

**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)
2022 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)**

EEOC Standard Form 100 (SF 100)
Revised 08/2023
OMB Control Number: 3046-0049
Expiration Date: 08/31/2024

SECTION A – TYPE OF REPORT
CONSOLIDATED REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID
CF62461

EMPLOYER NAME
REGENCY CENTERS

ADDRESS
1 INDEPENDENT DRIVE, SUITE 114

CITY/TOWN
JACKSONVILLE

STATE
FL

ZIP CODE
32202

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)

593429602

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

531390 - Other Activities Related to Real Estate

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	18	0	0	0	0	0	6	0	0	0	0	0	25
First/Mid-Level Officials and Managers	5	10	72	3	8	0	0	0	80	4	5	0	1	2	190
Professionals	6	8	31	7	3	0	0	2	58	7	7	0	0	1	130
Technicians	0	0	2	0	1	0	0	0	0	0	0	0	0	1	4
Sales Workers	1	1	11	0	0	0	0	0	12	0	0	0	0	0	25
Administrative Support Workers	1	6	7	0	1	0	0	0	37	9	6	1	0	3	71
Craft Workers	1	0	0	1	0	0	0	0	0	0	0	0	0	0	2
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 2022 REPORTING YEAR TOTAL	15	25	141	11	13	0	0	2	193	20	18	1	1	7	447
PRIOR 2021 REPORTING YEAR TOTAL	17	23	135	9	15	0	0	4	189	21	16	1	1	6	437

SECTION I – WORKFORCE SNAPSHOT PERIOD

11/7/2022 - 11/20/2022

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

Not Applicable

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SECTION K – OFFICIAL CERTIFICATION OF SUBMISSION

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EMPLOYER NAME
REGENCY CENTERS

ADDRESS
1 INDEPENDENT DRIVE, SUITE 114

CITY/TOWN
JACKSONVILLE

STATE
FL

ZIP CODE
32202

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

11/30/2023 12:32 PM [EST]

EMPLOYER'S CERTIFYING OFFICIAL

Name of Employer's Certifying Official
Amy D'Olimpio

Title of Certifying Official
Sr. Vice President, Human Resources

Email Address of Certifying Official
amydolimpio@regencycenters.com

Telephone Number of Certifying Official
904 598 7606

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

Name of Primary POC
Katie Warren

Title and Employer of Primary POC
HR Data and Reporting Analyst
Regency Centers

Email Address of Primary POC
katiwarren@regencycenters.com

Telephone Number of Primary POC
904-598-7479