1	0	32	19	1	0	0	2	4	4	0	0	0	0	63
Operatives	2	0	35	18	0	0	0	1	13	0	0	0	0	0	69
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	10	3	131	66	4	0	0	6	78	67	3	0	0	4	372
PRIOR 2022 REPORTING YEAR TOTAL	10	3	132	66	4	0	0	6	79	68	3	0	0	4	375

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		YPE OF REPORT MENT REPORT									
	SECTION B - EMPLO	OYER IDENTIFICATION									
OFS COMPANY ID		EMPLOYER NAME									
M149641 CMS ENERGY											
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE							
1 ENERGY PLAZA JACKSON MI 49201											
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ								
1166121		Consumers Energy									
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE											
821 HAST	821 HASTINGS ST TRAVERSE CITY MI 49686										
	SECTION D - EMDLOVED ID	ENTIFICATION NUMBER (FIN)	·	` '							

SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)

380442310

SECTION E – EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHOP	111 - V	VUKKF	OKCE										
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	1	15	0	0	0	0	0	4	0	0	0	0	0	21
Professionals	0	0	15	0	0	0	0	0	9	0	0	0	0	0	24
Technicians	0	0	5	0	0	0	0	0	2	0	0	0	0	0	7
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	1	3	0	0	0	1	0	2	0	0	0	0	1	8
Craft Workers	0	0	47	1	0	0	0	0	1	0	0	0	0	0	49
Operatives	0	0	3	0	0	0	0	0	2	0	0	0	1	0	6
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	2	90	1	0	0	1	0	20	0	0	0	1	1	117
PRIOR 2022 REPORTING YEAR TOTAL	1	2	93	1	0	0	1	0	19	0	0	0	1	1	119

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME

SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

Consumers Energy

CITY/TOWN

ALLEGAN

STATE

MI

ZIP CODE

49010

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHO	(II – V	OKKI	OKCE	DEMO									
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

null

1766864

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS

4164 ALLEGAN DAM RD

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

	GE GET CALL	TIPE OF PEROPE										
	SECTION A - T	YPE OF REPORT										
	ESTARI ISH	MENT REPORT										
	LOTABLIST	WENT KET OKT										
SECTION B – EMPLOYER IDENTIFICATION												
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
WI143041 CWS ENERGT												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENEDO	Y PLAZA	JACKSON	MI	49201								
TENERO	II FLAZA	JACKSON	IVII	49201								
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ΙE									
PC56121		Consumers Energy										
1 030121		Consumers Energy										
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE												
1530 F	1530 E. Jolly Rd LANSING MI 48910											
1000 E.	1530 E. Jolly Rd LANSING MI 48910											
_	SECTION D - EMPLOYER ID	ENTIFICATION NUMBER (EIN)	•									

380442310

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

) JE	CHO	4 11 — A	OKK	OKCE	DEMO									
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	11	0	0	0	0	0	0	0	0	0	0	0	11
Professionals	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	1	0	53	2	0	0	0	1	0	0	0	0	0	0	57
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	69	2	0	0	0	1	0	0	0	0	0	0	73
PRIOR 2022 REPORTING YEAR TOTAL	1	0	70	2	0	0	0	1	0	0	0	0	0	0	74

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

	SECTION A - T	YPE OF REPORT											
	ESTABLISH	MENT REPORT											
	SECTION B - EMPLO	YER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME											
M149641		CMS ENERGY											
ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERGY PLAZA JACKSON MI 49201													
	1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	<u>- HEADQUARTERS OR ESTABLI</u>	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ΙΕ										
P157223		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
1801 W MAIN ST OWOSSO MI 48867													
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)													
	380	442310											

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	- DI	201101	, ,,	, 011111	ORCE	DEMO	Race/E								
		anic					Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	9	0	0	0	0	0	5	1	0	0	0	0	15
Professionals	0	0	10	0	0	0	0	0	4	0	0	0	0	0	14
Technicians	0	0	4	0	1	0	0	0	2	0	0	0	0	0	7
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	5	0	0	1	0	0	3	0	0	0	0	0	9
Craft Workers	2	0	34	0	0	0	0	0	1	0	0	0	0	0	37
Operatives	0	0	6	0	0	0	0	0	0	0	0	0	1	0	7
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	68	0	1	1	0	0	15	1	0	0	1	0	89
PRIOR 2022 REPORTING YEAR TOTAL	2	0	68	0	1	1	0	0	15	1	0	0	1	0	89

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)

380442310 SECTION E – EMPLOYER FILING ELIGIBILITY

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

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

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

Consumers Energy

CITY/TOWN

CARO

ZIP CODE

48723

STATE

MI

SECTION G – NAICS INFORMATION 221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H – WORKFORCE DEMOGRAPHIC DATA															
	Race/Ethnicity														
JOB CATEGORIES	Hisp	anic	Not Hispanic or Latino												
	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	Row Total
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	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	1	0	0	0	1	0	0	0	0	0	0	0	2
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	1	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	0	0	0	1	0	0	0	0	0	0	0	2

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

null

1766974

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS

1028 CLEAVER RD

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

OFS COMPANY ID							
M149641							
ADDRES	S	CITY/TOWN	STATE	ZIP CODE			
1 ENERG	Y PLAZA	JACKSON	MI	49201			
SECTION C -	icable)						
HQ/ESTABLISHMENT-LEVEL UNIT ID	T-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME						
FH11343							
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE			
700 E STER	NBERG RD	NORTON SHORES	MI	49441			

${\bf SECTION\,D-EMPLOYER\,IDENTIFICATION\,NUMBER\,(EIN)}$

380442310

SECTION E – EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
		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
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	8	0	0	0	0	0	8	0	0	0	1	0	17
Professionals	0	0	11	0	0	0	1	0	6	0	0	0	0	1	19
Technicians	0	0	4	1	0	0	0	1	2	0	0	0	0	0	8
Sales Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Administrative Support Workers	1	0	4	1	0	0	0	0	4	1	0	0	0	0	11
Craft Workers	2	0	41	1	0	0	0	0	1	0	0	0	0	0	45
Operatives	0	0	4	1	0	0	0	0	0	0	0	0	0	0	5
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	72	4	0	0	1	1	22	1	0	0	1	1	106
PRIOR 2022 REPORTING YEAR TOTAL	3	0	73	4	0	0	1	1	22	1	0	0	1	1	107

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

	GEOGRAPH WITH OF PEROPE											
	SECTION A - T	YPE OF REPORT										
	ESTABLISH	MENT REPORT										
	SECTION B - EMPLO	YER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME	,									
M149641		CMS ENERGY										
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE								
1 ENERG	SY PLAZA	JACKSON	MI	49201								
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E									
1767560		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
700 MEE ST, PO BOX 12 FILER CITY MI 49634												
		ENTIFICATION NUMBER (EIN)										

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	01	201101	, ,	VOKKI	ONCE										
							Race/E								
		anic					Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Craft Workers	1	0	16	0	0	0	0	0	0	0	0	0	0	0	17
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	27	0	0	0	0	0	1	0	0	0	0	0	29
PRIOR 2022 REPORTING YEAR TOTAL	1	0	28	0	0	0	0	0	1	0	0	0	0	0	30

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		·	Expiration	on Date: 11/30/2026								
	SECTION A - T	TYPE OF REPORT										
	ESTABLISH	IMENT REPORT										
	SECTION B - EMPLO	OYER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRES	S	CITY/TOWN	STATE	ZIP CODE								
1 ENERG	Y PLAZA	JACKSON	MI	49201								
SECTION C -	HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ΙE									
M664243		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
1975 W PA	RNALL RD	JACKSON	MI	49201								
		ENTIFICATION NUMBER (EIN) 0442310										
SECTION E – EMPLOYER FILING ELIGIBILITY												
X YES (Employer Is Elig	tible to File) NO (Employer Is Not	Eligible to File) EMPLOYER NO LONGE	R IN BUSIN	ESS								

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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHON	v п – v	VUKKI	OKCE	DEMO	GKAPI	HC DA	1A						
							Race/E	thnicity	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	2	0	0	0	0	0	2	0	0	0	0	0	5
Professionals	0	0	6	1	0	0	1	0	1	1	1	0	0	0	11
Technicians	0	0	3	0	0	0	0	0	4	1	0	0	0	0	8
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	0	0	0	0	0	0	0
Craft Workers	0	0	7	2	0	0	0	0	6	1	0	0	0	0	16
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	20	3	0	0	1	0	13	3	1	0	0	0	42
PRIOR 2022 REPORTING YEAR TOTAL	1	0	23	3	0	0	1	0	13	3	1	0	0	0	45

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		YPE OF REPORT MENT REPORT										
	SECTION B - EMPLO	OYER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRES	S	CITY/TOWN	STATE	ZIP CODE								
1 ENERG	Y PLAZA	JACKSON	MI	49201								
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ									
W327368		CMS GENERATION OPERATING II INC										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
201 EXECUTIVE PARKWAY NEW BERN NC 28562												
	SECTION D - EMPLOYER ID	ENTIFICATION NUMBER (EIN)										

