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OFS COMPANY ID								LOYER N							
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SECTION C – HI	EADQU	JARTE	RS OR									able)			
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HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E – EMPLOYER FILING ELIGIBILITY SECTION E – EMPLOYER FILING ELIGIBILITY MO (Employer Is Eligible to File) □ NO (Employer Is Not Eligible to File) □ EMPLOYER NO LONGER IN BUSINESS														JDE	
223305147 SECTION E – EMPLOYER FILING ELIGIBILITY X YES (Employer Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS															
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Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	0 9	0	6 19	0	0	0	0	0	8 17	0	1	0	0	1	16 53
Professionals	4	3	16	1	0	0	0	1	16	2	1	0	0	1	45
Technicians	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Sales Workers Administrative Support Workers	2	8	5 0	2	1	0	0	0	5	1	1	0	0	1	26 15
Craft Workers	43	4	3	3	1	0	0	0	0	0	0	0	0	1	55
Operatives 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	59	19	50	7	3	0	0	2	53	5	7	0	0	7	212
PRIOR 2022 REPORTING YEAR TOTAL	49	18	47	9	4	0	0	5	57	8	7	0	0	6	210
	2	SECTI	ONI-			E SNAP		PERIO	D						
SECTION J	-HEA	DQUA	RTER					VEL CO	OMME	NTS (op	tional)				
Not Applicable															

	IPLOYMENT OPPORTUNITY (ER INFORMATION REPORT (E		R OMB Con	ndard Form 100 (SF 100) evised 08/2023 ttrol Number: 3046-0049 tion Date: 11/30/2026
	SECTION K – OFFICIAL CER	TIFICATION OF SUBMISSION		
	EMPLOYER II	DENTIFICATION		
OFS COMPANY ID L310936		EMPLOYER NAME VERIS RESIDENTIAL INC.		
ADDRES	S	CITY/TOWN	STATE	ZIP CODE
210 HUDSON STREET, HA	RBORSIDE III, STE 400	JERSEY CITY	NJ	07311
	CERTIFICATION O	COMMENTS (optional)		
No Certification Comments Provided				
		DN STATEMENT		
"I certify that the information, inclu- and was prepare		ita, provided in this report is correc set forth in the form and accompan		
		t are punishable by law, US Code,		
	DATE OF CE	RTIFICATION		
	5/7/2024 11:			
Name of Employer's		TIFYING OFFICIAL	ertifying Official	
Joselyn	vvrignt	Senior Human Re	sources Coordinat	or
Email Address of C	Certifying Official	Telephone Numb	er of Certifying Official	l
jwright@verisre	sidential.com	732-5	90-1578	
PRIM	IARY POINT OF CONTACT (POC)	FOR EEO-1 COMPONENT 1 REPOI	RTING	
Name of Prin		Title and Emplo	oyer of Primary POC	
Joselyn	Wright		sources Coordinat	or
Email Address o	f Primary POC		idential, Inc. mber of Primary POC	
	-	-		
jwright@verisre	sidential.com	732-5	90-1578	

	RINFORMATION REPORT (EEO-1 COMPONENT 1) OMB Control Number: 3046-0049 Expiration Date: 11/30/2026 SECTION A - TYPE OF REPORT HEADQUARTERS REPORT EMPLOYER NAME SECTION B - EMPLOYER IDENTIFICATION EMPLOYER NAME VERIS RESIDENTIAL INC. STATE ZIP CODE ARBORSIDE III, STE 400 JERSEY CITY NJ 07311 - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME VERIS RESIDENTIAL INC. SHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME VERIS RESIDENTIAL INC. SHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE HARBORSIDE III, STE 400 JERSEY CITY NJ 07311 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E - EMPLOYER FILING ELIGIBILITY gible 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 Inique Entity ID (UEI): Not Applicable Using the formation of More Non-Headquarters Establishment is Federal Contractor) SECTION G - NAICS INFORMATION														
		SECT						ATION							
OFS COMPANY ID		blei			LUIL				JAME						
L310936						VEI	RIS RE	SIDEN	TIAL IN	IC.					
