

**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 E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

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)
942657368

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

339115 - Ophthalmic Goods Manufacturing

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	2	0	36	1	3	0	0	0	18	1	1	0	0	0	62
First/Mid-Level Officials and Managers	41	52	283	14	31	2	0	10	287	13	49	1	2	7	792
Professionals	43	56	282	22	72	2	1	5	368	19	90	0	0	4	964
Technicians	21	36	67	6	21	0	1	1	58	12	16	1	1	0	241
Sales Workers	29	29	194	6	6	4	2	1	297	10	9	1	1	7	596
Administrative Support Workers	21	94	70	15	34	0	1	1	203	40	29	1	2	8	519
Craft Workers	3	0	46	2	7	0	0	2	3	0	0	0	0	0	63
Operatives	60	126	171	58	118	5	1	12	192	39	143	1	6	6	938
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
CURRENT 2024 REPORTING YEAR TOTAL	220	394	1149	124	292	13	6	32	1426	134	337	5	12	32	4176
PRIOR 2023 REPORTING YEAR TOTAL	200	358	1140	122	256	11	5	42	1347	118	295	5	10	41	3950

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/16/2024 - 12/29/2024

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

Not Applicable

**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)
2024 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)**

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SECTION K – OFFICIAL CERTIFICATION OF SUBMISSION

EMPLOYER IDENTIFICATION

OFS COMPANY ID
E372548

EMPLOYER NAME
Cooper Companies Inc

ADDRESS

6101 Bollinger Canyon Road, Suite 500

CITY/TOWN

SAN RAMON

STATE

CA

ZIP CODE

94583

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

6/19/2025 1:28 PM [EST]

EMPLOYER'S CERTIFYING OFFICIAL

Name of Employer's Certifying Official

Bennett Javier

Title of Certifying Official

Sr. Director- Human Resources

Email Address of Certifying Official

bjavier@cooperco.com

Telephone Number of Certifying Official

925-660-4491

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

Name of Primary POC

Bennett Javier

Title and Employer of Primary POC

Sr. Director- Human Resources
Cooper Companies Inc

Email Address of Primary POC

bjavier@cooperco.com

Telephone Number of Primary POC

925-660-4491

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SECTION A – TYPE OF REPORT
HEADQUARTERS REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID E372548	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME The Cooper Companies Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [Not Applicable](#)

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

[339115 - Ophthalmic Goods Manufacturing](#)

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	0	9	0	1	0	0	0	2	0	0	0	0	0	12
First/Mid-Level Officials and Managers	1	3	12	0	4	1	0	2	17	1	19	1	0	0	61
Professionals	1	3	8	0	7	0	0	0	21	1	26	0	0	2	69
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	1	1	0	0	0	0	0	0	6	0	1	0	1	0	10
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 2024 REPORTING YEAR TOTAL	3	7	30	0	12	1	0	2	46	2	46	1	1	2	153
PRIOR 2023 REPORTING YEAR TOTAL	1	7	30	0	16	1	0	1	37	2	36	1	1	3	136

SECTION I – WORKFORCE SNAPSHOT PERIOD

12162024 - 12292024

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

Not Applicable

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SECTION A – TYPE OF REPORT
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID GU21907	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperSurgical Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3 Regent Street, Suite 301	CITY/TOWN LIVINGSTON	STATE NJ	ZIP CODE 07039	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	1	0	2	0	0	0	0	0	2	0	0	0	0	0	5
First/Mid-Level Officials and Managers	3	1	15	0	1	0	0	0	16	1	1	0	0	0	38
Professionals	5	5	14	3	6	0	0	0	20	1	3	0	0	0	57
Technicians	0	4	6	2	2	0	0	0	8	1	1	0	0	0	24
Sales Workers	1	0	3	0	0	0	0	0	12	0	0	0	0	0	16
Administrative Support Workers	0	3	2	0	0	0	0	0	10	6	3	0	0	1	25
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	3	1	0	0	0	4
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 2024 REPORTING YEAR TOTAL	10	13	42	5	9	0	0	0	68	12	9	0	0	1	169
PRIOR 2023 REPORTING YEAR TOTAL	7	10	44	5	5	0	0	0	55	10	7	0	0	3	146

