

**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 H075863	EMPLOYER NAME Globe Life			
ADDRESS 3700 SOUTH STONEBRIDGE DRIVE	CITY/TOWN MCKINNEY	STATE TX	ZIP CODE 75070	

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)
630780404

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

[524298 - All Other Insurance Related Activities](#)

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	7	4	99	2	5	0	2	0	37	2	2	0	0	1	161
First/Mid-Level Officials and Managers	9	12	89	4	12	0	0	0	102	14	8	0	2	2	254
Professionals	30	31	307	32	68	1	4	8	311	76	79	1	3	4	955
Technicians	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Sales Workers	1	3	51	5	1	0	0	0	37	5	0	0	0	0	103
Administrative Support Workers	52	259	133	82	27	0	0	3	666	499	57	1	8	18	1805
Craft Workers	0	0	5	0	11	0	0	0	0	0	0	0	0	0	16
Operatives	14	2	19	18	17	0	1	0	10	5	32	0	0	0	118
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	1	0	0	0	0	0	1
CURRENT 2022 REPORTING YEAR TOTAL	113	311	704	143	141	1	7	11	1164	601	178	2	13	25	3414
PRIOR 2021 REPORTING YEAR TOTAL	106	276	688	138	128	2	9	11	1094	539	178	3	13	28	3213

SECTION I – WORKFORCE SNAPSHOT PERIOD

[10/9/2022 - 10/22/2022](#)

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

Not Applicable

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SECTION K – OFFICIAL CERTIFICATION OF SUBMISSION

EMPLOYER IDENTIFICATION

OFS COMPANY ID
H075863

EMPLOYER NAME
Globe Life

ADDRESS

3700 SOUTH STONEBRIDGE DRIVE

CITY/TOWN

MCKINNEY

STATE

TX

ZIP CODE

75070

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

12/5/2023 6:53 PM [EST]

EMPLOYER'S CERTIFYING OFFICIAL

Name of Employer's Certifying Official

[REDACTED]

Title of Certifying Official

[REDACTED]

Email Address of Certifying Official

[REDACTED]

Telephone Number of Certifying Official

[REDACTED]

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

Name of Primary POC

[REDACTED]

Title and Employer of Primary POC

[REDACTED]

Email Address of Primary POC

[REDACTED]

Telephone Number of Primary POC

[REDACTED]

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SECTION A – TYPE OF REPORT
HEADQUARTERS REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID H075863	EMPLOYER NAME Globe Life			
ADDRESS 3700 SOUTH STONEBRIDGE DRIVE	CITY/TOWN MCKINNEY	STATE TX	ZIP CODE 75070	

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

HQ/ESTABLISHMENT-LEVEL UNIT ID H075863	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME Globe Life			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3700 SOUTH STONEBRIDGE DRIVE	CITY/TOWN MCKINNEY	STATE TX	ZIP CODE 75070	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
630780404

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

[524298 - All Other Insurance Related Activities](#)

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	11	0	0	0	1	0	1	0	0	0	0	0	13
First/Mid-Level Officials and Managers	1	0	1	0	0	0	0	0	3	0	0	0	0	0	5
Professionals	1	0	3	0	2	0	0	0	2	1	0	0	0	0	9
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	0	0	0	0	0	0	0
Administrative Support Workers	0	0	1	0	1	0	0	0	4	0	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 2022 REPORTING YEAR TOTAL	2	0	16	0	3	0	1	0	10	1	0	0	0	0	33
PRIOR 2021 REPORTING YEAR TOTAL	2	0	13	0	2	0	1	0	8	0	1	0	0	0	27

SECTION I – WORKFORCE SNAPSHOT PERIOD

[10/9/2022 - 10/22/2022](#)

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

No Comments Provided

**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)
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SECTION A – TYPE OF REPORT
ESTABLISHMENT REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID H075863	EMPLOYER NAME Globe Life			
ADDRESS 3700 SOUTH STONEBRIDGE DRIVE	CITY/TOWN MCKINNEY	STATE TX	ZIP CODE 75070	

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

HQ/ESTABLISHMENT-LEVEL UNIT ID JN15186	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME NATIONAL INCOME LIFE INSURANCE			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 301 PLAINFIELD RD, STE 150	CITY/TOWN SYRACUSE	STATE NY	ZIP CODE 13212	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
223711800

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

524113 - Direct Life Insurance Carriers

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	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	4	1	0	0	0	0	0	0	0	0	0	0	0	5
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 2022 REPORTING YEAR TOTAL	0	0	5	1	0	0	0	0	0	0	0	0	0	0	0	6
PRIOR 2021 REPORTING YEAR TOTAL	0	0	5	0	0	0	0	0	0	0	0	0	0	0	0	5

SECTION I – WORKFORCE SNAPSHOT PERIOD

10/9/2022 - 10/22/2022

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

No Comments Provided

**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)
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SECTION A – TYPE OF REPORT
ESTABLISHMENT REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID H075863	EMPLOYER NAME Globe Life			
ADDRESS 3700 SOUTH STONEBRIDGE DRIVE	CITY/TOWN MCKINNEY	STATE TX	ZIP CODE 75070	

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

HQ/ESTABLISHMENT-LEVEL UNIT ID NA12240	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME GLOBE LIFE INS CO. OF NEW YORK			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 301 PLAINFIELD RD, STE 150	CITY/TOWN SYRACUSE	STATE NY	ZIP CODE 13212	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
133156923

