

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 K233751			EMPLOYER NAME KBR INC												
ADDRESS 601 JEFFERSON ST						CITY/TOWN HOUSTON				STATE TX		ZIP CODE 77002			
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) 204536774															
SECTION E – EMPLOYER FILING ELIGIBILITY															
<input checked="" type="checkbox"/> YES (Employer Is Eligible to File) <input type="checkbox"/> NO (Employer Is Not Eligible to File) <input type="checkbox"/> EMPLOYER NO LONGER IN BUSINESS															
SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
Unique Entity ID (UEI): VJ3XVZC76HT9															
<input type="checkbox"/> YES (Single-Establishment Employer is Federal Contractor) <input checked="" type="checkbox"/> YES (Multi-Establishment Employer is Federal Contractor)															
<input checked="" type="checkbox"/> YES (Headquarters is Federal Contractor) <input type="checkbox"/> YES (Non-Headquarters Establishment is Federal Contractor)															
<input checked="" type="checkbox"/> YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G – NAICS INFORMATION 541330 - Engineering Services															
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	4	66	4	2	0	0	1	12	1	2	1	0	0	93
First/Mid-Level Officials and Managers	207	93	2089	183	223	10	13	55	604	90	78	2	2	26	3675
Professionals	629	361	4340	527	539	24	37	198	1879	340	273	10	11	93	9261
Technicians	114	45	419	75	31	0	2	23	89	31	9	0	2	8	848
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	47	99	107	41	7	2	1	9	273	137	13	2	4	28	770
Craft Workers	191	9	256	98	16	11	10	26	13	15	0	2	1	4	652
Operatives	23	4	39	48	3	0	0	4	12	22	2	1	2	3	163
Laborers and Helpers	3	2	2	1	0	0	0	0	1	0	0	0	0	0	9
Service Workers	24	7	224	137	16	3	0	9	37	27	1	1	0	2	488
CURRENT 2024 REPORTING YEAR TOTAL	1238	624	7542	1114	837	50	63	325	2920	663	378	19	22	164	15959
PRIOR 2023 REPORTING YEAR TOTAL	840	408	6886	980	760	40	61	306	2737	614	343	16	20	159	14170
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/23/2024 - 12/29/2024															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional) Not Applicable															

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SECTION K – OFFICIAL CERTIFICATION OF SUBMISSION				
EMPLOYER IDENTIFICATION				
OFS COMPANY ID K233751		EMPLOYER NAME KBR INC		
ADDRESS 601 JEFFERSON ST		CITY/TOWN HOUSTON	STATE TX	ZIP CODE 77002
CERTIFICATION COMMENTS (optional)				
No Certification Comments Provided				
CERTIFICATION STATEMENT <i>"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."</i> Knowingly and willfully false statements on this report are punishable by law, US Code, Title 18, Section 1001.				
DATE OF CERTIFICATION 6/17/2025 8:39 PM [EST]				
EMPLOYER'S CERTIFYING OFFICIAL				
Name of Employer's Certifying Official STEPHANIE MOORE		Title of Certifying Official Sr. Manager, Human Resources		
Email Address of Certifying Official STEPHANIE.MOORE@KBR.COM		Telephone Number of Certifying Official 713-753-3849		
PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING				
Name of Primary POC STEPHANIE MOORE		Title and Employer of Primary POC Sr. Manager, Human Resources KBR Inc		
Email Address of Primary POC STEPHANIE.MOORE@KBR.COM		Telephone Number of Primary POC 713-753-3849		