SECTION I – WORKFORCE SNAPSHOT PERIOD
12162024 - 12292024

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

Not Applicable

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SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
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SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID H093638	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperVision			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 711 North Road	CITY/TOWN SCOTTSVILLE	STATE NY	ZIP CODE 14546	

**SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368**

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): [Y28FZ9FBKE16](#)

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

[339115 - Ophthalmic Goods Manufacturing](#)

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	4	1	17	3	2	0	0	0	15	0	1	0	0	0	43
Professionals	0	0	16	0	3	0	0	0	8	0	0	0	0	0	27
Technicians	1	1	29	2	15	0	1	0	19	2	2	0	1	0	73
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	1	7	0	4	0	0	0	10	0	0	0	0	0	22
Craft Workers	1	0	15	2	2	0	0	0	0	0	0	0	0	0	20
Operatives	10	3	23	5	27	0	0	1	23	6	16	0	3	0	117
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 2024 REPORTING YEAR TOTAL	16	6	107	12	53	0	1	1	75	8	19	0	4	0	302
PRIOR 2023 REPORTING YEAR TOTAL	10	3	103	9	30	0	1	1	72	8	7	0	1	2	247

SECTION I – WORKFORCE SNAPSHOT PERIOD

12162024 - 12292024

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

Not Applicable

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SECTION A – TYPE OF REPORT
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID H093986	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperVision			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 209 High Point Drive, Suite 100	CITY/TOWN VICTOR	STATE NY	ZIP CODE 14564	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [Y28FZ9FBKE16](#)

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

339115 - [Ophthalmic Goods Manufacturing](#)

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	0	9	0	2	0	0	0	7	0	0	0	0	0	18
First/Mid-Level Officials and Managers	6	5	86	1	10	0	0	2	90	1	3	0	2	2	208
Professionals	5	12	98	4	26	0	0	0	136	6	17	0	0	1	305
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	6	6	85	1	3	2	0	0	113	3	4	0	1	1	225
Administrative Support Workers	1	10	14	1	0	0	0	0	45	5	2	0	0	1	79
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 2024 REPORTING YEAR TOTAL	18	33	292	7	41	2	0	2	391	15	26	0	3	5	835
PRIOR 2023 REPORTING YEAR TOTAL	18	27	289	6	32	2	0	2	369	10	20	0	3	6	784

SECTION I – WORKFORCE SNAPSHOT PERIOD

12162024 - 12292024

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

Not Applicable

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SECTION A – TYPE OF REPORT
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID
E372548

EMPLOYER NAME
Cooper Companies Inc

ADDRESS
6101 Bollinger Canyon Road, Suite 500

CITY/TOWN
SAN RAMON

STATE
CA

ZIP CODE
94583

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID
HK11575

HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME
CooperVision Specialty EyeCare

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS
2120 West Guadalupe Road, Suite 112

CITY/TOWN
GILBERT

STATE
AZ

ZIP CODE
85233

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [Not Applicable](#)

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

[339115 - Ophthalmic Goods Manufacturing](#)

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	2	11	0	0	0	0	0	12	0	1	0	0	0	27
Professionals	4	3	12	3	2	0	1	0	3	1	2	0	0	0	31
Technicians	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Sales Workers	0	1	6	0	0	0	0	0	4	0	1	0	0	0	12
Administrative Support Workers	0	4	3	1	0	0	0	0	9	1	1	0	0	0	19
Craft Workers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
Operatives	1	12	10	0	7	1	1	1	17	0	12	0	2	0	64
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 2024 REPORTING YEAR TOTAL	6	22	47	4	9	1	2	1	46	2	17	0	2	0	159
PRIOR 2023 REPORTING YEAR TOTAL	10	19	50	4	6	1	1	4	43	1	19	0	3	0	161

SECTION I – WORKFORCE SNAPSHOT PERIOD
12162024 - 12292024

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

Not Applicable

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SECTION B – EMPLOYER IDENTIFICATION

