## U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)

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

2023 EMPLOYER IN	FORM	IATIO	N KEI	POKI (	EEO-	I COM	PONE	N1 1)					ation Dat		
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		SECT	TION I	<b>B – EMP</b>	LOYE	R IDEN									
OFS COMPANY ID						FFOOIF		OYER N		TE 1101	DINIO				
HH01782				MARA	VAI LII	FESCIE				TE HOL	DINGS	5 LLC			
ADDRESS							C	TY/TOV	VN			STATE		ZIP CC	DDE
No physical lo	cations														
SECTION C - H	EADQU	JARTE	RS OR	ESTAB	LISH	MENT-I	LEVEL	IDENT	'IFICA'	<b>FION</b> (if	f applica	able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEAD(	QUARTE	RS OR E	STABLIS	SHMEN	Γ-LEVEL	NAME				
HEADQUARTERS OR ESTABLISHM	ENT-LEV	/EL ADI	DRESS				C	TY/TOV	VN			STATE		ZIP CC	DDE
	SECTI	ON D -	- EMPl	LOYER	IDEN'	TIFICA	TION N	UMBE	R (EIN	)			- 1		
				4	65081	787			,						
		SECTION	ON E -	- EMPL	OYER	FILING	ELIG	BILIT	Y						
X YES (Employer Is Eligible	e to File)	□ NO	(Empl	oyer Is N	lot Elig	ible to F	ile) 🔲	EMPL	OYER	NO LON	IGER I	IN BUSI	NESS		
SE	CTION	F-FE	DERA	L CONT	RACT	OR DE	SIGNA	TION (	if applic	able)					
				tity ID (					**						
YES (Single-Establishn	nent Emp	oloyer is	Federa	l Contrac	ctor)	YES (I	Multi-Es	tablishn	nent Em	ployer is	Federa	l Contra	ctor)		
YES (	- Headana	rtere ic	Federal	Contrac	tor) $\square$	VFS (N	Jon-Hea	danarter	e Fetabl	ichment	is Feder	al Contr	actor)		
L IES (	readqua				. —			•					actor)		
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541714	- Reses			ON G - N					anohio	technolo	oav)				
041714										COMMO	<i>1</i> 9 <i>y)</i>				
SECTION H – WORKFORCE DEMOGRAPHIC DATA  Race/Ethnicity															
	Hisp	anic					Not	Hispan	ic or L	atino					1
	or L	atino			N	lale					Fer	nale			
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JOB CATEGORIES		_		Black or African American		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		Black or African American		Native Hawaiian or Other Pacific Islander	American Indian Alaska Native	Two or More Races	Row
002 07.11.201.11.20	<u>o</u>	Female	White	ck or Afric American	an	vai ic l	la Na	ē	<u>i</u>	Black or an Amer	Asian	vai ic l	Ind Na	ē	Total
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Executive/Senior Level Officials and Managers	0	0	27	0	4	0	0	1	13	0	4	0	0	1	50
First/Mid-Level Officials and Managers	11	9	36	3	18	2	0	7	26	2	9	0	0	2	125
Professionals	15	16	68	2	20	3	1	10	49	4	31	0	0	5	224
Technicians	28	23	23	8	21	0	0	7	27	4	20	1	1	1	164
Sales Workers	1 -	2	12	0	3	0	0	0	5	0	1	0	0	0	24
Administrative Support Workers Craft Workers	5 0	4 0	11 0	0	7	0	0	0	11 0	0	7	0	0	0	49 0
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	4	0	3	2	2	1	0	0	6	1	0	0	1	1	21
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	64	54	180	15	75	6	1	27	137	12	72	1	2	11	657
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		SECTIO	ON I –	WORK 12/17/2		E SNAP 12/30/20		PERIO	D						•
Not Applicable SECTION J	– НЕА	DQUAI	RTERS					VEL CO	OMME	NTS (opt	tional)				