HEADQUARTERS REPORT SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID EMPLOYER NAME L310936 VERIS RESIDENTIAL INC. ADDRESS CITY/TOWN STATE ZIP CODE 210 HUDSON STREET, HARBORSIDE III, STE 400 JERSEY CITY NJ 07311 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME JERSEY CITY NJ 07311 L310936 VERIS RESIDENTIAL INC. VERIS RESIDENTIAL INC. JERSEY CITY NJ 07311 HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 210 HUDSON STREET, HARBORSIDE III, STE 400 JERSEY CITY NJ 07311 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E - EMPLOYER FILING ELIGIBILITY SECTION F - EMPLOYER FILING ELIGIBILITY SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable Unique Entity ID (UEI): NOt Applicable Unique Entity ID (UEI): Not Applicable Section Fieleral Contractor) YES (Single-Establishment Employer is Federal Contractor) YES (Meadquarters is Federal Contractor) <td>DDE</td>														DDE	
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U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1) Revised 08/2023 OMB CONTROL Number: 3/40-049 Expiration Date: 11/30/2026 SECTION A - TYPE OF REPORT HEADQUARTERS REPORT SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID L310936 VERIS RESIDENTIAL INC. ADDRESS CITY/TOWN STATE ZIP CODE 10 HUDSON STREET, HARBORSIDE III, STE 400 JERRESEV CITY INJ 07311 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIO HUDSON STREET, HARBORSIDE III, STE 400 JERRESCUTY INJ 07311 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIO HUDSON STREET, HARBORSIDE III, STE 400 JERRESCUTY INJ 07311 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 22305147 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 22305147 SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): NOT ADDRESS SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): NOT ADDRESS SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): NOT ADDRESS SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): NOT ADDRESS SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): NOT ADDRESS SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) SECTION F - FADERAL CONTRACTOR DESIGNATION (if applicable) SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) SECTION F - NAICS INFORMATION S1311 - Residential Property Managers SECTION F															
U.S. EQUAL EMPLOYMENT OPPORT UNITY COMMISSION (EEOC) Revised 08:2023 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT I) Revised 08:2023 OMB ComPONENT I) SECTION A - TYPE OF REPORT HEADQUARTERS REPORT EMPLOYER NAME L310936 OFS COMPANY ID L310936 SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID L310936 OFS COMPANY ID L310936 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQUESTABLISHMENT-LEVEL JDENTIFICATION NUMBER (EIN) L310936 VERIS RESIDENTIAL INC. HEADQUARTERS OR ESTABLISHMENT-LEVEL JDENTIFICATION NUMBER (EIN) L310 HUDSON STREET, HARBORSIDE II, STE 400 JERSEY CITY NJ 07311 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 22306147 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 2210 HUDSON STREET, HARBORSIDE II, STE 400 JERSEY CITY NJ 07311															
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OMB Control Number Expiration Date: 11 OMB Control Number Expiration Date: 11 SECTION A - TYPE OF REPORT HEADQUARTERS REPORT SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID L 310936 CITY/TOWN STATE ADDRESS CITY/TOWN STATE LIGNOVARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE 200 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION NJ 0 SECTION E - EMPLOYER IDENTIFICATION SECTION E - EMPLOYER FILING ELIGIBILITY															
210 HUDSON STREET, HARBORSIDE III, STE 400 JERSEY CITY NJ 07311 SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E – EMPLOYER FILING ELIGIBILITY XYES (Employer Is Eligible to File) INO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
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210 HUDSON STREET, HARBORSIDE III, STE 400 JERSEY CITY NJ 07311 SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 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															
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)															
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Executive/Senior Level Officials and Managers	0	0	5	0	0	0	0	0	8	0	1	0	0	1	15
First/Mid-Level Officials and Managers	1	0	10	0	0	0	0	0	9	0	3	0	0	0	23
Professionals	1	1	9	0	0	0	0	0	10	2	1	0	0	0	24
Technicians Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	1	0	0	0	0	0	0	7	1	1	0	0	1	11