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ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID LN43504	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperSurgical Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 225 West Jefferson Avenue	CITY/TOWN NAPERVILLE	STATE IL	ZIP CODE 60540	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	4	0	0	0	0	1	7	
Professionals	0	2	0	1	0	0	0	0	2	0	0	0	0	0	5	
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Sales Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2	
Administrative Support Workers	0	0	2	0	0	0	0	0	5	0	0	0	0	0	7	
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 2024 REPORTING YEAR TOTAL	0	2	5	1	0	0	0	0	12	0	0	0	0	1	21	
PRIOR 2023 REPORTING YEAR TOTAL	0	2	3	1	0	0	0	0	12	0	0	0	0	1	19	

SECTION I – WORKFORCE SNAPSHOT PERIOD

12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID
E372548

EMPLOYER NAME
Cooper Companies Inc

ADDRESS
6101 Bollinger Canyon Road, Suite 500

CITY/TOWN
SAN RAMON

STATE
CA

ZIP CODE
94583

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID
LN43513

HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME
CooperSurgical Inc

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS
130 Second Avenue

CITY/TOWN
BOSTON

STATE
MA

ZIP CODE
02451

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): KU26MCEY7TU9

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

339112 - Surgical and Medical Instrument Manufacturing

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	1
Professionals	0	0	2	0	0	0	0	0	1	0	1	0	0	0	0	4
Technicians	0	0	0	1	0	0	0	0	1	2	1	0	0	0	0	5
Sales Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	0	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	0
Laborers and Helpers	0	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	0
CURRENT 2024 REPORTING YEAR TOTAL	0	0	2	1	0	0	0	0	5	2	2	0	0	0	0	12
PRIOR 2023 REPORTING YEAR TOTAL	0	0	3	0	0	0	0	0	1	0	1	0	0	0	0	5

SECTION I – WORKFORCE SNAPSHOT PERIOD
12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID LN43551	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperSurgical Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 7580 Fannin Street, Suite 315	CITY/TOWN HOUSTON	STATE TX	ZIP CODE 77054	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	0	2	0	0	0	0	0	0	0	0	0	0	0	2
First/Mid-Level Officials and Managers	0	0	3	1	0	0	0	0	7	0	0	0	0	0	11
Professionals	0	2	5	0	0	0	0	0	4	1	4	0	0	0	16
Technicians	0	1	0	0	0	0	0	0	0	1	0	0	0	0	2
Sales Workers	0	1	2	1	0	0	0	0	2	0	0	0	0	0	6
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	1	0	0	0	2
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 2024 REPORTING YEAR TOTAL	0	5	12	2	0	0	0	0	13	2	5	0	0	0	39
PRIOR 2023 REPORTING YEAR TOTAL	0	0	9	0	0	0	0	1	6	0	3	0	0	0	19

SECTION I – WORKFORCE SNAPSHOT PERIOD
12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID LN43562	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Blanchard Contact Lens Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 8025 South Willow Street, 211	CITY/TOWN MANCHESTER	STATE NH	ZIP CODE 03103	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [Not Applicable](#)

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

[339115 - Ophthalmic Goods Manufacturing](#)

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	1	0	0	0	0	0	3	0	1	0	0	0	0	5
Craft Workers	0	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	0
Laborers and Helpers	0	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	0
CURRENT 2024 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	5	0	1	0	0	0	0	7
PRIOR 2023 REPORTING YEAR TOTAL	0	0	1	0	0	0	0	0	6	0	1	0	0	0	0	8

SECTION I – WORKFORCE SNAPSHOT PERIOD

12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID LN43584	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperSurgical Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 825 Wurlitzer Drive	CITY/TOWN NORTH TONAWANDA	STATE NY	ZIP CODE 14120	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	3	0	0	0	0	0	1	0	0	0	0	0	5
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Craft Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	0	0	0	0	0	0	0	0	10	1	1	0	0	0	12
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 2024 REPORTING YEAR TOTAL	0	1	5	0	0	0	0	0	14	1	1	0	0	0	22
PRIOR 2023 REPORTING YEAR TOTAL	0	1	4	0	0	0	0	0	12	1	1	0	0	0	19