## 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

SECTION K - OFFICIAL CERTIFICATION OF SUBMISSION	

OFS COMPANY ID
HH01782

ADDRESS

No physical locations

EMPLOYER IDENTIFICATION

EMPLOYER NAME

MARAVAI LIFESCIENCES INTERMEDIATE HOLDINGS LLC

CITY/TOWN

STATE

ZIP CODE

#### 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

6/5/2024 3:45 AM [EST]

EMPLOYER'S CERT	IFYING OFFICIAL
Name of Employer's Certifying Official	Title of Certifying Official
Rachel Duarte	Sr. Manager, HR Operations
Email Address of Certifying Official	Telephone Number of Certifying Official
rachel.duarte@maravai.com	858-267-4303
PRIMARY POINT OF CONTACT (POC) FO	OR EEO-1 COMPONENT 1 REPORTING
Name of Primary POC	Title and Employer of Primary POC
Rachel Duarte	Sr. Manager, HR Operations
	Maravai LifeSciences
Email Address of Primary POC	Telephone Number of Primary POC
rachel.duarte@maravai.com	858-267-4303

## 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

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

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						RS REF									
		SECT	TION B	<u> – EMP</u>	LOYE	R IDEN									
OFS COMPANY ID								OYER N							
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ADDRESS							CI	TY/TOW	VN			STATE		ZIP CC	DE
No physical I	ocations														
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SECTION C – F HQ/ESTABLISHMENT-LEVEL UNIT ID	IEADQU	AKIL	KS OK	ESTAB		VIEN I-L QUARTEI						abie)			
HH01782					TILADO	-					IVAIVIL				
						Mara	vai Inte			ings					
HEADQUARTERS OR ESTABLISHM	IENT-LEV	EL ADE	DRESS				CI	TY/TOW	VN			STATE		ZIP CC	DE
10770 Wateridge C	ircle Sui	te 200					SA	N DIE	GO			CA		9212	21
	SECTI	SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 813611979													
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SI	CTION							TION (i	if applic	able)					
<u></u>			-			Not App									
☐ 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  541714 - Research and Development in Biotechnology (except Nanobiotechnology)															
541714						DEMO				technoic	ogy)				
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				au		Native Hawaiian or Other Pacific Islande	American Indian or Alaska Native	Two or More Races		Black or African American		Native Hawaiian or Other Pacific Islande	n or e	Two or More Races	
JOB CATEGORIES				Black or African American		iiai	dia tiv	Ra		r ii		Native Hawaiian other Pacific Islan	American Indian Alaska Native	Ra	Row
	<u>e</u>	Female	White	ck or Afric American	Asian	ic N	Inc	re	White	Black or an Amer	Asian	wa ic I	Inc Na	re	Total
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						z	Ā	_≥		•		꿀둥	Ā	_≥	
Executive/Senior Level Officials and Managers	0	0	11	0	2	0	0	0	8	0	2	0	0	0	23
First/Mid-Level Officials and Managers Professionals	0 4	6	9	1	2	1	0	3	5 13	0	13	0	0	2	21
Professionals Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	59 0
Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	3	1	0	2	0	0	1	4	0	4	0	0	0	15
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
<b>CURRENT 2023 REPORTING YEAR TOTAL</b>	4	11	34	1	8	2	0	5	30	1	20	0	0	2	118

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/17/2023 - 12/30/2023

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

1 employee not included in counts - EEOC job classification: Professionals; Gender: non-binary/X; Race/Ethnicity: Two or more Races (Not Hispanic or Latino)