380442310

SECTION E – EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHON	v п – v	VUKKI	OKCE	DEMO	GKAPI	HC DA	IA						
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Technicians	0	1	2	0	0	0	0	0	0	0	0	0	0	0	3
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	3	0	1	0	0	0	0	0	0	0	0	0	4
Craft Workers	1	0	10	2	0	0	0	0	0	0	0	0	0	0	13
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	1	19	2	1	0	0	0	2	0	0	0	0	0	26
PRIOR 2022 REPORTING YEAR TOTAL	1	1	19	2	1	0	0	0	3	0	0	0	0	0	27

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

			Expirati	on Date: 11/30/2020									
	SECTION A - T	YPE OF REPORT											
	ESTABLISH	MENT REPORT											
	SECTION B - EMPLO	OYER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME											
M149641 CMS ENERGY													
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE									
1 ENERG	SY PLAZA	JACKSON	MI	49201									
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E										
1166055		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
3201 E C	OURT ST	FLINT	MI	48506									
	SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310												
	SECTION E – EMPLOY	ER FILING ELIGIBILITY											

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CTION	1 H – V	VORKF	ORCE	DEMO	GRAPI	IIC DA	TA						
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	3	0	24	4	0	0	0	0	10	3	0	0	0	0	44
Professionals	1	0	48	3	1	0	0	2	23	2	0	0	0	0	80
Technicians	2	0	16	0	0	0	0	0	20	3	1	0	0	0	42
Sales Workers	0	0	1	0	0	0	0	0	3	0	0	0	0	0	4
Administrative Support Workers	1	0	7	3	0	0	0	0	23	3	1	0	0	0	38
Craft Workers	6	0	116	13	2	0	1	2	13	2	0	0	0	0	155
Operatives	1	1	45	2	0	0	0	0	10	0	0	0	1	0	60
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	14	1	257	25	3	0	1	4	102	13	2	0	1	0	423
PRIOR 2022 REPORTING YEAR TOTAL	14	2	261	24	3	0	2	4	102	13	1	0	1	0	427

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

2023 EMPLOYER	INFORMATION REPORT (EF	CO-1 COMPONENT 1)		on Date: 11/30/2026									
	SECTION A - T	YPE OF REPORT											
	ESTABLISH	MENT REPORT											
	SECTION B - EMPLO	OYER IDENTIFICATION											
OFS COMPANY ID EMPLOYER NAME M140641 CMS_ENERGY													
M149641 CMS ENERGY													
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE									
1 ENERG	Y PLAZA	JACKSON	MI	49201									
		SHMENT-LEVEL IDENTIFICATION (if appl											
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ										
JO63402		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
11556 DI	XIE HWY	BIRCH RUN	MI	48415									
		ENTIFICATION NUMBER (EIN) 1442310											
	SECTION E – EMPLOY	ER FILING ELIGIBILITY											
X YES (Employer Is Elig	rible to File) NO (Employer Is Not	Eligible to File) EMPLOYER NO LONGE	R IN BUSIN	ESS									
		ACTOR DESIGNATION (if applicable)	•										
_	<u>Unique Entity ID (UE</u>	<u>I)</u> : UNAVAILABLE											

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHON	v п – v	VUKKI	OKCE	DEMO	GKAPI	HC DA	1A						
							Race/E	thnicity	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	1	0	4	0	0	0	0	0	0	0	0	0	0	0	5
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
Operatives	0	0	18	0	0	1	0	1	0	0	0	0	0	0	20
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	29	0	0	1	0	1	0	0	0	0	0	0	32
PRIOR 2022 REPORTING YEAR TOTAL	1	0	29	0	0	1	0	1	0	0	0	0	0	0	32

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT														
	ESTABLISHMENT REPORT													
SECTION B – EMPLOYER IDENTIFICATION														
OFS COMPANY ID EMPLOYER NAME														
M149641 CMS ENERGY														
ADDRES	ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERG	Y PLAZA	JACKSON	MI	49201										
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)											
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E											
1767331		Consumers Energy												
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE										
69333 OMO RD ARMADA MI 48005														
	SECTION D - EMPLOYER ID	ENTIFICATION NUMBER (EIN)												

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	- DI	201101	111 ,	VOKKI	ORCE		Race/E								
		anic					Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	1	1	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
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	0	0	0	0	0	0	0
Craft Workers	0	0	12	0	0	0	0	0	0	0	0	0	0	0	12
Operatives	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	15	1	1	0	0	0	2	0	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	0	0	15	1	1	0	0	0	2	0	0	0	0	0	19

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT ESTABLISHMENT REPORT													
SECTION B – EMPLOYER IDENTIFICATION													
OFS COMPANY ID EMPLOYER NAME													
M149641 CMS ENERGY													
ADDRES	ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERG	SY PLAZA	JACKSON	MI	49201									
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	icable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ										
1767197		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
5035 PROGRESS DR LUDINGTON MI 49431													
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310													
SECTION E – EMPLOYER FILING ELIGIBILITY													

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	- DI	201101	, ,,	VOKKI	ORCE										
							Race/E								
		anic					Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	4	0	0	0	0	0	0	0	0	0	0	0	5
Professionals	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Technicians	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Craft Workers	1	0	18	0	0	0	0	0	0	0	0	0	0	0	19
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	29	0	0	0	0	0	1	0	0	0	0	0	32
PRIOR 2022 REPORTING YEAR TOTAL	2	0	29	0	0	0	0	0	1	0	0	0	0	0	32

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT ESTABLISHMENT REPORT													
SECTION B – EMPLOYER IDENTIFICATION													
OFS COMPANY ID EMPLOYER NAME													
M149641		CMS ENERGY											
ADDRES	ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERG	Y PLAZA	JACKSON	MI	49201									
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Ι Ε										
J027062		Consumers Energy											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE													
1955 W PARNALL RD JACKSON MI 49201													
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)													

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

		.01101	, ,	. 011111	OHOL	DEMO		thnicit							
	∐icr	anic	ı					Hispan		atino					
		anic atino			RA	ale	NOL	пізраі	IIC OI L	ашю	Eon	nale			
	OI L	auno	ļ		IVI	ale		1		1	rei	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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	27	2	0	0	0	0	5	0	1	0	0	0	37
Professionals	1	2	22	1	1	0	0	0	22	1	1	0	0	0	51
Technicians	0	0	10	1	0	0	0	1	8	0	0	0	0	0	20
Sales Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Administrative Support Workers	0	0	13	2	0	0	0	0	21	2	1	0	0	0	39
Craft Workers	5	0	91	1	0	0	3	1	2	0	0	0	0	0	103
Operatives	3	0	32	3	0	0	0	1	6	0	0	0	0	0	45
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	11	2	195	10	1	0	3	3	65	3	3	0	0	0	296
PRIOR 2022 REPORTING YEAR TOTAL	11	2	193	10	1	0	3	3	66	3	3	0	0	0	295

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT ESTABLISHMENT REPORT													
SECTION B – EMPLOYER IDENTIFICATION													
OFS COMPANY ID EMPLOYER NAME													
M149641													
ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERG	Y PLAZA	JACKSON	MI	49201									
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Ι Ε										
JA29525		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
2219 CHAPIN ST JACKSON MI 49203													
	SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)												

380442310

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SI.	CHOP	V П — V	VORKE	OKCE	DEMO	GKAPI	HC DA	IA						
							Race/E	thnicit	y						
	Hisp	anic					Not	Hispan	ic or L	atino					1
	or L	atino			M	ale					Fer	nale			1
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
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	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	20	0	0	0	0	0	0	0	0	0	0	0	20
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	25	1	0	0	0	0	2	0	0	0	0	0	28
PRIOR 2022 REPORTING YEAR TOTAL	0	0	25	1	0	0	0	0	2	0	0	0	0	0	28

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME JA29514 Consumers Energy HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE

${\bf SECTION\,D-EMPLOYER\,IDENTIFICATION\,NUMBER\,(EIN)}$

120 FRONT AVE SW

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

GRAND RAPIDS

MI

49504

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHON	v п – v	VUKKI	OKCE	DEMO	GKAPI	HC DA	1A						
							Race/E	thnicity	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
İ															
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		YPE OF REPORT MENT REPORT		
	SECTION B - EMPLO	YER IDENTIFICATION		
OFS COMPANY ID		EMPLOYER NAME		
M149641		CMS ENERGY		
ADDRES	S	CITY/TOWN	STATE	ZIP CODE
1 ENERG	Y PLAZA	JACKSON	MI	49201
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)	
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ	
B230294		Consumers Energy		
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE
1000 GRAN	D OAKS DR	HOWELL	MI	48843
		ENTIFICATION NUMBER (EIN) 442310		

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

	SE	CTION	1 H – V	VORKF	ORCE	DEMO	GRAPI	HC DA	TA						
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	1	0	9	1	0	0	0	0	5	0	0	0	0	0	16
Professionals	0	0	7	0	0	0	0	1	11	0	0	0	0	0	19
Technicians	0	0	3	0	0	0	0	0	3	0	0	0	0	0	6
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	3	0	0	0	0	0	3
Craft Workers	0	0	20	0	0	0	0	0	3	0	0	0	0	0	23
Operatives	0	0	17	1	0	0	0	0	3	0	0	0	0	0	21
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	57	2	0	0	0	1	28	0	0	0	0	0	89
PRIOR 2022 REPORTING YEAR TOTAL	0	0	58	2	0	0	0	1	28	0	0	0	0	0	89