SECTION I – WORKFORCE SNAPSHOT PERIOD

12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID NQ06724	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperSurgical Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11211 Cash Road	CITY/TOWN STAFFORD	STATE TX	ZIP CODE 77477	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	4	3	1	2	0	0	0	0	1	0	0	0	1	13
Professionals	2	2	3	0	0	0	0	0	2	0	1	0	0	0	10
Technicians	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	1	0	0	0	0	1	1	0	0	0	0	3
Craft Workers	0	0	5	0	1	0	0	0	1	0	0	0	0	0	7
Operatives	10	24	13	4	5	0	0	1	23	6	20	0	0	0	106
Laborers and Helpers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Service Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
CURRENT 2024 REPORTING YEAR TOTAL	14	31	24	6	8	0	0	1	27	8	21	0	0	1	141
PRIOR 2023 REPORTING YEAR TOTAL	6	24	20	2	7	0	0	2	26	3	22	0	0	2	114

SECTION I – WORKFORCE SNAPSHOT PERIOD
12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID P524980	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperSurgical Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 75 Corporate Drive	CITY/TOWN TRUMBULL	STATE CT	ZIP CODE 06611	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	0	12	1	0	0	0	0	6	1	1	0	0	0	21
First/Mid-Level Officials and Managers	7	7	79	4	5	0	0	0	67	5	7	0	0	1	182
Professionals	16	18	75	5	11	2	0	0	119	8	10	0	0	0	264
Technicians	2	0	6	0	0	0	0	0	0	0	1	0	0	0	9
Sales Workers	12	7	87	2	2	1	1	0	146	3	3	1	0	4	269
Administrative Support Workers	3	18	10	3	5	0	0	0	49	12	2	0	0	0	102
Craft Workers	0	0	6	0	0	0	0	0	2	0	0	0	0	0	8
Operatives	14	65	32	11	2	1	0	1	58	8	26	0	0	0	218
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 2024 REPORTING YEAR TOTAL	54	115	307	26	25	4	1	1	447	37	50	1	0	5	1073
PRIOR 2023 REPORTING YEAR TOTAL	56	104	283	31	22	3	0	2	428	36	48	0	0	6	1019

SECTION I – WORKFORCE SNAPSHOT PERIOD
12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID PC47022	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperSurgical Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11160 Warner Avenue, Suite 411	CITY/TOWN FOUNTAIN VALLEY	STATE CA	ZIP CODE 92708	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	1	0	0	0	0	0	0	0	1	1	0	0	0	0	0	3
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	2	1	0	0	0	0	0	0	1	0	0	0	0	0	0	4
Craft Workers	0	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	0
Laborers and Helpers	0	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	0
CURRENT 2024 REPORTING YEAR TOTAL	3	1	1	0	0	0	0	0	2	1	0	0	0	0	0	8
PRIOR 2023 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1

SECTION I – WORKFORCE SNAPSHOT PERIOD

12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID PC47033	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperSurgical Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 11915 La Grange Avenue	CITY/TOWN LOS ANGELES	STATE CA	ZIP CODE 90025	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	0	1	0	0	0	0	0	1	0	0	0	0	0	2
First/Mid-Level Officials and Managers	6	7	7	1	1	0	0	1	18	1	8	0	0	1	51
Professionals	4	2	8	2	5	0	0	1	18	1	5	0	0	1	47
Technicians	4	6	0	1	0	0	0	0	4	2	1	0	0	0	18
Sales Workers	6	1	2	0	0	1	0	1	2	1	0	0	0	1	15
Administrative Support Workers	1	11	0	0	0	0	0	0	5	1	1	0	0	1	20
Craft Workers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
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 2024 REPORTING YEAR TOTAL	22	27	18	4	6	1	0	3	48	6	15	0	0	4	154
PRIOR 2023 REPORTING YEAR TOTAL	29	36	25	4	8	1	0	4	56	7	17	0	0	4	191

SECTION I – WORKFORCE SNAPSHOT PERIOD

12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID PC47044	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperSurgical Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2301 Research Blvd., Suite 305	CITY/TOWN ROCKVILLE	STATE MD	ZIP CODE 20850	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	2	0	0	0	0	0	0	3	0	0	0	0	0	5
Professionals	0	0	0	0	0	0	0	0	2	0	0	0	0	0	2
Technicians	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Sales Workers	0	1	0	0	0	0	0	0	4	3	0	0	0	0	8
Administrative Support Workers	0	3	0	0	0	0	0	0	3	3	1	0	0	2	12
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 2024 REPORTING YEAR TOTAL	0	7	0	0	0	0	0	0	12	6	1	0	0	2	28
PRIOR 2023 REPORTING YEAR TOTAL	0	9	0	0	0	0	0	0	10	5	1	0	0	2	27

