

## NOTICE: SAMPLE EEO-4 REPORT

As discussed in the 30-day Notice published in the Federal Register on December 6, 2024, the EEOC created the Office of Enterprise Data and Analytics (OEDA) in May 2018 with the goal of creating a modern data and analytics organization at the agency. Since its creation, OEDA, which administers the agency's EEO data collections, including the EEO-4, has worked to modernize the collections and improve the quality of data collected. OEDA has also streamlined functions, such as providing additional self-service options, resource materials, and an online support message center.

As part of its ongoing modernization efforts and in response to feedback from filers in prior collections, OEDA has redesigned the format of the certified report generated by the *EEO-4 Online Filing System (OFS)*. The report, which filers will be able to download and save as a PDF, contain several enhancements to how information provided by filers is displayed. For example, the updated report now has delineated sections and headers that clearly identify the information being displayed and filers' answers to reporting questions such as eligibility.

Please Note: This is a "sample" EEO-4 report generated by the EEOC's *EEO-4 Online Filing System (OFS)*. Filers are not permitted to submit EEO-4 workforce demographic data using this sample. The EEOC requires electronic submission of EEO-4 reports through the *OFS*, the agency's web-based data collection application (i.e., portal). The *OFS* is accessible at [LINK WILL BE INSERTED BY EEOC FOR EACH DATA COLLECTION YEAR].

The EEOC will only accept EEO-4 reports submitted and certified through the *OFS*. The EEOC will not accept reports submitted via paper or through other non-*OFS* electronic means (e.g., email, CD-ROM). The EEOC will consider filers submitting reports outside of the *OFS* to be non-compliant for purposes of their mandatory EEO-4 filing obligation.

SAMPLE

**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION**  
**20YY STATE AND LOCAL GOVERNMENT INFORMATION REPORT (EEO-4)**

EEOC Form 164  
 Revised: MM/20YY  
 OMB Control Number: 3046-0008  
 Expiration: MM/DD/20YY

**SECTION A: STATE AND LOCAL GOVERNMENT IDENTIFICATION**

REGISTRATION ID [REG_ID]	NAME OF POLITICAL JURISDICTION [Name of Political Jurisdiction]		
STREET ADDRESS [Address 1] [Address 2]	CITY [City]	STATE [State]	ZIP CODE [ZIP]

**SECTION B: TYPE OF GOVERNMENT (Check one box only)**

State    County    City    Township    Special District    Other (specify): [TYPE\_OTH]

**SECTION C: ELIGIBILITY**

YES (Eligible to File)    No (Total Staff)    No (Consolidated)    No (Closed)    No (Other-Specify): [REASON\_OTH]

**SECTION D: FUNCTIONS**

<input type="checkbox"/>	1. <b>FINANCIAL ADMINISTRATION:</b> Tax billing and collection, budgeting, purchasing, central accounting and similar financial administration carried on by a treasurer's, auditor's, or comptroller's office. – AND – <b>GENERAL CONTROL:</b> Duties usually performed by boards of supervisors or commissioners, central administration offices and agencies, central personnel or planning agencies, all judicial offices and employees (judges, magistrates, bailiffs, et al.)	<input type="checkbox"/>	7. <b>HOSPITALS:</b> Operation and maintenance of institutions for inpatient medical care.
<input type="checkbox"/>	2. <b>STREETS AND HIGHWAYS:</b> Maintenance, repair, construction and administration of streets, alleys, sidewalks, roads, highways, and bridges.	<input type="checkbox"/>	8. <b>HEALTH:</b> Provision of public health services, outpatient clinics, visiting nurses, food and sanitary inspections, mental health, alcohol rehabilitation service, etc.
<input type="checkbox"/>	3. <b>PUBLIC WELFARE:</b> Maintenance of homes and other institutions for the needy; administration of public assistance. (Hospitals should be reported under Function 7.)	<input type="checkbox"/>	9. <b>HOUSING:</b> Code enforcement, low rent public housing, fair housing ordinance enforcement, housing for elderly, housing rehabilitation, rent control.
<input type="checkbox"/>	4. <b>POLICE PROTECTION:</b> Duties of a police Department, sheriff's, constable's, coroner's office, etc. Including technical and clerical employees engaged in police activities.	<input type="checkbox"/>	10. <b>COMMUNITY DEVELOPMENT:</b> Planning, zoning, land development, open space, beautification, preservation.
<input type="checkbox"/>	5. <b>FIRE PROTECTION:</b> Duties of the uniformed fire force and clerical employees. (Note: Forest fire protection activities should be reported under Function 6.)	<input type="checkbox"/>	11. <b>CORRECTIONS:</b> Jails, reformatories, detention homes, halfway houses, prisons, parole and probation activities.
<input type="checkbox"/>	6. <b>NATURAL RESOURCES:</b> Agriculture, forestry, forest fire protection, irrigation drainage, flood control, etc. – AND – <b>PARKS AND RECREATION:</b> Provision, maintenance and operation of parks, playgrounds, swimming pools, auditoriums, museums, marinas, zoos, etc.	<input type="checkbox"/>	12. <b>UTILITIES AND TRANSPORTATION:</b> Includes water supply, electric power, transit, gas, airports, water transportation and terminals.
		<input type="checkbox"/>	13. <b>SANITATION AND SEWAGE:</b> Street cleaning, garbage and refuse collection and disposal. Provision, maintenance and operation of sanitary and storm sewer systems and sewage disposal plants.
		<input type="checkbox"/>	14. <b>EMPLOYMENT SECURITY:</b> State governments only.
		<input type="checkbox"/>	15. <b>OTHER</b> (Specify): _____