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT													
ESTABLISHMENT REPORT													
SECTION B – EMPLOYER IDENTIFICATION													
OFS COMPANY ID EMPLOYER NAME													
M149641													
ADDRES	ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERG	Y PLAZA	JACKSON	MI	49201									
SECTION C -	- HEADQUARTERS OR ESTABLIS	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Ι Ε										
M664331		Consumers Energy											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE													
17000 CROSWELL ST WEST OLIVE MI 49460													
SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)													

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHO	1 II - V	VOKKI	OKCE	DEMO									
								thnicit							
	Hisp	anic					Not	Hispan	ic or L	atino					
	or La	atino			M	lale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	32	5	0	0	0	1	5	0	1	0	0	0	46
Professionals	2	0	27	0	0	0	0	0	5	0	0	0	0	0	34
Technicians	0	0	17	1	0	0	0	0	3	0	1	0	0	0	22
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	1	0	0	0	0	0	0	4	0	0	0	0	0	5
Craft Workers	8	1	102	5	0	0	2	2	6	1	0	0	1	0	128
Operatives	2	2	45	4	0	0	0	2	2	0	0	0	0	0	57
Laborers and Helpers	0	0	8	0	0	0	0	1	0	1	0	0	0	0	10
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	14	4	231	15	0	0	2	6	25	2	2	0	1	0	302
PRIOR 2022 REPORTING YEAR TOTAL	14	4	237	15	0	0	2	6	27	2	2	0	1	0	310

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT ESTABLISHMENT REPORT												
	SECTION B - EMPLO	YER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641		CMS ENERGY										
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE								
1 ENERG	1 ENERGY PLAZA JACKSON MI 49201											
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Ι Ε									
J027095		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
11801 FARMINGTON RD LIVONIA MI 48150												
		ENTIFICATION NUMBER (EIN)										

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CTION	N H – V	VORKF	ORCE	DEMO	GRAPI	HC DA	TA						
							Race/E	thnicit	у						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	1	20	5	3	0	0	2	8	5	1	0	0	2	49
Professionals	0	5	28	8	2	0	0	0	16	14	1	0	0	1	75
Technicians	1	0	5	1	1	0	0	0	9	5	0	0	0	0	22
Sales Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	1	1	0	0	0	0	0	7	2	1	0	1	0	13
Craft Workers	1	0	35	7	0	0	0	1	9	4	0	0	1	0	58
Operatives	0	1	35	6	0	0	0	0	1	0	0	0	0	0	43
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	4	8	127	27	6	0	0	3	50	30	3	0	2	3	263
PRIOR 2022 REPORTING YEAR TOTAL	4	8	128	27	5	0	0	3	53	30	2	0	1	3	264

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049

2020 EMI 2012N	II (I OILL III OIL I (EI	or com or er (1)	Expirati	on Date: 11/30/2026							
	SECTION A - T	TYPE OF REPORT									
	ESTABLISH	IMENT REPORT									
	SECTION B - EMPLO	OYER IDENTIFICATION									
OFS COMPANY ID		EMPLOYER NAME									
M149641 CMS ENERGY											
ADDRESS CITY/TOWN STATE ZIP CODE											
1 ENERGY PLAZA JACKSON MI 49201											
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ								
M664302		Consumers Energy									
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE							
2742 WEAL	2742 WEADOCK HWY ESSEXVILLE MI 48732										
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310											
	SECTION E – EMPLOY	ER FILING ELIGIBILITY									
X YES (Employer Is Elig	X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H – WORKFORCE DEMOGRAPHIC DATA															
	Race/Ethnicity														
	Hisp	anic					Not	Hispan	ic or L	atino					1
		atino			М	ale					Fen	nale			1
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	35	0	0	0	1	0	2	0	0	0	0	0	40
Professionals	0	0	40	0	2	0	1	0	9	0	0	0	0	0	52
Technicians	1	0	11	0	0	0	0	0	6	0	0	0	0	0	18
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	3	0	0	0	0	0	3
Craft Workers	4	0	82	0	0	0	1	0	2	0	0	0	0	0	89
Operatives	2	0	29	0	0	0	1	0	3	0	0	0	0	0	35
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	9	0	197	0	2	0	4	0	25	0	0	0	0	0	237
PRIOR 2022 REPORTING YEAR TOTAL	9	0	198	0	2	0	4	0	25	0	0	0	0	0	238

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

			Expiration	on Date: 11/30/2026									
	SECTION A – TYPE OF REPORT												
	ESTABLISH	MENT REPORT											
SECTION B - EMPLOYER IDENTIFICATION													
OFS COMPANY ID EMPLOYER NAME													
M149641 CMS ENERGY													
ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERGY PLAZA JACKSON MI 49201													
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E										
P157205		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
330 CHESTNUT ST CADILLAC MI 49601													
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310													
SECTION E – EMPLOYER FILING ELIGIBILITY													
V MEG (E 1 I E):	THE PROPERTY AND	EICH A EIL DEMBLOWED NO LONGE	D IN DISCINI	700									

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CTION	N H – V	VORKE	ORCE	DEMO	GRAPI	HC DA	TA						
							Race/E	thnicity	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	9	0	0	0	0	0	1	0	0	0	0	0	10
Professionals	0	0	10	0	0	0	0	0	6	0	0	0	0	0	16
Technicians	0	0	8	0	0	0	0	0	3	0	0	0	0	0	11
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	2	0	0	0	0	0	7	0	0	0	0	0	9
Craft Workers	0	0	23	0	0	0	0	0	0	0	0	0	0	0	23
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	54	0	0	0	0	0	17	0	0	0	0	0	71
PRIOR 2022 REPORTING YEAR TOTAL	0	0	59	0	0	0	0	0	16	0	0	0	0	0	75
TRION 2022 NEI ORTINO TEAR TOTAL				WODK						ŭ	•	Ť	Ů	•	

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME **Consumers Energy**

W327137

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 2700 BENZIE HWY **BENZONIA** MI 49616

SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H – WORKFORCE DEMOGRAPHIC DATA

	SE	CHON	v п – v	VUKKI	OKCE	DEMO	GKAPI	HC DA	IA						
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
İ															
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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	0	0	0	0	0	0	0
Craft Workers	0	0	14	0	0	0	1	0	0	0	0	0	0	0	15
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	18	0	0	0	1	0	0	0	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	0	0	18	0	0	0	1	0	0	0	0	0	0	0	19

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT												
	ESTABLISH	MENT REPORT										
	SECTION B - EMPLOYER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E									
1166110	1166110 Consumers Energy											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE												
2400 WI	2400 WEISS ST SAGINAW MI 48602											
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)												

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CTION	1 H – V	VUKKE	ORCE	DEMO	GKAPI	HC DA	TA						
							Race/E	thnicit	у						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	29	4	0	0	0	0	16	1	0	0	0	0	51
Professionals	2	2	31	1	0	0	0	0	27	1	0	0	0	0	64
Technicians	1	0	14	1	0	0	0	0	31	2	0	0	0	1	50
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	2	6	17	4	0	1	0	1	58	20	1	0	0	0	110
Craft Workers	4	0	71	2	1	0	0	1	3	0	0	0	0	0	82
Operatives	5	0	24	0	0	0	0	0	1	1	0	0	0	0	31
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	14	9	187	12	1	1	0	2	136	25	1	0	0	1	389

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

			Expiratio	on Date: 11/30/2026							
	SECTION A - T	TYPE OF REPORT									
	ESTABLISH	MENT REPORT									
	SECTION B - EMPLO	OYER IDENTIFICATION									
OFS COMPANY ID EMPLOYER NAME											
M149641 CMS ENERGY											
ADDRESS CITY/TOWN STATE ZIP CODE											
1 ENERGY PLAZA JACKSON MI 49201											
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)											
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ΙΕ								
J027104		Consumers Energy									
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE							
1325 WRIGHT AVE ALMA MI 48801											
SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)											
380442310											
	SECTION E – EMPLOYER FILING ELIGIBILITY										
X YES (Employer Is Elig	ible to File) NO (Employer Is Not	Eligible to File) EMPLOYER NO LONGE	R IN BUSINI	ESS							

SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)

Unique Entity ID (UEI): UNAVAILABLE

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

-	51		, , ,	VOKKI	ORCL		Race/E								
		anic					Not	Hispan	ic or L	atino					
	or La	atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	9	0	0	0	0	0	6	0	0	0	0	0	15
Professionals	1	0	11	0	0	0	0	0	9	0	0	0	0	0	21
Technicians	0	0	8	0	0	0	0	1	6	0	0	0	0	0	15
Sales Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Administrative Support Workers	1	3	3	0	0	0	0	0	40	1	0	0	0	0	48
Craft Workers	4	0	40	0	0	0	0	0	0	0	0	0	0	0	44
Operatives	0	0	10	0	0	0	0	1	1	0	0	0	0	0	12
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	6	3	82	0	0	0	0	2	63	1	0	0	0	0	157
PRIOR 2022 REPORTING YEAR TOTAL	6	3	82	0	0	0	0	2	63	1	1	0	0	0	158

