EEOC Standard Form 100 (SF 100)

2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)										OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
				ION A							ı				
CONSOLIDATED REPORT															
SECTION B - EMPLOYER IDENTIFICATION															
OFS COMPANY ID H013473	EMPLOYER NAME ATMOS ENERGY CORPORATION														
ADDRESS						CITY/TOWN						STATE ZIP CODE			
5430 LBJ FWY STE 500						DALLAS						TX 75240			10
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			DE
SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN)															
751743247															
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)															
YES (One or More Non-Headquarters Establishments is Federal Contractor)															
SECTION G - NAICS INFORMATION															
221210 - Natural Gas Distribution SECTION H – WORKFORCE DEMOGRAPHIC DATA															
	SE	CHOP	\ n - v	VUKKE	OKCE										
	Race/Ethnicity Hispanic Not Hispanic or Latino														
	or Latino		Not Hispanic or Latino Male						Fen	Female					
				_		i je	₹	S		_		or der	5	Sé	
				Black or African American		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		Black or African American		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	Row
JOB CATEGORIES		<u>e</u>	o o	ck or Afric American	_	ajie Isl	ndia ati	e R	Φ	or ìeri	_	Native Hawaiian Other Pacific Islan	ndia ati	e R	Total
	Male	Female	White	or A eric	Asian	a ific	n a N	Jo.	White	Black or an Amer	Asian	a ific	a ⊐ Z	/lor	
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Executive/Senior Level Officials and Managers	1	0	14	1	0	0	0	2	5	0	0	0	0	0	23
First/Mid-Level Officials and Managers Professionals	13 56	9	182 300	12 40	29	0	0	<u>0</u>	88 145	33	4 37	0	0	0	315 681
Technicians	73	8	463	47	5	0	3	3	25	6	1	0	0	0	634
Sales Workers	2	2	26	5	0	0	0	0	8	3	0	0	0	0	46
Administrative Support Workers	58	200	113	28	2	0	0	6	340	119	7	2	3	6	884
Craft Workers Operatives	68 275	1	215 754	48 121	1	0	10	4	9	2	0	0	0	0	341 1177
Laborers and Helpers	260	12	408	189	1	1	4	13	22	10	1	0	0	0	921
Service Workers	0	0	0	3	0	0	0	0	1	0	0	0	0	0	4

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/23/2023 - 12/30/2023

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

Not Applicable

CURRENT 2023 REPORTING YEAR TOTAL

PRIOR 2022 REPORTING YEAR TOTAL

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 K - OFFICIAL CERTIFICATION OF SUBMISSION

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 5/24/2024 5:01 PM [EST]

EMPLOYER'S C	ERTIFYING OFFICIAL						
Name of Employer's Certifying Official	Title of Certifying Official						
Shelly Mullins	Director, Compliance & Talent Acquisition						
Email Address of Certifying Official	Telephone Number of Certifying Official						
shelly.mullins@atmosenergy.com	469-995-0988						
PRIMARY POINT OF CONTACT (POO	C) FOR EEO-1 COMPONENT 1 REPORTING						
Name of Primary POC	Title and Employer of Primary POC						
Shelly Mullins	Director, Compliance & Talent Acquisition						
, , , , ,	Atmos Energy Corporation						
Email Address of Primary POC	Telephone Number of Primary POC						
shelly.mullins@atmosenergy.com	469-995-0988						