

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 K014123			EMPLOYER NAME AES CORPORATION												
ADDRESS 4300 WILSON BOULEVARD						CITY/TOWN ARLINGTON				STATE VA		ZIP CODE 22203			
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) 463215169															
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): GE2GD1HR9EP3 <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 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	14	2	28	0	1	0	0	1	14	1	1	0	0	0	62
First/Mid-Level Officials and Managers	83	30	529	28	35	0	0	12	172	26	23	1	4	10	953
Professionals	117	69	752	76	108	5	4	40	391	52	79	3	4	11	1711
Technicians	0	0	34	0	0	0	0	2	3	0	0	0	0	0	39
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	12	28	42	23	1	1	0	5	123	157	2	0	1	9	404
Craft Workers	20	0	282	27	7	1	1	4	10	1	1	0	0	0	354
Operatives	71	3	574	33	17	5	7	15	8	5	0	1	0	0	739
Laborers and Helpers	4	1	65	4	2	0	0	4	20	3	1	0	0	0	104
Service Workers	0	0	42	4	0	0	0	0	3	0	0	0	0	0	49
CURRENT 2024 REPORTING YEAR TOTAL	321	133	2348	195	171	12	12	83	744	245	107	5	9	30	4415
PRIOR 2023 REPORTING YEAR TOTAL	267	113	2306	178	159	13	15	73	700	206	89	5	8	25	4157
SECTION I – WORKFORCE SNAPSHOT PERIOD 11/17/2024 - 11/30/2024															
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 K014123	EMPLOYER NAME AES CORPORATION		
ADDRESS 4300 WILSON BOULEVARD	CITY/TOWN ARLINGTON	STATE VA	ZIP CODE 22203
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 6/23/2025 4:52 PM [EST]			
EMPLOYER'S CERTIFYING OFFICIAL			
Name of Employer's Certifying Official Jeremy Buchanan	Title of Certifying Official VP HR		
Email Address of Certifying Official Jeremy.Buchanan@aes.com	Telephone Number of Certifying Official 317-515-8147		
PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING			
Name of Primary POC Jeremy Buchanan	Title and Employer of Primary POC VP HR AES		
Email Address of Primary POC Jeremy.Buchanan@aes.com	Telephone Number of Primary POC 317-515-8147		