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME W327148 **Consumers Energy** HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN ZIP CODE STATE 1325 TIPPY DAM RD WELLSTON MI 49689 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 SECTION E - EMPLOYER FILING ELIGIBILITY X 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

SECTION G – NAICS INFORMATION 221122 - Electric Power Distribution

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

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

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

SECTION H - WORKFORCE DEMOGRAPHIC DATA

		201101		OKIKI			Race/E								
	Hisn	anic						Hispan		atino					
		atino			М	ale	1101	mopun		uu	Fen	nale			
	<u> </u>	1				1						laio			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049

			Expirati	on Date: 11/30/2026							
	SECTION A - T	TYPE OF REPORT									
	ESTABLISH	MENT REPORT									
SECTION B – EMPLOYER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME									
M149641		CMS ENERGY									
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE							
1 ENERGY PLAZA JACKSON MI 49201											
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	icable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ								
JP89502		Consumers Energy									
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE											
2380 E L	incoln St	EAST TAWAS	MI	48730							
	SECTION D – EMPLOYER ID	ENTIFICATION NUMBER (EIN)									

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

) DE	CHO	111 - V	OKKI	OKCE									SECTION H - WORKFORCE DEMOGRAPHIC DATA						
							Race/E	thnicity	/											
	Hisp	anic					Not	Hispan	ic or L	atino										
		atino			М	ale					Fen	nale								
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	0	0	0	0	0	0	0	0	0	0	0	0	0					
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1					
Professionals	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4					
Technicians	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3					
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Administrative Support Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1					
Craft Workers	0	0	25	0	0	0	0	0	0	0	0	0	0	0	25					
Operatives	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3					
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0					
CURRENT 2023 REPORTING YEAR TOTAL	0	0	33	0	0	0	0	0	4	0	0	0	0	0	37					
PRIOR 2022 REPORTING YEAR TOTAL	0	0	33	0	0	0	0	0	4	0	0	0	0	0	37					

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

EEOC Standard Form 100 (SF 100)
Revised 08/2023
OMB Control Number 2046 0040

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		YPE OF REPORT MENT REPORT											
	SECTION B - EMPLO	YER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME											
M149641 CMS ENERGY ADDRESS CITY/TOWN STATE ZIP.CODE													
ADDRES	S	CITY/TOWN	STATE	ZIP CODE									
1 ENERGY PLAZA JACKSON MI 49201													
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Ι Ε										
W327183		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
124 W ALLEGAI	N ST, STE 1800	LANSING	MI	48933									
	SECTION D - EMPLOYER ID	ENTIFICATION NUMBER (EIN)											

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	- DI	201101	1 ,	VOKKI	ORCE										
							Race/E								
		anic					Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	1	1	0	0	0	0	1	0	0	0	0	0	3
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	0	0	0	0	0	0	0	1	0	0	0	0	0	1
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	3	1	0	0	0	0	3	0	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	0	0	3	1	0	0	0	0	3	0	0	0	0	0	7

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

	SECTION A - T	YPE OF REPORT										
	ESTABLISH	MENT REPORT										
	SECTION B - EMPLO	YER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Æ									
J027084		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
35350 KI	ELLY RD	CLINTON TOWNSHIP	MI	48035								
		ENTIFICATION NUMBER (EIN)										

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

) JE	CHOP	111 - V	OKKI	OKCE	DEMO									
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	9	6	1	0	0	0	7	2	0	0	1	0	26
Professionals	0	0	10	3	0	0	0	0	9	2	0	0	0	0	24
Technicians	0	0	4	0	0	0	0	0	7	0	0	0	0	1	12
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	3	1	0	0	0	0	4
Craft Workers	2	0	48	12	1	0	1	0	10	2	0	0	2	0	78
Operatives	0	0	46	4	0	0	0	0	3	1	0	0	0	0	54
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	117	25	2	0	1	0	39	8	0	0	3	1	198
PRIOR 2022 REPORTING YEAR TOTAL	2	0	118	25	2	0	1	0	39	8	0	0	3	1	199

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049

			Expirati	on Date: 11/30/2026									
	SECTION A - T	YPE OF REPORT											
	ESTABLISH	MENT REPORT											
	SECTION B – EMPLO	OYER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME											
M149641 CMS ENERGY													
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE									
1 ENERGY PLAZA JACKSON MI 49201													
SECTION C -	SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)												
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ΙΕ										
1767241		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
8613 P	INE RD	MARION	MI	49665									
	SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310												
	SECTION E _ EMPLOY	ED EII ING EI IGIRII ITV											

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
	Race/Ethnicity Hispanic Not Hispanic or Latino														
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Technicians	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
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	0	0	8	0	0	0	0	1	1	0	0	0	0	0	10
Operatives	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	12	0	0	0	0	1	5	0	0	0	0	0	18
PRIOR 2022 REPORTING YEAR TOTAL	0	0	12	0	0	0	0	1	5	0	0	0	0	0	18

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049

	`	,	Expirat	ion Date: 11/30/2026									
	SECTION A - T	TYPE OF REPORT											
	ESTABLISH	MENT REPORT											
	SECTION B - EMPLO	OYER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME											
M149641		CMS ENERGY											
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE									
1 ENERG	BY PLAZA	JACKSON	MI	49201									
SECTION C -	SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)												
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ										
FH11376		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
14500 DI	XIE HWY	HOLLY	MI	48442									
		ENTIFICATION NUMBER (EIN) 1442310											
	SECTION E – EMPLOY	ER FILING ELIGIBILITY											

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CTION	I H – V	VORKF	ORCE	DEMO	GRAPI	IIC DA	TA						
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
															1
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	11	1	0	0	1	0	3	0	0	0	0	0	16
Professionals	0	0	9	0	1	0	0	0	4	0	0	0	0	0	14
Technicians	0	0	6	1	0	0	0	0	4	1	0	0	0	0	12
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	1	0	3	1	0	0	0	0	3	0	0	0	0	1	9
Craft Workers	1	0	29	1	0	0	0	0	4	1	0	0	0	0	36
Operatives	0	0	26	0	0	0	0	1	3	0	0	0	0	0	30
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	84	4	1	0	1	1	21	2	0	0	0	1	117
PRIOR 2022 REPORTING YEAR TOTAL	2	0	84	4	1	0	0	1	22	2	0	0	0	1	117

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME JQ32534 Consumers Energy HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 190 Cemetery Road **ROBERT LEE** TX 76945 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310 SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H – WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity															
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
2022 01(111/0 12/11(1017)2		ECTI	NIT '	WODK	EODCI	CNIAD	CHOTI	DEDIOI							

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049

2020 21/11 210 1211	in out of the out of the out	or com or entry	Expirati	on Date: 11/30/2026									
	SECTION A - T	TYPE OF REPORT											
	ESTABLISH	MENT REPORT											
	SECTION B - EMPLO	OYER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME											
M149641													
ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA 1 ACKSON 1 ACKS													
1 ENERGY PLAZA JACKSON MI 49201													
SECTION C -	HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	icable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ										
M664287		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
1935 W PA	RNALL RD	JACKSON	MI	49201									
		ENTIFICATION NUMBER (EIN) 0442310											
	SECTION E – EMPLOY	ER FILING ELIGIBILITY											
X YES (Employer Is Elig	rible to File) NO (Employer Is Not	Eligible to File) EMPLOYER NO LONGE	R IN BUSIN	ESS									

SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)

<u>Unique Entity ID (UEI):</u> UNAVAILABLE

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H – WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity															
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	11	0	0	0	0	0	2	0	0	0	0	0	13
Professionals	4	0	39	2	3	1	0	0	7	0	0	0	0	0	56
Technicians	1	0	5	1	0	0	0	0	0	0	0	0	0	0	7
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	3	0	0	0	0	0	2	1	0	0	0	0	6
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	5	0	58	3	3	1	0	0	11	1	0	0	0	0	82
PRIOR 2022 REPORTING YEAR TOTAL	5	0	57	3	3	1	0	0	12	1	0	0	0	0	82

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

2023 EMI EOTEK	IN ORMATION REPORT (EI	20-1 COMI ONEMI I)	Expiration	on Date: 11/30/2026							
		TYPE OF REPORT IMENT REPORT									
072 201 711 1111	SECTION B - EMPLO	OYER IDENTIFICATION									
OFS COMPANY ID		EMPLOYER NAME									
M149641 CMS ENERGY											
ADDRESS CITY/TOWN STATE ZIP CODE											
1 ENERGY PLAZA JACKSON MI 49201											
SECTION C -	HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ΙE								
PC56064		Consumers Energy									
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE							
1850 Bay	City Rd.	MIDLAND	MI	48642							
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310											
	SECTION E - EMPLOY	ER FILING ELIGIBILITY									
X YES (Employer Is Elig	ible to File) 🔲 NO (Employer Is Not	Eligible to File)	R IN BUSINI	ESS							
	SECTION E FEDERAL CONTR	CTOD DECICNATION (if1:1-1-)									