SECTION I – WORKFORCE SNAPSHOT PERIOD
12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID
E372548

EMPLOYER NAME
Cooper Companies Inc

ADDRESS
6101 Bollinger Canyon Road, Suite 500

CITY/TOWN
SAN RAMON

STATE
CA

ZIP CODE
94583

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID
PC47055

HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME
CooperSurgical Inc

HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS
201 W North River Drive, Suite 110

CITY/TOWN
SPOKANE

STATE
WA

ZIP CODE
99201

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	0	0	0	0	0	0	0	0	1	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	1	1	0	0	0	0	0	2	0	0	0	0	0	4
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	1	1	0	0	0	0	0	3	0	0	0	0	0	5
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 2024 REPORTING YEAR TOTAL	0	3	2	0	0	0	0	0	5	0	1	0	0	0	11
PRIOR 2023 REPORTING YEAR TOTAL	0	2	4	0	0	0	0	0	6	0	1	1	0	0	14

SECTION I – WORKFORCE SNAPSHOT PERIOD
12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID PC47066	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperVision Specialty EyeCare			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 2236 Rutherford Rd, STE 115	CITY/TOWN CARLSBAD	STATE CA	ZIP CODE 92008	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [Not Applicable](#)

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

339115 - [Ophthalmic Goods Manufacturing](#)

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	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	0	0	1	1	1	1	0	1	1	0	0	0	0	0	6
Professionals	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Administrative Support Workers	0	3	1	0	1	0	0	0	1	0	2	0	0	1	9
Craft Workers	1	0	0	0	1	0	0	1	0	0	0	0	0	0	3
Operatives	4	6	0	0	2	1	0	6	2	0	5	0	0	5	31
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 2024 REPORTING YEAR TOTAL	6	9	3	1	5	2	0	8	7	0	7	0	0	6	54
PRIOR 2023 REPORTING YEAR TOTAL	6	16	15	1	7	2	0	10	16	0	8	0	0	6	87

SECTION I – WORKFORCE SNAPSHOT PERIOD

12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT**

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID PC47077	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperSurgical Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 369 Lexington Avenue	CITY/TOWN NEW YORK	STATE NY	ZIP CODE 10016	

**SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368**

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	0	0	0	0	0	0	1	0	0	0	0	0	2
Professionals	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Technicians	2	6	0	0	0	0	0	0	0	0	2	0	0	0	10
Sales Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	3	0	0	0	0	0	0	2	1	0	0	0	0	6
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 2024 REPORTING YEAR TOTAL	2	11	0	0	0	0	0	0	4	1	2	0	0	0	20
PRIOR 2023 REPORTING YEAR TOTAL	1	2	0	0	1	0	0	0	0	2	0	0	0	0	6

SECTION I – WORKFORCE SNAPSHOT PERIOD

[12162024 - 12292024](#)

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID PC47088	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperSurgical Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 4294 El Camino Real	CITY/TOWN LOS ALTOS	STATE CA	ZIP CODE 94022	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	1	0	0	1	0	0	0	0	0	1	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	1	0	0	0	2	0	2	1	0	0	6
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	0	1	0	0	0	0	0	1	0	2	0	0	0	4
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 2024 REPORTING YEAR TOTAL	0	1	1	0	2	0	0	0	3	0	5	1	0	0	13
PRIOR 2023 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	2	0	2	1	0	0	5

SECTION I – WORKFORCE SNAPSHOT PERIOD
12162024 - 12292024

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

Not Applicable

**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)
2024 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)**

EEOC Standard Form 100 (SF 100)
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SECTION A – TYPE OF REPORT
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID PC47090	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperVision			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 5870 Stoneridge Drive, Suite 1	CITY/TOWN PLEASANTON	STATE CA	ZIP CODE 94588	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): Y28FZ9FBKE16

