

**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  
3022782

EMPLOYER NAME

INDEX CORPORATION

ADDRESS

3100 Sanders Road, Suite 301

CITY/TOWN

NORTHBROOK

STATE

IL  
60062

**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)**

562423536

**SECTION E – EMPLOYER FILING ELIGIBILITY**

YES (Employer Is Eligible to File)  NO (Employer Is Not Eligible to File)  EMPLOYER NO LONGER IN BUSINESS

**SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)**

Unique Entity ID (UEI): UNAVAILABLE

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

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

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

**SECTION G – NAICS INFORMATION**

551112 - Offices of Other Holding Companies

**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	6	3	100	3	19	0	0	1	41	5	7	0	0	0	185	
First/Mid-Level Officials and Managers	23	10	317	23	17	0	2	4	106	3	13	1	0	1	520	
Professionals	48	22	647	23	53	3	2	5	238	23	36	0	2	3	1105	
Technicians	53	24	158	24	15	1	7	1	18	1	3	1	3	0	309	
Sales Workers	9	4	119	6	4	1	0	2	36	0	1	0	0	1	183	
Administrative Support Workers	9	26	57	11	5	0	0	1	154	20	10	0	3	4	300	
Craft Workers	34	5	289	22	21	0	3	5	15	2	12	0	0	0	408	
Operatives	155	96	621	143	41	6	4	8	273	58	39	1	2	3	1450	
Laborers and Helpers	33	24	88	46	7	1	4	5	41	8	28	2	4	1	292	
Service Workers	1	0	3	1	0	0	0	0	2	0	0	0	0	0	7	
<b>CURRENT 2024 REPORTING YEAR TOTAL</b>	<b>371</b>	<b>214</b>	<b>2399</b>	<b>302</b>	<b>182</b>	<b>12</b>	<b>22</b>	<b>32</b>	<b>924</b>	<b>120</b>	<b>149</b>	<b>5</b>	<b>14</b>	<b>13</b>	<b>4759</b>	
<b>PRIOR 2023 REPORTING YEAR TOTAL</b>	<b>336</b>	<b>180</b>	<b>2306</b>	<b>281</b>	<b>172</b>	<b>10</b>	<b>22</b>	<b>36</b>	<b>931</b>	<b>107</b>	<b>140</b>	<b>4</b>	<b>15</b>	<b>13</b>	<b>4553</b>	

**SECTION I – WORKFORCE SNAPSHOT PERIOD**

12/15/2024 - 12/21/2024

**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  
3022782

EMPLOYER NAME  
**IDEX CORPORATION**

ADDRESS  
3100 Sanders Road, Suite 301

CITY/TOWN  
**NORTHBROOK**

STATE  
**IL** ZIP CODE  
**60062**

**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**

**6/23/2025 5:33 PM [EST]**

**EMPLOYER'S CERTIFYING OFFICIAL**

Name of Employer's Certifying Official

**Jessica Chmiel**

Title of Certifying Official

**Vice President & Associate General Counsel**

Email Address of Certifying Official

**JChmiel@idexcorp.com**

Telephone Number of Certifying Official

**847-664-4715**

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

Name of Primary POC

**Jessica Chmiel**

Title and Employer of Primary POC

**Vice President & Associate General Counsel  
IDEX Service Corp.**

Email Address of Primary POC

**JChmiel@idexcorp.com**

Telephone Number of Primary POC

**847-664-4715**