 $\textbf{SECTION F-FEDERAL CONTRACTOR DESIGNATION} \ (if applicable)$

Unique Entity ID (UEI): UNAVAILABLE

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	51	201101	1	, 011111	ONCE	DEMIO									
								thnicity							
		anic					Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	6	0	0	0	0	0	0	0	0	0	1	0	8
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	2	0	33	3	0	0	1	0	2	0	0	0	0	0	41
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	41	3	0	0	1	0	2	0	0	0	1	0	51
PRIOR 2022 REPORTING YEAR TOTAL	2	0	41	3	0	0	1	0	2	0	0	0	1	0	50

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		YPE OF REPORT MENT REPORT										
SECTION B – EMPLOYER IDENTIFICATION												
OFS COMPANY ID EMPLOYER NAME												
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERG	Y PLAZA	JACKSON	MI	49201								
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Ι Ε									
1767296	1767296 Consumers Energy											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE												
4131 138	4131 138TH AVE HAMILTON MI 49419											
	SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)											

380442310

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHON	v п – v	VUKKI	OKCE	DEMO	GKAPI	HC DA	IA						
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
İ															
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	3	0	0	0	0	0	3	0	0	0	0	0	6
Technicians	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
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	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	13	0	0	0	0	0	5	0	0	0	0	0	18
PRIOR 2022 REPORTING YEAR TOTAL	0	0	14	0	0	0	0	0	4	0	0	0	0	0	18

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

EEOC Standard Form 100 (SF 100)

	U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1) SECTION A – TYPE OF REPORT												Revised ontrol Nu ation Dat	mber: 30	
			SECT	TON A	- TYPI	E OF RI	EPORT				I				
			ES	STABLI	SHME	NT REF	ORT								
		SECT	ION B	- EMP	LOYE	R IDEN									
OFS COMPANY ID								OYER N							
M149641							CMS	ENER	GY						
ADDRESS								TY/TOW				STATE		ZIP CC	
1 ENERGY	PLAZA						JA	ACKSO	N			MI		4920)1
SECTION C - H	EADQU	ARTEI	RS OR	ESTAB	LISHN	1ENT-L	EVEL	IDENT	IFICA	TION (if	fapplica	ble)	•		
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEADQ					-LEVEL	NAME				
l767021							Consu	mers Ei	nergy						
HEADQUARTERS OR ESTABLISHM		/EL ADD	RESS				CI	TY/TOW	/N			STATE		ZIP CC	DE
115 W TRA	IL ST						JA	ACKSO	N			MI		4920)1
	SECTI	ON D -	EMPI	LOYER			TION N	UMBE	R (EIN)	l .		ı		
380442310 SECTION E – EMPLOYER FILING ELIGIBILITY															
XYES (Employer Is Eligible										NO LON	IGER I	N BUS	INESS		
SE	CTION	F – FEI <u>Uni</u>	DERAI ique En	L CONT tity ID (RACT UEI):	OR DE	SIGNA' ILABLE	ΓΙΟΝ (i	if applic	able)					
YES (Single-Establish	-	•								. •					
X YES (Headqua							•		ishment : s Federa			actor)		
			ECTIC	ON G - I	NAICS	INFOR	MATIO	N							
	SE	CTION		VORKF					TA						
							Race/E	thnicity	у						
		anic					Not	Hispan	ic or L	atino					
	or Latino Male Female														
JOB CATEGORIES									Row Total						

							Race/E	thnicity	у						
	Hisp	anic					Not	Hispan	ic or L	atino					
	or L	atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2

SECTION I – WORKFORCE SNAPSHOT PERIOD 12/16/2023 - 12/31/2023

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

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1) SECTION A – TYPE OF REPORT

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		YPE OF REPORT MENT REPORT										
SECTION B - EMPLOYER IDENTIFICATION												
OFS COMPANY ID EMPLOYER NAME												
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Ι Ε									
1766902	1766902 Consumers Energy											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE												
696 N PORT 0	696 N PORT CRESCENT ST BAD AXE MI 48413											
SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)												

380442310

SECTION E – EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHON	111 - V	OKKI	OKCE	DEMO									
							Race/E	thnicit	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Operatives	1	0	3	0	0	0	0	0	1	0	0	0	0	0	5
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	7	0	0	0	0	0	3	0	0	0	0	0	11
PRIOR 2022 REPORTING YEAR TOTAL	1	0	7	0	0	0	0	0	3	0	0	0	0	0	11

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME

Consumers Energy HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN

4925 PROGRESS DR

GF46694

STATE ZIP CODE **LUDINGTON** MI 49431

SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHO	111 - V	OKKI	OKCE	DEMO									
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	7	0	0	0	0	0	0	0	0	0	0	0	7
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	10	0	0	0	0	0	1	0	0	0	0	0	11
PRIOR 2022 REPORTING YEAR TOTAL	0	0	10	0	0	0	0	0	1	0	0	0	0	0	11

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		YPE OF REPORT MENT REPORT										
SECTION B – EMPLOYER IDENTIFICATION												
OFS COMPANY ID EMPLOYER NAME												
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERG	SY PLAZA	JACKSON	MI	49201								
SECTION C -	- HEADQUARTERS OR ESTABLIS	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ									
J027073	J027073 Consumers Energy											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE												
2613 E MA	AUMEE ST	ADRIAN	MI	49221								
_	SECTION D - EMPLOYER ID	ENTIFICATION NUMBER (EIN)		_								

380442310

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	01	201101	, ,	, 011111	ONCE	DEMO									
							Race/E								
		anic					Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	6	0	0	0	0	0	2	0	0	0	0	0	8
Professionals	1	1	5	0	0	0	0	0	4	0	0	0	0	0	11
Technicians	0	0	4	0	0	0	0	0	2	0	0	0	0	0	6
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	1	1	0	0	0	0	0	0	0	0	0	0	0	2
Craft Workers	1	0	43	1	0	0	1	0	0	0	0	0	0	0	46
Operatives	0	0	8	1	0	0	0	0	0	0	0	0	0	0	9
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	2	67	2	0	0	1	0	8	0	0	0	0	0	82
PRIOR 2022 REPORTING YEAR TOTAL	2	2	67	2	0	0	1	0	8	0	0	0	0	0	82

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

	SECTION A - T	YPE OF REPORT										
	ESTABLISH	MENT REPORT										
	SECTION B - EMPLO	YER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ſΕ									
W327720		Consumers Energy										
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE												
2400 MILLER RD DEARBORN MI 48120												
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310												

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H – WORKFORCE DEMOGRAPHIC DATA															
							Race/E	thnicit	У						
	Hisp	anic	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
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	9	0	0	0	0	0	0	0	0	0	0	0	9
Professionals	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Technicians	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	4	2	0	0	0	0	0	0	0	0	0	0	6
Craft Workers	0	0	11	2	0	0	0	0	0	0	0	0	0	0	13
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	30	4	0	0	0	0	1	0	0	0	0	0	35
PRIOR 2022 REPORTING YEAR TOTAL	0	0	31	4	0	0	0	0	1	0	0	0	0	0	36

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

	SECTION B – EMPLOYER IDENTIFICATION												
OFS COMPANY ID EMPLOYER NAME													
M149641 CMS ENERGY													
ADDRES	S	CITY/TOWN	STATE	ZIP CODE									
1 ENERG	Y PLAZA	JACKSON	49201										
SECTION C -	- HEADQUARTERS OR ESTABLIS	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	I E										
PC56174		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
4525 E E	ERIE RD	ERIE	MI	48133									
	SECTION D - EMPLOYER ID	ENTIFICATION NUMBER (FIN)											

380442310

SECTION E – EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
							Race/E	thnicit	/						
	Hisp	anic	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
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	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

	•	•	Expiration	on Date: 11/30/2026									
	SECTION A - T	TYPE OF REPORT											
	ESTABLISH	IMENT REPORT											
	SECTION B – EMPLOYER IDENTIFICATION												
OFS COMPANY ID EMPLOYER NAME													
M149641	CMS ENERGY												
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE									
1 ENERG	SY PLAZA	JACKSON	MI	49201									
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)													
HQ/ESTABLISHMENT-LEVEL UNIT ID	НЕ	EADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Æ										
CK59288		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
G5310 N D	ORT HWY	FLINT	MI	48505									
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310													
SECTION E – EMPLOYER FILING ELIGIBILITY													
X YES (Employer Is Elig	gible to File) NO (Employer Is Not	Eligible to File)	R IN BUSINI	ESS									

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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H – WORKFORCE DEMOGRAPHIC DATA															
	Race/Ethnicity														
	Hisp	anic	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
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	4	0	0	0	0	0	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Technicians	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Craft Workers	0	0	11	1	0	0	0	0	0	0	0	0	0	0	12
Operatives	0	0	4	1	0	0	1	0	0	0	0	0	0	0	6
Laborers and Helpers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	29	2	0	0	1	0	3	0	0	0	0	0	35
PRIOR 2022 REPORTING YEAR TOTAL	0	0	29	2	0	0	1	0	3	0	0	0	0	0	35

