

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

EEOC Standard Form 100 (SF 100)

Revised 08/2023

OMB Control Number: 3046-0049

Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT

CONSOLIDATED REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID
1035210

EMPLOYER NAME

COMMERCIAL METALS COMPANY

ADDRESS

6565 NORTH MACARTHUR BOULEVARD, SUITE 800

CITY/TOWN

IRVING

STATE

ZIP CODE

TX
75039

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

HQ/ESTABLISHMENT-LEVEL UNIT ID

HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS

CITY/TOWN

STATE

ZIP CODE

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)

750725338

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): NZ5HKPW2S838

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

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

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

SECTION G – NAICS INFORMATION

551114 - Corporate, Subsidiary, and Regional Managing Offices

SECTION H – WORKFORCE DEMOGRAPHIC DATA

JOB CATEGORIES	Race/Ethnicity														Row Total		
	Hispanic or Latino		Not Hispanic or Latino														
			Male						Female								
	Male	Female	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	White	Black or African American	Asian	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races			
Executive/Senior Level Officials and Managers	0	0	25	0	1	0	0	0	6	0	0	0	0	0	32		
First/Mid-Level Officials and Managers	117	34	678	47	37	1	5	13	149	15	13	0	3	2	1114		
Professionals	86	52	426	51	48	1	1	10	146	24	30	0	1	3	879		
Technicians	77	9	231	33	22	2	6	4	35	4	12	0	0	0	435		
Sales Workers	65	26	165	7	3	0	1	5	54	1	3	0	1	0	331		
Administrative Support Workers	49	125	66	20	2	1	0	3	206	47	6	4	4	8	541		
Craft Workers	191	2	559	67	0	1	6	23	2	1	0	0	1	1	854		
Operatives	1655	17	1499	1062	38	8	58	104	54	36	1	1	1	4	4538		
Laborers and Helpers	676	5	200	37	28	97	22	65	2	0	0	0	1	0	1133		
Service Workers	1	0	5	0	0	0	0	0	1	0	0	1	1	1	10		
CURRENT 2024 REPORTING YEAR TOTAL	2917	270	3854	1324	179	111	99	227	655	128	65	6	13	19	9867		
PRIOR 2023 REPORTING YEAR TOTAL	3095	270	4012	1366	177	82	109	233	665	128	61	6	11	20	10235		

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/13/2024 - 12/28/2024

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

Not Applicable

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SECTION K – OFFICIAL CERTIFICATION OF SUBMISSION

EMPLOYER IDENTIFICATION

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COMMERCIAL METALS COMPANY

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CITY/TOWN

IRVING

STATE

ZIP CODE
75039

CERTIFICATION COMMENTS (optional)

No Certification Comments Provided

CERTIFICATION STATEMENT

"I certify that the information, including any workforce demographic data, provided in this report is correct and true to the best of my knowledge and was prepared in conformity with the directions set forth in the form and accompanying instructions."

Knowingly and willfully false statements on this report are punishable by law, US Code, Title 18, Section 1001.

DATE OF CERTIFICATION

6/13/2025 3:33 PM [EST]

EMPLOYER'S CERTIFYING OFFICIAL

Name of Employer's Certifying Official

Rebecca Raines

Title of Certifying Official

Director, Talent Management

Email Address of Certifying Official

rebecca.raines@cmc.com

Telephone Number of Certifying Official

580-634-5046

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

Name of Primary POC

Rebecca Raines

Title and Employer of Primary POC

Director, Talent Management

CMC

Email Address of Primary POC

rebecca.raines@cmc.com

Telephone Number of Primary POC

580-634-5046