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									
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		SECT				R IDEN		ATION							
OFS COMPANY ID		SLCI			LUIL			LOYER N	JAME						
0096654 MADISON GAS & ELECTRIC CO															
ADDRESS							С	ITY/TOW	WN			STATE		ZIP CO	DDE
133 S BLAIR STMADISONWI53788												88			
SECTION C – HI	SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable)														
HQ/ESTABLISHMENT-LEVEL UNIT ID															
HEADQUARTERS OR ESTABLISHME	ENT-LEV	'EL ADI	DRESS				С	ITY/TOW	WN			STATE		ZIP CO	DDE
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)															
					390444	025				,					
						FILINO									
X YES (Employer Is Eligible	to File)		(Empl	oyer Is l	lot Elig	ible to F	ïle) 🔲	EMPL	OYER	NO LOI	NGER	IN BUS	INESS		
SEC	CTION					FOR DE			if applic	able)					
			-			ZQA4Y									
🔲 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															
						tric Pow									
	SE					DEMO									
								Ethnicit							
	Hisp	anic					Not	Hispar	nic or L	atino					
	or La	or Latino Male						Female					1		
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JOB CATEGORIES				la ric		iiaı Isla	dian	Ra		eric		liar	dian	Ra	Row Total
	Male	nal	White	Ţ Ă	Asian	fic	L R	ore	White	× Å	Asian	fic	ů ľ	ore	TOLA
	ž	Female	Š	Black or African American	As	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	Ś	Black or African American	As	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	
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						0						0			
Executive/Senior Level Officials and Managers	1	0	25	0	0	0	0	0	12	0	0	0	0	0	38
First/Mid-Level Officials and Managers Professionals	1	1	64 142	1 2	0	0	0	2	19 56	0	0	0	0	0	88 219
Technicians	1	0	34	1	3	0	0	1	10	0	1	0	0	1	52
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers Craft Workers	1 4	11 0	21 161	0	1 0	0	0	0	46 2	8	9 0	0	0	5 0	102 172
Operatives	1	0	45	0	1	0	0	0	0	0	0	0	0	0	47
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	10	14	492	7	9	0	2	7	145	10	13	0	0	9	718
PRIOR 2022 REPORTING YEAR TOTAL	10	13	483	8	7	0	2	6	146	5	14	0	0	11	705
SECTION I – WORKFORCE SNAPSHOT PERIOD 10/2/2023 - 10/15/2023															
SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)															
Not Applicable		•									,				

U.S. 2023	R OMB Con	EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026				
	SECTION K – OFFICIAL C	ERTIFICATION OF SUBMISSION	N			
OFS COMPANY		IDENTIFICATION				
OFS COMPANY I 0096654	D	EMPLOYER NAME MADISON GAS & ELECTRIC C	0			
	ADDRESS	CITY/TOWN	STATE	ZIP CODE		
	133 S BLAIR ST	MADISON	WI	53788		
	CERTIFICATION	NCOMMENTS (optional)	· · ·			
No Certification Comme	ents Provided					
		TION STATEMENT				
	nation, including any workforce demographic I was prepared in conformity with the directio					
	gly and willfully false statements on this repo					
	DATE OF (	CERTIFICATION				
	5/15/2024	2:37 PM [EST]				
		ERTIFYING OFFICIAL				
Nam	ne of Employer's Certifying Official	Title of C	Certifying Official			
	Rebecca Schroeder	Mgr HF	R Operations			
			1			
En	nail Address of Certifying Official		ber of Certifying Official			
	rschroeder@mge.com	608-	575-6653			
	PRIMARY POINT OF CONTACT (PO	L C) FOR EEO-1 COMPONENT 1 REPO	DRTING			
	Name of Primary POC	Title and Emp	ployer of Primary POC			
	Rebecca Schroeder	_	R Operations			
			Bas and Electric			
	Email Address of Primary POC	Telephone N	umber of Primary POC			
	rschroeder@mge.com	608-	575-6653			