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

	Expired	on Date: 11/50/2020							
	SECTION A - T	YPE OF REPORT							
	ESTABLISH	MENT REPORT							
	SECTION B - EMPLO	YER IDENTIFICATION							
OFS COMPANY ID EMPLOYER NAME									
M149641 CMS ENERGY									
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE					
1 ENERG	SY PLAZA	JACKSON	MI	49201					
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if ap	plicable)						
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NA	ME						
W327335		Consumers Energy							
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE					
4400 W 4	MILE RD	GRAYLING	MI	49738					
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310									

SECTION E – EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H – WORKFORCE DEMOGRAPHIC DATA															
							Race/E	thnicity	/						
	Hisp	anic		Not Hispanic or Latino											
	or Latino		Male Female												
İ															
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Craft Workers	0	0	10	0	0	0	0	0	0	0	0	0	0	0	10
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	17	0	0	0	0	0	2	0	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	0	0	18	0	0	0	0	0	3	0	0	0	0	0	21

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		YPE OF REPORT MENT REPORT											
	SECTION B - EMPLO	YER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME											
M149641 CMS ENERGY													
ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERGY PLAZA JACKSON MI 49201													
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ										
P157214		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE												
1100 E WASHINGTON ST GREENVILLE MI 48838													
	SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)												

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA Race/Fthnicity															
	Race/Ethnicity Hispanic Not Hispanic or Latino														
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	1	0	0	0	0	0	0	0	0	0	0	6
Professionals	0	0	4	0	0	0	0	0	1	0	0	0	0	0	5
Technicians	0	0	3	0	0	0	0	0	2	0	0	0	0	0	5
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	1	0	0	0	0	0	3	0	0	0	0	0	4
Craft Workers	0	0	33	0	0	0	2	0	2	0	0	0	0	0	37
Operatives	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	51	1	0	0	2	0	9	0	0	0	0	0	63
PRIOR 2022 REPORTING YEAR TOTAL	0	0	52	1	0	0	2	0	9	0	0	0	0	0	64

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

			Expirati	on Date. 11/30/2020								
	SECTION A - T	YPE OF REPORT										
	ESTABLISH	MENT REPORT										
	SECTION B - EMPLO	OYER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ſŒ									
1767221		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
1220 S KALAMAZOO AVE MARSHALL MI 49068												
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310												
	SECTION E - EMPLOY	ER FILING ELIGIBILITY										

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

) DE	CHO	4 11 — A	OKK	OKCE	DEMO									
	Race/Ethnicity Hispanic Not Hispanic or Latino														
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	2	0	0	0	0	0	5
Professionals	0	0	8	0	0	0	0	0	2	0	0	0	0	0	10
Technicians	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
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	0	0	0	0	0	0	0
Craft Workers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Operatives	0	0	0	1	0	0	0	0	1	0	0	0	0	0	2
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	15	1	0	0	0	0	7	0	0	0	0	0	23
PRIOR 2022 REPORTING YEAR TOTAL	0	0	15	1	0	0	0	0	8	0	0	0	0	0	24

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME JO63365 **Consumers Energy** HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE

${\bf SECTION\,D-EMPLOYER\,IDENTIFICATION\,NUMBER\,(EIN)}$

3253 M-76

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

STANDISH

MI

48658

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	5r	CHOP	1 H – V	VOKKE	OKCE	DEMO	GKAPI	HC DA	IA						
							Race/E	thnicity	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

	~	YPE OF REPORT											
	ESTABLISH	MENT REPORT											
SECTION B – EMPLOYER IDENTIFICATION													
OFS COMPANY ID		EMPLOYER NAME											
M149641 CMS ENERGY													
ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERG	1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLIS	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Ι Ε										
W327172		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
16900 POLK ST WEST OLIVE MI 49460													
_	SECTION D - EMPLOYER ID	ENTIFICATION NUMBER (EIN)											

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	- DI	201101	1	, 011111	ORCE	DEMIO									
	Race/Ethnicity Hispanic Not Hispanic or Latino														
							Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
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	9	1	0	0	0	0	3	0	0	0	0	0	13
Professionals	0	0	37	0	0	0	1	0	7	0	0	0	0	0	45
Technicians	0	0	3	0	0	0	0	0	2	1	0	0	0	0	6
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	0	0	1	0	0	0	1
Craft Workers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	53	1	0	0	1	0	12	1	1	0	0	0	69
PRIOR 2022 REPORTING YEAR TOTAL	0	0	55	1	0	0	1	0	12	1	1	0	0	0	71

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME PU98675 **Consumers Energy**

${\bf SECTION\,D-EMPLOYER\,IDENTIFICATION\,NUMBER\,(EIN)}$

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS

11109 CHICAGO DR

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

CITY/TOWN

ZEELAND

STATE

MI

ZIP CODE

49464

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H – WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity															
							Race/E	thnicity	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

			Expiration	on Date: 11/30/2026								
	SECTION A - T	TYPE OF REPORT										
	ESTABLISH	MENT REPORT										
	SECTION B - EMPLO	OYER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	olicable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NA	ME									
PC56130		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
409 S.	409 S. Cooper JACKSON MI 49201											
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310												
	SECTION E – EMPLOY	ER FILING ELIGIBILITY										

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
	Race/Ethnicity Hispanic Not Hispanic or Latino														
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
İ															
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	1	0	28	0	0	0	0	0	0	0	0	0	0	0	29
Laborers and Helpers	2	0	8	0	0	0	0	0	0	0	0	0	0	0	10
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	42	0	0	0	0	0	1	0	0	0	0	0	46
PRIOR 2022 REPORTING YEAR TOTAL	3	0	43	0	0	0	0	0	1	0	0	0	0	0	47

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

			Expirati	on Date: 11/30/2026									
	SECTION A - T	TYPE OF REPORT											
	ESTABLISH	MENT REPORT											
	SECTION B - EMPLO	OYER IDENTIFICATION											
OFS COMPANY ID		EMPLOYER NAME											
M149641 CMS ENERGY													
ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERGY PLAZA JACKSON MI 49201													
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	I E										
1166090		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
530 W WILLOW ST LANSING MI 48906													
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310													
	SECTION E – EMPLOY	ER FILING ELIGIBILITY											

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
	Race/Ethnicity Hispanic Not Hispanic or Latino														
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	2	0	42	0	1	0	0	0	20	5	0	0	0	1	71
Professionals	1	3	46	2	0	0	0	1	38	5	0	0	0	3	99
Technicians	1	0	13	3	0	0	0	0	15	0	0	1	0	1	34
Sales Workers	0	0	7	1	0	0	0	0	3	0	0	0	0	0	11
Administrative Support Workers	0	11	25	1	0	0	1	0	54	12	2	0	0	1	107
Craft Workers	3	0	100	2	0	0	1	0	1	0	0	0	0	0	107
Operatives	6	1	36	0	0	0	2	0	4	0	0	0	0	0	49
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	13	15	269	9	1	0	4	1	135	22	2	1	0	6	478
PRIOR 2022 REPORTING YEAR TOTAL	13	15	266	10	1	0 E CNIA D	4	1	133	22	1	1	0	6	473

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME GF46683 **Consumers Energy**

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)

380442310

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS

3741 W HOPPE RD

SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

CITY/TOWN

UNIONVILLE

STATE

MI

ZIP CODE

48767

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHO	111 – V	VUKKI	OKCE	DEMO									
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	15	0	0	0	0	0	0	0	0	0	0	0	15
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	18	0	0	0	0	0	1	0	0	0	0	0	19
PRIOR 2022 REPORTING YEAR TOTAL	0	0	18	0	0	0	0	0	1	0	0	0	0	0	19

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049

2023 EMI LOTER	INFORMATION REPORT (EI	20-1 COMI ONENT 1)	Expirati	on Date: 11/30/2026							
		TYPE OF REPORT MENT REPORT									
	SECTION B - EMPLO	OYER IDENTIFICATION									
OFS COMPANY ID		EMPLOYER NAME									
M149641 CMS ENERGY											
ADDRESS CITY/TOWN STATE ZIP CODE											
1 ENERGY PLAZA JACKSON MI 49201											
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ								
1767212		Consumers Energy									
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE							
7950 PARTR	IDGE AVE, F	MARION	MI	49665							
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310											
SECTION E – EMPLOYER FILING ELIGIBILITY											
X YES (Employer Is Elig	rible to File) NO (Employer Is Not	Eligible to File) EMPLOYER NO LONGE	R IN BUSIN	ESS							
	SECTION F – FEDERAL CONTRA	ACTOR DESIGNATION (if applicable)	·	_							

Unique Entity ID (UEI): UNAVAILABLE

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

) JE	CHO	4 11 — A	OKK	OKCE	DEMO									
							Race/E	thnicity	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Technicians	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
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	0	0	0	0	0	0	0
Craft Workers	0	0	16	0	1	0	0	0	0	0	0	0	0	0	17
Operatives	1	0	3	0	0	0	0	0	0	0	0	0	0	0	4
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	23	0	1	0	0	0	3	0	0	0	0	0	28
PRIOR 2022 REPORTING YEAR TOTAL	1	0	25	0	1	0	0	0	3	0	0	0	0	0	30