0

PRIOR 2022 REPORTING YEAR TOTAL

## U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)

EEOC Standard Form 100 (SF 100) Revised 08/2023

2023 EMPLOYER IN	FORMATIO	N REPO	ORT (	EEO-1	1 COM	PONE	NT 1)	T 1) OMB Control Number: 3046-004 Expiration Date: 11/30/2026								
		SECTIO	ON A -	- TYP	E OF R	EPORT										
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	SECT	TION B -	EMP	LOYE	R IDEN	TIFICA	TION									
OFS COMPANY ID						EMPL	OYER N	AME								
HH01782		M	//ARA	/AI LIF	ESCIE	NCES	INTERI	MEDIA	TE HOL	DINGS	LLC					
ADDRESS						Cl	TY/TOV	VΝ			STATE		ZIP CO	DE		
No physical lo	ocations															
SECTION C - H	IEADQUARTE	RS OR ES									ıble)					
HQ/ESTABLISHMENT-LEVEL UNIT ID				HEADQ	UARTE	RS OR ES	STABLIS	HMEN	Γ-LEVEL	NAME						
JE07344	GLEN RESEARCH LLC															
HEADQUARTERS OR ESTABLISHM	ENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE													DE		
22825 Davis D	rive #100					S	ΓERLIN	IG			VA		2016	64		
	SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 465081787															
	SECTION	ON E – E	MPLO	OYER	FILING	G ELIGI	BILIT	Y								
X YES (Employer Is Eligibl	le to File) 🔲 NO	(Employe	er Is N	ot Elig	ible to F	ïle)	EMPL	OYER	NO LON	IGER I	N BUS	INESS				
SE	CCTION F - FE	DERAL (					TION (	if applic	able)							
YES (Single-Establishr	-	•					tablishn	nent Em	ployer is	Federal	l Contra	ctor)				
☐ YES (	Headquarters is	Federal Co	ontract	or)	YES (N	lon-Head	dquarter	s Establ	ishment i	s Feder	al Contr	ractor)				
	□ Y	ES (One	or Mo	re Non	-Headqı	arters E	Establish	ments i	s Federal	Contra	actor)					
325008	- All Other Misc	ECTION						ion Ma	nufactur	ina						
020000	SECTION								Halaotai	"ig						
						Race/E	thnicit	у								
	Hispanic					Not	Hispan	ic or L	atino							
	or Latino			M	ale					Fen	nale	1 1				
JOB CATEGORIES	Φ		frican an	_	aiian or Islander	idian or ative	e Races		or erican	_	aiian or Islander	dian or ative	e Races	Row Total		

	Hispanic Not Hispanic or Latino														
	Hisp	anic					Not	Hispan	ic or L	atino					
	or La	atino			M	ale					Fen	nale			
JOB CATEGORIES	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	Row Total
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	0	0	2	0	0	0	0	1	3	0	0	0	0	0	6
Professionals	0	0	3	0	1	0	0	1	3	0	0	0	0	0	8
Technicians	0	1	8	1	1	0	0	0	1	0	3	0	0	0	15
Sales Workers	1	0	2	0	0	0	0	0	0	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	1	0	0	0	0	1	0	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 2023 REPORTING YEAR TOTAL	1	1	16	1	3	0	0	2	7	1	3	0	0	0	35
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

