

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 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 7108112					EMPLOYER NAME FIFTH THIRD BANK														
ADDRESS 38 FOUNTAIN SQUARE PLAZA										CITY/TOWN CINCINNATI					STATE OH		ZIP CODE 45263		
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) 310676865																			
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): 7AD9D942A7C2 <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 522110 - Commercial Banking																			
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	8	3	405	10	21	0	1	3	159	10	8	0	1	1	630				
First/Mid-Level Officials and Managers	77	120	1085	108	58	3	2	25	1152	161	62	4	2	30	2889				
Professionals	128	164	2582	186	282	6	4	62	2380	329	248	8	1	48	6428				
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				
Sales Workers	27	13	729	25	21	3	2	13	188	13	14	0	0	5	1053				
Administrative Support Workers	297	710	1422	396	89	9	14	65	3496	1207	256	10	18	159	8148				
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	537	1010	6223	725	471	21	23	168	7375	1720	588	22	22	243	19148				
PRIOR 2022 REPORTING YEAR TOTAL	503	997	6393	746	465	16	17	153	7753	1847	563	19	28	260	19760				
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/4/2023 - 12/17/2023																			
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 7108112		EMPLOYER NAME FIFTH THIRD BANK	
ADDRESS 38 FOUNTAIN SQUARE PLAZA		CITY/TOWN CINCINNATI	STATE OH
			ZIP CODE 45263
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 5/30/2024 11:04 AM [EST]			
EMPLOYER'S CERTIFYING OFFICIAL			
Name of Employer's Certifying Official [REDACTED]		Title of Certifying Official Sr. Affirmative Action Analyst	
Email Address of Certifying Official [REDACTED]		Telephone Number of Certifying Official [REDACTED]	
PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING			
Name of Primary POC [REDACTED]		Title and Employer of Primary POC Sr. Affirmative Action Analyst Fifth Third Bank	
Email Address of Primary POC [REDACTED]		Telephone Number of Primary POC [REDACTED]	