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)

EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049

2023 EMPLOYER	INFORMATION REPORT (EF	LO-I COMPONENT I)		on Date: 11/30/2026							
	SECTION A - T	TYPE OF REPORT									
	ESTABLISH	MENT REPORT									
	SECTION B - EMPLO	OYER IDENTIFICATION									
OFS COMPANY ID		EMPLOYER NAME									
M149641 CMS ENERGY											
ADDRESS CITY/TOWN STATE ZIP CODE											
1 ENERGY PLAZA JACKSON MI 49201											
SECTION C -	HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ſΕ								
JQ32523		Consumers Energy									
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE							
7881 S. El	y Highway	MIDDLETON	MI	48856							
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310											
SECTION E – EMPLOYER FILING ELIGIBILITY											
X YES (Employer Is Elig	ible to File) NO (Employer Is Not	Eligible to File) EMPLOYER NO LONGE	R IN BUSIN	ESS							
· · · · · · · · · · · · · · · · · · ·	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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHON	v п – v	VUKKI	OKCE	DEMO	GKAPI	HC DA	1A						
							Race/E	thnicity	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
İ															
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	1	0	13	0	0	0	0	0	0	0	0	0	0	0	14
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	18	0	0	0	0	0	1	0	0	0	0	0	20
PRIOR 2022 REPORTING YEAR TOTAL	1	0	18	0	0	0 E CNIA D	0	0	1	0	0	0	0	0	20

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

EEOC Standard Form 100 (SF 100)
Revised 08/2023
OMB Control Number: 3046-0040

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		·	Expirati	ion Date: 11/30/2026							
	SECTION A - T	YPE OF REPORT									
	ESTABLISH	MENT REPORT									
	SECTION B - EMPLO	OYER IDENTIFICATION									
OFS COMPANY ID		EMPLOYER NAME									
M149641 CMS ENERGY											
ADDRES	SS	CITY/TOWN	STATE	ZIP CODE							
1 ENERGY PLAZA JACKSON MI 49201											
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	I E								
PC56141		Consumers Energy									
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE							
4100 E. Baldwin HOLLY MI 48442											
		ENTIFICATION NUMBER (EIN) 1442310									
	SECTION E – EMPLOY	ER FILING ELIGIBILITY									

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHOP	(II – V	OKKI	OKCE	DEMO									
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	11	0	0	0	0	0	2	0	0	0	0	0	13
Professionals	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Operatives	4	0	62	3	0	0	0	1	2	0	0	0	0	0	72
Laborers and Helpers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	4	0	78	3	0	0	0	1	4	0	0	0	0	0	90
PRIOR 2022 REPORTING YEAR TOTAL	4	0	81	3	0	0	0	1	4	0	0	0	0	0	93

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME

SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

Consumers Energy

CITY/TOWN

JONESVILLE

STATE

MI

ZIP CODE

49250

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

) DE	CHO	4 11 — A	OKK	OKCE	DEMO									
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	10	0	0	0	0	0	0	0	0	0	0	0	10
Operatives	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	12	0	0	0	0	0	1	0	0	0	0	0	13
PRIOR 2022 REPORTING YEAR TOTAL	0	0	12	0	0	0	0	0	1	0	0	0	0	0	13

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

null

JQ32545

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS

701 Beck St

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)
HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME

BC34860 Consumers Energy

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS

CITY/TOWN

STATE

ZIP CODE

409 COOPER ST

JACKSON

MI

49201

${\bf SECTION\,D-EMPLOYER\,IDENTIFICATION\,NUMBER\,(EIN)}$

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

) JE	CHON	111 - V	OKKI	OKCE	DEMO									
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT													
	ESTABLISH	MENT REPORT											
SECTION B - EMPLOYER IDENTIFICATION													
OFS COMPANY ID													
M149641 CMS ENERGY													
ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERGY PLAZA JACKSON MI 49201													
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Ι Ε										
PC56103		Consumers Energy											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE													
425 N FAIRVIEW RD ZEELAND MI 49464													
	SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)												

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

) DE	CHO	4 11 — A	OKK	OKCE	DEMO									
							Race/E	thnicit	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	5	0	0	0	0	0	1	0	1	0	0	0	7
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	1	18	1	0	0	0	0	0	0	0	0	0	0	20
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	1	25	1	0	0	0	0	1	0	1	0	0	0	30
PRIOR 2022 REPORTING YEAR TOTAL	1	1	26	1	0	0	0	0	1	0	1	0	0	0	31

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT												
ESTABLISHMENT REPORT												
SECTION B – EMPLOYER IDENTIFICATION												
OFS COMPANY ID EMPLOYER NAME												
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLIS	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Ι Ε									
1166088	1166088 Consumers Energy											
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE												
2500 E C	2500 E CORK ST KALAMAZOO MI 49001											
SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)												

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H – WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
							Race/E	thnicit	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
	or L	atino			M	ale					Fer	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	21	5	0	0	0	1	2	1	0	0	0	0	31
Professionals	2	0	30	2	1	0	0	2	10	0	0	0	0	0	47
Technicians	2	0	10	1	1	0	0	0	6	1	1	0	0	0	22
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	7	0	0	0	1	0	5	1	1	0	0	0	15
Craft Workers	3	0	94	5	2	0	1	0	1	0	0	0	0	0	106
Operatives	1	0	21	2	0	0	1	0	3	0	0	0	0	0	28
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	9	0	184	15	4	0	3	3	27	3	2	0	0	0	250
PRIOR 2022 REPORTING YEAR TOTAL	9	0	189	15 WODE	4	0	3	3	26	3	2	0	0	0	254

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

			2. pride	on Date: 11/30/2020								
	SECTION A - T	YPE OF REPORT										
	ESTABLISH	MENT REPORT										
	SECTION B - EMPLO	YER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	I E									
I766891		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
6051 STATE	6051 STATE ROUTE 65 OSCODA MI 48750											
		ENTIFICATION NUMBER (EIN)										

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CTION	1 H – V	VORKF	ORCE	DEMO	GRAPI	HIC DA	TA						
							Race/E	thnicit	у						
	Hisp	anic					Not	Hispan	ic or L	atino				-	
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	1	0	1
Craft Workers	0	0	11	0	0	0	0	0	0	0	0	0	0	0	11
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	13	0	0	0	0	0	0	0	0	0	1	0	14
PRIOR 2022 REPORTING YEAR TOTAL	0	0	13	0	0	0	0	0	0	0	0	0	1	0	14

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME

JA29536 Consumers Energy

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE
505 Jonesville Rd COLDWATER MI 49036

${\bf SECTION\,D-EMPLOYER\,IDENTIFICATION\,NUMBER\,(EIN)}$

380442310

SECTION E – EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHON	v п – v	VUKKI	OKCE	DEMO	GKAPI	HC DA	IA						
							Race/E	thnicity	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	1	0	2	0	0	0	0	0	1	0	0	0	0	0	4
Technicians	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
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	1	0	2	0	0	0	0	0	3
Craft Workers	1	0	31	1	0	0	1	0	0	0	0	0	0	0	34
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	39	1	0	0	2	0	3	0	0	0	0	0	47
PRIOR 2022 REPORTING YEAR TOTAL	2	0	40	1	0	0	2	0	3	0	0	0	0	0	48

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049

	`	,	Expirati	on Date: 11/30/2026								
	SECTION A - T	YPE OF REPORT										
	ESTABLISH	MENT REPORT										
	SECTION B - EMPLO	OYER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	I E									
1766920		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
400 N BRONSON AVE BIG RAPIDS MI 49307												
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310												
	SECTION E – EMPLOY	ER FILING ELIGIBILITY										

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	- DI	201101	1	VOKKI	ORCE		Race/E								
		anic					Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	3	0	0	0	0	0	1	0	0	0	0	0	4
Technicians	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Craft Workers	0	0	17	0	0	0	1	0	1	0	0	0	0	0	19
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	27	0	0	0	1	0	4	0	0	0	0	0	32
PRIOR 2022 REPORTING YEAR TOTAL	0	0	27	0	0	0	1	0	5	0	0	0	0	0	33

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)

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

2023 EMPLOYER	INFORMATION REPORT (EF	EO-1 COMPONENT 1)		rol Number: 3046-0049 on Date: 11/30/2026							
		TYPE OF REPORT									
		IMENT REPORT									
	SECTION B - EMPLO	OYER IDENTIFICATION									
OFS COMPANY ID		EMPLOYER NAME									
M149641		CMS ENERGY									
ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA JACKSON MI 49201											
SECTION C -	HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	EADQUARTERS OR ESTABLISHMENT-LEVEL NAM	Œ								
GP12303		Consumers Energy									
HEADQUARTERS OR ESTABLISI	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE							
3030	M 40	HAMILTON	MI	49419							
		DENTIFICATION NUMBER (EIN) 0442310									
	SECTION E – EMPLOY	YER FILING ELIGIBILITY									
X YES (Employer Is Elig	ible to File) NO (Employer Is Not	Eligible to File) EMPLOYER NO LONGE	R IN BUSIN	ESS							
	SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) <u>Unique Entity ID (UEI)</u> : UNAVAILABLE										
☐ YES (Single-Establis	shment Employer is Federal Contractor	r) X YES (Multi-Establishment Employer is Federal	eral Contracto	or)							