SECTION I – WORKFORCE SNAPSHOT PERIOD 12/17/2023 - 12/30/2023

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

No Comments Provided

#### 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

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						E OF RI									
		CECT				EVEL I									
OFS COMPANY ID		SECT	TON B	– EMP	LOYE	R IDEN		OYER N	ΔME						
HH01782				MARA	VAI LIF	ESCIE				TE HOL	DINGS	LLC			
ADDRESS							Cl	TY/TOW	/N			STATE		ZIP CO	DDE
No physical lo	ocations														
SECTION C - H	EADQU	JARTE	RS OR									able)	1		
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEADQ	UARTE	RS OR ES	STABLIS	SHMENT	T-LEVEL	NAME				
PZ33927							Alp	hazym	е						
HEADQUARTERS OR ESTABLISHM			DRESS					TY/TOW				STATE		ZIP CO	DDE
674 Pioneer Roa	id, Ste 1	110					J	UPITE	R			FL		3345	58
	SECTI	ON D -	EMPI		IDENT 324352	TIFICA'	TION N	UMBE	R (EIN	)					
SECTION E – EMPLOYER FILING ELIGIBILITY															
X YES (Employer Is Eligibl										NO LON	NGER I	IN BUS	INESS		
SE	CTION							TION (i	if applic	able)					
	-					Not App									
☐ <b>YES</b> (Single-Establishr	-	•													
☐ 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 325199 - All Other Basic Organic Chemical Manufacturing															
SECTION H – WORKFORCE DEMOGRAPHIC DATA															
SECTION H – WORKFORCE DEMOGRAPHIC DATA  Race/Ethnicity															
		anic					Not	Hispan	ic or L	atino					
	or L	atino			М	ale					Fen	nale			
						z je	_	S		_		or der	ō	S	
100 0175000150				Black or African American		Native Hawaiian or Other Pacific Islande	American Indian or Alaska Native	Two or More Races		Black or African American		Native Hawaiian or Other Pacific Islande	an c ve	Two or More Races	Row
JOB CATEGORIES	ø	ale	te te	ck or Afric American	⊊	vaii	nerican Indian Alaska Native	Fe F	ē.	or ner	⊊	Native Hawaiian Other Pacific Islan	American Indian Alaska Native	ē	Total
	Male	Female	White	or ,	Asian	Hav	an I ka I	Mo	White	Black or an Amer	Asian	Hav	an I ka I	Mo	
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Executive/Senior Level Officials and Managers	0	0	4	0	0	0	0	0	0	0	0	0	0	0	4
First/Mid-Level Officials and Managers	0	1	4	0	1	0	0	0	2	0	0	0	0	0	8
Professionals Technicians	0	0	7	0	0	0	0	0	6	0	1	0	0	0	17 5
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	1	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 2023 REPORTING YEAR TOTAL	1	1	19	1	1	0	0	1	9	1	2	0	0	0	36
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
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SECTION I – WORKFORCE SNAPSHOT PERIOD 12/17/2023 - 12/30/2023

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

No Comments Provided

# LLS EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)

EEOC Standard Form 100 (SF 100)

2023 EMPLOYER IN													ontrol Nur ation Dat	mber: 30	
				TION A				т			I				
		SECT		B – EMP											
OFS COMPANY ID		SECI	ION D	- ENIP	LUIE	KIDEN		OYER N	AME						
HH01782				MARA	VAI LIF	ESCIE				TE HOL	DINGS	SLLC			
ADDRESS								TY/TOW				STATE	1	ZIP CC	NDE
No physical lo	ootiona						CI	11/10W	VIN			SIAIL		ZIFCC	DE
			20.02						****	TTON (					
SECTION C – HI HO/ESTABLISHMENT-LEVEL UNIT ID	EADQU	ARTE	RS OR							TION (11 Γ-LEVEL		able)			
HH01917					TIEADQ	-	NK BIO				NAME				
						TRILI				JILO		~			
HEADQUARTERS OR ESTABLISHMI			DRESS					TY/TOW				STATE		ZIP CC	
10770 Wateridge Ci	rcie, Ste	e 200					SA	N DIE	<b>3</b> 0			CA		9212	21
	SECTI	ON D -	EMPI	LOYER	IDENT 330717		TION N	UMBE	R (EIN	)					
		SECTIO	ON E -	EMPL			ELIGI	BILITY	Y						
XES (Employer Is Eligible										NO LO	NGER I	IN BUS	INESS		
SEG	CTION			L CONT				ΓΙΟΝ (i	if applic	able)					
	_		_	tity ID (											
☐ YES (Single-Establishm	ent Emp	loyer is	Federa	I Contrac	ctor)	YES (N	Multi-Es	tablishm	nent Em	ployer is	Federa	l Contra	ctor)		
YES (I	Headqua <sub>1</sub>	rters is I	Federal	Contrac	tor)	YES (N	Ion-Head	lquarter	s Establ	ishment	is Feder	al Contr	ractor)		
		□ Y	ES (O	ne or Mo	ore Non	-Headqu	arters E	stablish	ments i	s Federa	l Contra	actor)			
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				Ę		Native Hawaiian or Other Pacific Islander	o e	Two or More Races		an		Native Hawaiian or Other Pacific Islander	o or	Two or More Races	
JOB CATEGORIES		-		Black or African American		iiar	American Indian or Alaska Native	Ra		Black or African American		iiar	American Indian or Alaska Native	Ra	Row
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Executive/Senior Level Officials and Managers	0	0	8	0	2	0	0	1	3	0	2	0	0	1	17
First/Mid-Level Officials and Managers	11	6	17	2	15	1	0	4	14	2	8	0	0	2	82
Professionals	9	8	32	1	16	2	1	5	21	2	17	0	0	3	117
Technicians	28	22	7	6	20	0	0	7	16	2	15	1	1	1	126
Sales Workers	0	2	7	0	3	0	0	0	5	0	1	0	0	0	18
Administrative Support Workers	5	1	8	0	4	0	0	1	4	0	3	0	0	1	27
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	4	0	1	1	2	1	0	0	1	0	0	0	0	1	11
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	57	39	80	10	62	4	1	18	64	6	46	1	1	9	398
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