**SECTION E: OFFICIAL CERTIFICATION OF SUBMISSION**

**CERTIFICATION COMMENTS**  
(optional)

[CERT\_COMM]

**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**

[CERT\_DATE]

**GOVERNMENT CERTIFYING OFFICIAL**

NAME [CERT_OFF_NAME]	TITLE [CERT_OFF_TITLE]
EMAIL [CERT_OFF_EMAIL]	TELEPHONE NUMBER [CERT_OFF_TEL]

**PRIMARY POINT OF CONTACT (POC) FOR EEO-4 REPORTING**

NAME [POC_NAME]	TITLE [POC_TITLE]
EMAIL [POC_EMAIL]	TELEPHONE NUMBER [POC_TEL]





SECTION F: EMPLOYMENT DATA									Consolidated Report							
REGISTRATION ID [REG_ID]			NAME OF POLITICAL JURISDICTION [Name of Political Jurisdiction]													
JOB CATEGORY	ANNUAL SALARY	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	
<b>OTHER THAN FULL-TIME STAFF (PAY PERIOD THAT INCLUDES JUNE 30, 20YY)</b>																
97. OFFICIALS – ADMINISTRATORS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
98. PROFESSIONALS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
99. TECHNICIANS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
100. PROTECTIVE SERVICE		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
101. PARAPROFESSIONALS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
102. ADMINISTRATIVE SUPPORT		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
103. SKILLED CRAFT		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
104. SERVICE – MAINTENANCE		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>TOTAL OTHER THAN FT (LINES 97 – 104)</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>FULL-TIME NEW HIRES (JULY 1, 20YY – JUNE 30, 20YY)</b>																
105. OFFICIALS – ADMINISTRATORS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
106. PROFESSIONALS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
107. TECHNICIANS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
108. PROTECTIVE SERVICE		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
109. PARAPROFESSIONALS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
110. ADMINISTRATIVE SUPPORT		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
111. SKILLED CRAFT		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
112. SERVICE – MAINTENANCE		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
<b>TOTAL NEW HIRES (LINES 105 – 112)</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b>DEPARTMENTS/AGENCIES INCLUDED IN THIS FUNCTION REPORT</b>																
Not applicable (Consolidated Report)																
<b>DEPARTMENTS/AGENCIES NOT INCLUDED IN THIS FUNCTION REPORT</b>																
Not applicable (Consolidated Report)																
<b>REMARKS ABOUT THIS FUNCTION REPORT</b>																
Not applicable (Consolidated Report)																





SECTION F: EMPLOYMENT DATA										Function # – [Name of Function]						
REGISTRATION ID [REG_ID]			NAME OF POLITICAL JURISDICTION [Name of Political Jurisdiction]													
JOB CATEGORY	ANNUAL SALARY	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	
<b>OTHER THAN FULL-TIME STAFF (PAY PERIOD THAT INCLUDES JUNE 30, 20YY)</b>																
97. OFFICIALS – ADMINISTRATORS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
98. PROFESSIONALS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
99. TECHNICIANS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
100. PROTECTIVE SERVICE		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
101. PARAPROFESSIONALS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
102. ADMINISTRATIVE SUPPORT		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
103. SKILLED CRAFT		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
104. SERVICE – MAINTENANCE		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>TOTAL OTHER THAN FT (LINES 97 – 104)</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	
<b>FULL-TIME NEW HIRES (JULY 1, 20YY – JUNE 30, 20YY)</b>																
105. OFFICIALS – ADMINISTRATORS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
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107. TECHNICIANS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
108. PROTECTIVE SERVICE		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
109. PARAPROFESSIONALS		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
110. ADMINISTRATIVE SUPPORT		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
111. SKILLED CRAFT		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
112. SERVICE – MAINTENANCE		0	0	0	0	0	0	0	0	0	0	0	0	0	0	
<b>TOTAL NEW HIRES (LINES 105 – 112)</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	
<b>DEPARTMENTS/AGENCIES INCLUDED IN THIS FUNCTION REPORT</b>																
[REMARKS]																
<b>DEPARTMENTS/AGENCIES NOT INCLUDED IN THIS FUNCTION REPORT</b>																
[REMARKS]																
<b>REMARKS ABOUT THIS FUNCTION REPORT</b>																
[REMARKS]																