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

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

SECTION G – NAICS INFORMATION 221122 - Electric Power Distribution ON H – WORKFORCE DEMOGRAPHIC DATA

SECTION H – WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity															
							Race/E	thnicit	у						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
JOB CATEGORIES	e	ale	te	African ican	an	vaiian or c Islander	Indian or Native	re Races	te te	ς or merican	an	Hawaiian or acific Islander	Indian or Native	re Races	Row Total
	Маіе	Female	White	Black or Afrio American	Asian	Native Hawaiian or Other Pacific Islander	American Indian Alaska Native	Two or More	White	Black or African American	Asian	Native Hawa Other Pacific	American Indian Alaska Native	Two or More Races	
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	3	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	2	0	0	0	0	0	2	0	1	0	0	0	5
Technicians	0	0	6	0	0	0	0	0	1	0	0	0	0	0	7
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Craft Workers	0	0	41	0	0	0	0	1	1	0	0	0	0	0	43
Operatives	0	0	1	0	0	0	1	1	1	0	0	0	0	0	4
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	56	0	0	0	1	2	6	0	1	0	0	0	66
PRIOR 2022 REPORTING YEAR TOTAL	0	0	57	0	0	0	1	2	6	0	1	0	0	0	67

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

EEOC Standard Form 100 (SF 100)
Revised 08/2023
OMB Control Number: 3046-0049

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

			-								
	SECTION A - T	YPE OF REPORT									
	ESTABLISH	MENT REPORT									
	SECTION B - EMPLO	YER IDENTIFICATION									
OFS COMPANY ID		EMPLOYER NAME									
M149641 CMS ENERGY											
ADDRESS CITY/TOWN STATE ZIP CODE											
1 ENERGY PLAZA JACKSON MI 49201											
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E								
PC56086		Consumers Energy									
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE							
2119 River Rd. SAGINAW MI 48609											
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310											

SECTION E – EMPLOYER FILING ELIGIBILITY

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

) DE	CHON	4 11 — A	OKK	OKCE	DEMO									
							Race/E	thnicity	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	5	0	0	0	0	0	1	0	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	5	0	41	0	0	0	1	0	0	0	0	0	0	0	47
Laborers and Helpers	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	5	0	52	0	0	0	1	0	1	0	0	0	0	0	59
PRIOR 2022 REPORTING YEAR TOTAL	5	0	52	0	0	0	1	0	1	0	0	0	0	0	59

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

		YPE OF REPORT MENT REPORT										
	SECTION B – EMPLO	OYER IDENTIFICATION										
OFS COMPANY ID		EMPLOYER NAME										
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if appl	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	E									
W328336		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
5131 HACKETT RD SAGINAW MI 48603												
	SECTION D - EMPLOYER ID	ENTIFICATION NUMBER (EIN)										

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

	SE	CHOP	111 - V	OKKI	OKCE	DEMO									
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Technicians	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
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	0	1	14	1	0	0	0	0	1	0	0	0	0	0	17
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	1	17	1	0	0	0	0	5	0	0	0	0	0	24
PRIOR 2022 REPORTING YEAR TOTAL	0	1	17	1	0	0	0	0	5	0	0	0	0	0	24

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

	LAPITAG	ion Bate. 11/30/2020									
	SECTION A - T	YPE OF REPORT									
	ESTABLISH	MENT REPORT									
	SECTION B - EMPLO	OYER IDENTIFICATION									
OFS COMPANY ID EMPLOYER NAME											
M149641		CMS ENERGY									
ADDRESS CITY/TOWN STATE ZIP CODE											
1 ENERG	JACKSON	MI	49201								
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)								
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E								
1767304		Consumers Energy									
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE							
4141 142	MI	49419									
		ENTIFICATION NUMBER (EIN) 1442310									
·	SECTION E - EMPLOY	ER FILING ELIGIBILITY									

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
	Race/Ethnicity														
	Hisp	anic		Not Hispanic or Latino											
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	5	0	0	0	0	0	2	1	0	0	0	0	8
Operatives	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	8	0	0	0	0	0	2	1	0	0	0	0	11
PRIOR 2022 REPORTING YEAR TOTAL	0	0	9	0	0	0	0	0	2	1	0	0	0	0	12

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY**

SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME FH11387 **Consumers Energy**

ADDRESS

1 ENERGY PLAZA

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 4844 Product Dr **WIXOM** MI 48393

SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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)

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

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

CITY/TOWN

JACKSON

STATE

ΜI

ZIP CODE

49201

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H – WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
Race/Ethnicity															
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
PRIOR 2022 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	0	0	0	0	0	0	5

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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

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 A - TYPE OF REPORT **ESTABLISHMENT REPORT** SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME M149641 **CMS ENERGY** ADDRESS CITY/TOWN STATE ZIP CODE 1 ENERGY PLAZA **JACKSON** ΜI 49201 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME 1767405 **Consumers Energy**

 ${\bf SECTION\,D-EMPLOYER\,IDENTIFICATION\,NUMBER\,(EIN)}$

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS

1016 16TH ST NW, STE 500

380442310

SECTION E - EMPLOYER FILING ELIGIBILITY

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

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

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

CITY/TOWN

WASHINGTON

ZIP CODE

20036

STATE

DC

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
	Race/Ethnicity														
	Hist	anic					Not	Hispan	ic or L	atino					
		atino			М	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Professionals	0	0	1	0	0	0	0	0	0	1	0	0	0	0	2
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	1	1	0	0	0	0	3
PRIOR 2022 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	1	1	0	0	0	0	3
		EECTI) N T	WODK	FODCI	CNIAD	CUAT I	DEDIOI	<u> </u>	l					

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

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

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

	LAPITALI	on Date. 11/30/2020											
	SECTION A - T	YPE OF REPORT											
	ESTABLISHMENT REPORT												
	SECTION B - EMPLO	YER IDENTIFICATION											
OFS COMPANY ID EMPLOYER NAME													
M149641		CMS ENERGY											
ADDRESS CITY/TOWN STATE ZIP CODE													
1 ENERG	JACKSON	MI	49201										
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)										
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	ſŒ										
1767351		Consumers Energy											
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE									
7216 CR	MI	48182											
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 380442310													
<u> </u>	SECTION E - EMPLOY	ER FILING ELIGIBILITY											

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

Race/Ethnicity															
		anic					Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	4	0	0	0	0	0	2	0	0	0	0	0	6
Technicians	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	1	0	0	0	0	0	0	1	0	0	0	0	2
Craft Workers	0	0	17	1	0	0	0	0	0	0	0	0	0	0	18
Operatives	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	0	25	1	0	0	0	0	2	1	0	0	0	0	29
PRIOR 2022 REPORTING YEAR TOTAL	0	0	25	1	0	0	0	0	2	1	0	0	0	0	29

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

 ${\bf SECTION\,J-HEADQUARTERS\,OR\,ESTABLISHMENT\text{-}LEVEL\,\,COMMENTS\,(optional)}$

EEOC Standard Form 100 (SF 100)
Revised 08/2023
OMB Control Number 2046 0040

OMB Control Number: 3046-0049 Expiration Date: 11/30/2026

			Expirati	on Date. 11/30/2020								
	SECTION A - T	TYPE OF REPORT										
	ESTABLISH	MENT REPORT										
	SECTION B - EMPLO	OYER IDENTIFICATION										
OFS COMPANY ID EMPLOYER NAME												
M149641 CMS ENERGY												
ADDRESS CITY/TOWN STATE ZIP CODE												
1 ENERGY PLAZA JACKSON MI 49201												
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)									
HQ/ESTABLISHMENT-LEVEL UNIT ID	HE	ADQUARTERS OR ESTABLISHMENT-LEVEL NAM	1E									
PC56185		Consumers Energy										
HEADQUARTERS OR ESTABLIS	HMENT-LEVEL ADDRESS	CITY/TOWN	STATE	ZIP CODE								
3250 Mi	MI	48141										
		ENTIFICATION NUMBER (EIN) 0442310										
	SECTION E – EMPLOY	ER FILING ELIGIBILITY										

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

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

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

SECTION G - NAICS INFORMATION

221122 - Electric Power Distribution

SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
							Race/E	thnicity	/						
	Hisp	anic					Not	Hispan	ic or L	atino					
		atino			М	ale		•			Fen	nale			
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	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	6	0	0	0	0	0	0	0	0	0	0	0	6
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	1	0	38	5	0	0	0	0	1	0	0	0	0	0	45
Laborers and Helpers	0	0	3	1	0	0	0	0	0	0	0	0	0	0	4
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	0	48	6	0	0	0	0	1	0	0	0	0	0	56
PRIOR 2022 REPORTING YEAR TOTAL	2	0	47	6	0	0	0	0	1	0	0	0	0	0	56

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/16/2023 - 12/31/2023

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