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

339115 - Ophthalmic Goods Manufacturing

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	4	0	3	0	0	0	5	1	5	0	0	0	19
Professionals	0	1	6	1	8	0	0	0	3	0	13	0	0	0	32
Technicians	1	1	1	0	0	0	0	0	0	0	1	0	0	0	4
Sales Workers	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
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 2024 REPORTING YEAR TOTAL	2	3	11	1	12	0	0	0	8	1	19	0	0	0	57
PRIOR 2023 REPORTING YEAR TOTAL	3	3	16	0	21	0	0	2	12	0	17	0	0	2	76

SECTION I – WORKFORCE SNAPSHOT PERIOD

12162024 - 12292024

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

Not Applicable

**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)
2024 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)**

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OMB Control Number: 3046-0049
Expiration Date: 11/30/2026

SECTION A – TYPE OF REPORT
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID PC47101	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperSurgical Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 6550 South Bay Colony, Suite 100	CITY/TOWN TUCSON	STATE AZ	ZIP CODE 85756	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	0	1	0	0	0	0	0	0	0	0	0	0	0	1
First/Mid-Level Officials and Managers	7	15	12	0	0	0	0	3	17	1	1	0	0	1	57
Professionals	5	3	6	0	2	0	0	1	7	0	2	0	0	0	26
Technicians	8	14	19	0	2	0	0	0	14	2	4	0	0	0	63
Sales Workers	4	11	7	2	0	0	1	0	10	0	1	0	0	1	37
Administrative Support Workers	5	23	2	1	0	0	0	0	11	4	1	0	0	0	47
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	0	0	1	0	0	0	0	0	2	0	0	0	0	0	3
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 2024 REPORTING YEAR TOTAL	29	66	48	3	4	0	1	4	61	7	9	0	0	2	234
PRIOR 2023 REPORTING YEAR TOTAL	24	66	40	2	4	0	0	3	54	7	10	0	1	1	212

SECTION I – WORKFORCE SNAPSHOT PERIOD
12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID PC47110	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperSurgical Inc			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 201 Broadway, Suite 220	CITY/TOWN CAMBRIDGE	STATE MA	ZIP CODE 02139	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): [KU26MCEY7TU9](#)

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

[339112 - Surgical and Medical Instrument Manufacturing](#)

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	2	0	0	0	0	0	0	4
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	1	1	2	0	0	0	0	1	4	1	1	0	0	0	0	11
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	2	1	0	0	0	0	0	3	1	0	0	0	0	0	7
Craft Workers	0	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	0
Laborers and Helpers	0	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	0
CURRENT 2024 REPORTING YEAR TOTAL	1	3	5	0	0	0	0	1	9	2	1	0	0	0	0	22
PRIOR 2023 REPORTING YEAR TOTAL	1	2	2	0	0	0	0	0	4	3	1	0	0	0	0	13

SECTION I – WORKFORCE SNAPSHOT PERIOD
12162024 - 12292024

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

Not Applicable

**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
ESTABLISHMENT-LEVEL REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID E372548	EMPLOYER NAME Cooper Companies Inc			
ADDRESS 6101 Bollinger Canyon Road, Suite 500	CITY/TOWN SAN RAMON	STATE CA	ZIP CODE 94583	

SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)

HQ/ESTABLISHMENT-LEVEL UNIT ID X485452	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME CooperVision			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 180 Thruway Park Drive	CITY/TOWN WEST HENRIETTA	STATE NY	ZIP CODE 14586	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
942657368

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): Y28FZ9FBKE16

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

339115 - Ophthalmic Goods Manufacturing

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	4	1	25	2	1	0	0	1	9	1	1	0	0	0	45
Professionals	1	3	27	3	2	0	0	3	18	0	6	0	0	0	63
Technicians	0	0	2	0	1	0	0	0	0	0	0	0	0	0	3
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	8	8	25	8	24	0	1	1	34	5	11	1	1	2	129
Craft Workers	0	0	15	0	3	0	0	1	0	0	0	0	0	0	19
Operatives	21	16	92	38	75	2	0	2	57	15	62	1	1	1	383
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 2024 REPORTING YEAR TOTAL	34	28	186	51	106	2	1	8	118	21	80	2	2	3	642
PRIOR 2023 REPORTING YEAR TOTAL	28	25	199	57	97	1	3	10	120	22	73	2	1	3	641

SECTION I – WORKFORCE SNAPSHOT PERIOD

12162024 - 12292024

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

Not Applicable