SECTION I – WORKFORCE SNAPSHOT PERIOD

12/17/2023 - 12/30/2023

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

1 employee not included in counts - EEOC job classification: Technicians; Gender: non-binary/X; Race/Ethnicity: Asian (Not Hispanic or Latino)

#### 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

### SECTION A - TYPE OF REPORT

ESTABLISHMENT-LEVEL REPORT											
	SECTION B - EMPLO	OYER IDENTIFICATION									
OFS COMPANY ID		EMPLOYER NAME									
HH01782	MARAVA	AI LIFESCIENCES INTERMEDIATE HOLDINGS LLC									
ADDRES	SS	CITY/TOWN STATE ZI									
No physica	al locations										
SECTION C -	- HEADQUARTERS OR ESTABLI	SHMENT-LEVEL IDENTIFICATION (if app	licable)								

HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME HH01881 **CYGNUS TECHNOLOGIES** HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE

1523 Olde Waterford Way **LELAND** NC 28451

#### SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 611442121

SECTION E - EMPLOYER FILING ELIGIBILITY

X 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

325414 - Biological Product (except Diagnostic) Manufacturing
SECTION H - WORKFORCE DEMOGRAPHIC DATA

SECTION H - WORKFORCE DEMOGRAPHIC DATA															
							Race/E	thnicit	y						
	Hisp	anic					Not	Hispan	ic or L	atino					
	or La	atino			М	ale					Fen	nale			
JOB CATEGORIES	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	Row Total
Executive/Senior Level Officials and Managers	0	0	3	0	0	0	0	0	2	0	0	0	0	0	5
First/Mid-Level Officials and Managers	0	0	4	1	0	0	0	1	2	0	0	0	0	0	8
Professionals	1	2	13	0	1	0	0	0	6	0	0	0	0	0	23
Technicians	0	0	6	0	0	0	0	0	9	2	1	0	0	0	18
Sales Workers	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers	0	0	1	0	0	0	0	0	3	0	0	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	2	1	0	0	0	0	5	1	0	0	1	0	10
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	1	2	31	2	1	0	0	1	27	3	1	0	1	0	70
PRIOR 2022 REPORTING YEAR TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

SECTION I - WORKFORCE SNAPSHOT PERIOD

12/17/2023 - 12/30/202

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

1 employee not included in counts - EEOC job classification: Laborers and Helpers; Gender: non-binary/X; Race/Ethnicity: White (Not Hispanic or Latino)