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
524113 - Direct Life Insurance Carriers

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	0	0	2	0	0	0	0	0	2	0	0	0	0	0	4
Professionals	1	1	0	0	0	1	0	0	6	1	0	0	0	0	10
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	0	0	0	0	0	0	0
Administrative Support Workers	0	0	0	1	0	0	0	0	2	0	0	0	0	0	3
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 2022 REPORTING YEAR TOTAL	1	1	3	1	0	1	0	0	10	1	0	0	0	0	18
PRIOR 2021 REPORTING YEAR TOTAL	0	1	3	0	0	1	0	0	7	1	0	0	0	0	13

SECTION I – WORKFORCE SNAPSHOT PERIOD
10/9/2022 - 10/22/2022

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

No Comments Provided

**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)
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SECTION A – TYPE OF REPORT
ESTABLISHMENT REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID H075863	EMPLOYER NAME Globe Life			
ADDRESS 3700 SOUTH STONEBRIDGE DRIVE	CITY/TOWN MCKINNEY	STATE TX	ZIP CODE 75070	

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

HQ/ESTABLISHMENT-LEVEL UNIT ID L230903	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME GLOBE LIFE AND ACCIDENT INS			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3700 S STONEBRIDGE DR, POST OFFICE BOX 8080	CITY/TOWN MCKINNEY	STATE TX	ZIP CODE 75070	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
630782739

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
524113 - Direct Life Insurance Carriers

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	4	4	74	2	5	0	1	0	29	2	2	0	0	1	124
First/Mid-Level Officials and Managers	7	7	73	4	12	0	0	0	62	10	8	0	2	1	186
Professionals	25	24	290	30	64	0	4	8	253	64	78	1	3	4	848
Technicians	0	0	1	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	33	113	98	61	24	0	0	3	438	308	52	1	7	12	1150
Craft Workers	0	0	5	0	11	0	0	0	0	0	0	0	0	0	16
Operatives	2	1	15	15	17	0	1	0	5	3	31	0	0	0	90
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	1	0	0	0	0	0	1
CURRENT 2022 REPORTING YEAR TOTAL	71	149	556	112	133	0	6	11	788	387	171	2	12	18	2416
PRIOR 2021 REPORTING YEAR TOTAL	75	123	536	115	124	1	8	11	725	349	172	2	12	19	2272

SECTION I – WORKFORCE SNAPSHOT PERIOD
10/9/2022 - 10/22/2022

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

No Comments Provided

**U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)
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SECTION A – TYPE OF REPORT
ESTABLISHMENT REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID H075863	EMPLOYER NAME Globe Life			
ADDRESS 3700 SOUTH STONEBRIDGE DRIVE	CITY/TOWN MCKINNEY	STATE TX	ZIP CODE 75070	

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

HQ/ESTABLISHMENT-LEVEL UNIT ID 9244943	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME AMERICAN INCOME LIFE INSURANCE			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS P.O BOX 2608, 1200 WOODDED ACRES	CITY/TOWN WACO	STATE TX	ZIP CODE 76797	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
741365936

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
524113 - Direct Life Insurance Carriers

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	3	0	13	0	0	0	0	0	7	0	0	0	0	0	23
First/Mid-Level Officials and Managers	1	5	9	0	0	0	0	0	35	4	0	0	0	1	55
Professionals	3	6	14	2	2	0	0	0	50	10	1	0	0	0	88
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	1	3	16	1	1	0	0	0	29	4	0	0	0	0	55
Administrative Support Workers	19	146	34	20	2	0	0	0	220	191	5	0	1	6	644
Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Operatives	12	1	4	3	0	0	0	0	5	2	1	0	0	0	28
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	39	161	90	26	5	0	0	0	346	211	7	0	1	7	893
PRIOR 2021 REPORTING YEAR TOTAL	29	152	93	19	2	0	0	0	340	188	5	1	1	9	839

SECTION I – WORKFORCE SNAPSHOT PERIOD
10/9/2022 - 10/22/2022

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

No Comments Provided

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

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ESTABLISHMENT REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID H075863	EMPLOYER NAME Globe Life			
ADDRESS 3700 SOUTH STONEBRIDGE DRIVE	CITY/TOWN MCKINNEY	STATE TX	ZIP CODE 75070	

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

HQ/ESTABLISHMENT-LEVEL UNIT ID L230921	HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME LIBERTY EMPLOYEE AGENTS			
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS 3700 S STONEBRIDGE DR, POST OFFICE BOX 8080	CITY/TOWN MCKINNEY	STATE TX	ZIP CODE 75070	

SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN)
630124600

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

524113 - Direct Life Insurance Carriers

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	3	0	0	0	0	0	0	0	0	0	0	0	0	3
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	31	3	0	0	0	0	8	1	0	0	0	0	0	43
Administrative Support Workers	0	0	0	0	0	0	0	0	2	0	0	0	0	0	0	2
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 2022 REPORTING YEAR TOTAL	0	0	34	3	0	0	0	0	10	1	0	0	0	0	0	48
PRIOR 2021 REPORTING YEAR TOTAL	0	0	38	4	0	0	0	0	14	1	0	0	0	0	0	57

SECTION I – WORKFORCE SNAPSHOT PERIOD

10/9/2022 - 10/22/2022

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

No Comments Provided