Craft Workers 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	2	2	24	0	0	0	0	0	34	3	6	0	0	2	73
PRIOR 2022 REPORTING YEAR TOTAL	1	6	26	0	1	0	0	2	34	5	6	0	0	2	83
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SECTION J	– HEAI	DQUAI	RTERS					VEL CO	OMME	NTS (op	tional)				
No Comments Provided															

EEOC Standard F Revised 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1) EEOC Standard F Revised OMB Control Num SECTION A - TYPE OF REPORT ESTABLISHMENT REPORT SECTION B - EMPLOYER IDENTIFICATION OFS COMPANY ID L310936 OFS COMPANY ID ADDRESS CITY/TOWN STATE ADDRESS CITY/TOWN STATE MA42904 VERIS RESIDENTIAL INC. HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS <														08/2023 mber: 30	46-0049
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	EADQU	ARTE	RS OR									able)			
MA42904					HEAD	-					NAME				
MA42904 VERIS RESIDENTIAL INC. HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 1 Fineran Way SHORT HILLS NJ 07078 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E - EMPLOYER FILING ELIGIBILITY SECTION E - EMPLOYER FILING ELIGIBILITY SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable															
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223305147 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															
223305147 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															
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Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals Technicians	0	1 0	0	0	0	0	0	0	0	0	0	0	0	0	1 0
Sales Workers	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers Operatives	0	0	1	1	0	0	0	0	0	0	0	0	0	0	2
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	0	1	1	1	0	0	0	0	0	1	0	0	0	0	4
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	U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2023 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1) SECTION A – TYPE OF REPORT ESTABLISHMENT REPORT SECTION B – EMPLOYER IDENTIFICATION OFS COMPANY ID L310936 VERIS RESIDENTIAL INC. ADDRESS CITY/TOWN 210 HUDSON STREET, HARBORSIDE III, STE 400 JERSEY CITY SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN 220 Broadway, STE. 305 CITY/TOWN LYNNFIELD														(SF 100) 46-0049 /2026
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OFS COMPANY ID		blei	10111		LUIL		EMPI	.OYER N							
L310936						VEI	RIS RE	SIDEN	TIAL IN	IC.					
ADDRESS							С	ITY/TOW	WN			STATE		ZIP CO	DDE
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					HEAD	-					NAME				
NQ70271 VERIS RESIDENTIAL INC. HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 220 Broadway, STE. 305 LYNNFIELD MA 01940 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 223305147 SECTION E - EMPLOYER FILING ELIGIBILITY 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)															
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 220 Broadway, STE. 305 LYNNFIELD MA 01940 SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E – EMPLOYER FILING ELIGIBILITY SECTION E – EMPLOYER FILING ELIGIBILITY YES (Employer Is Eligible to File) D NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS															
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223305147 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															
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JOB CATEGORIES		a		n rici		iiar Isla	diar	Ra		eric		iiar Isla	diar	Ra	Row Total
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	ŝ	Fer	ž	Black or African American	As	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	Ň	Black or African American	As	Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	
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Executive/Senior Level Officials and Managers	0	0	4	0	0	0	0		0	0	0	0		0	4
First/Mid-Level Officials and Managers	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Professionals	0	0	2	0	0	0	0	0	1	0	0	0	0	0	3
Technicians Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	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
Operatives 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	0	0	5	0	0	0	0	0	2	0	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	0	1	5	0	0	0	0	0	2	0	0	0	0	0	8
	2	SECTIO	ONI-			E SNAP 10/27/20		PERIO	D						
SECTION J No Comments Provided	– HEA	DQUAI	RTERS	S OR ES	TABL	ISHME	NT-LE	VEL CO	OMME	NTS (op	tional)				

U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	tandard F Revised ontrol Nu ration Dat	08/2023 mber: 30	46-0049
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OFS COMPANY ID		5201			2012		EMPI	OYER N							
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ADDRESS							С	ITY/TOV	VN			STATE		ZIP CO)DE
210 HUDSON STREET, HAR								RSEY C				NJ		073	11
SECTION C – HI	EADQU	JARTE	RS OR	ESTAE	BLISHN	MENT-I	LEVEL	IDENT	'IFICA'	TION (i	f applic	able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEAD	QUARTE					NAME				
MA91771 VERIS RESIDENTIAL INC. HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 425 Washington Boulevard JERSEY CITY NJ 07310 SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E – EMPLOYER FILING ELIGIBILITY X YES (Employer Is Eligible to File) INO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS SECTION E – EEDERAL CONTRACTOR DESIGNATION (if amplicable)															
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223305147 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															
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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)															
Unique Entity ID (UEI): Not Applicable YES (Single-Establishment Employer is Federal Contractor) YES (Multi-Establishment Employer is Federal Contractor)															
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JOB CATEGORIES		e	σ	fric	-	aiia	ndia ativ	e R	ø	or ieri	c	aiia Islá	ndia ativ	e R	Total
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				Bla		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 or Alaska Native	Two or More Races	
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Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	1	2
Professionals Technicians	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Sales Workers	0	1	0	0	0	0	0	0	2	0	0	0	0	0	3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers Operatives	5 0	0	0	0	0	0	0	0	0	0	0	0	0	0	5 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	6	1	2	0	0	0	0	0	2	0	0	0	0	1	12
PRIOR 2022 REPORTING YEAR TOTAL	5		2	0 WORK		0 E SNAP			2	0	0	0	0	0	11
	i.	SECIN				L SINAP 10/27/20		PERIO	U						
SECTION J	– HEA	DQUAI	RTERS	S OR ES	TABL	ISHME	NT-LE	VEL CO	OMME	NTS (op	tional)				
No Comments Provided															

U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	tandard F Revised ontrol Nu ration Dat	08/2023 mber: 30	46-0049
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OFS COMPANY ID		5201			2012			LOYER N	IAME						
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ADDRESS							C	ITY/TOV	VN			STATE		ZIP CC	DDE
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SECTION C – HI	EADQU	JARTE	RS OR	ESTAE	BLISHN	MENT-I	LEVEL	IDENT	'IFICA'	TION (i	f applic	able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEAD	UARTE					NAME				
KL60546			DEGG			VEI		SIDEN		ю.		075 4 755	-	710.00	
HEADQUARTERS OR ESTABLISHME 273 16th St		EL ADI	JRESS					ITY/TOV				STATE NJ		ZIP CC 073	
		ON D -	- EMPl	LOYER	IDEN	FIFICA)		110		010	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 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															
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				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 or Alaska Native	Two or More Races	
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Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Professionals Technicians	0	1 0	0	0	0	0	0	0	0	0	0	0	0	0	1
Sales Workers	1	0	0	0	0	0	0	0	1	0	0	0	0	0	2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers Operatives	4	0	0	0	0	0	0	0	0	0	0	0	0	0	4
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	6	1	0	0	0	0	0	0	1	0	0	0	0	0	8
PRIOR 2022 REPORTING YEAR TOTAL	4	0	2	0	0	0	0	0	1	0	0	0	0	0	7
	1	SECTI	ON I –			E SNAP 10/27/20		PERIO	D						
SECTION J No Comments Provided	– HEA	DQUA	RTERS					VEL CO	OMME	NTS (op	tional)				
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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 (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 531311 - Residential Property Managers SECTION H – WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity Hispanic Not Hispanic or Latino Not Hispanic or Latino or Latino Male													andard F Revised ontrol Nu ation Dat	08/2023 mber: 30	46-0049
		SECT						ATION							
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-					HEAD	-					NAME				
KL72183 VERIS RESIDENTIAL INC. HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 21 Quarry Lane MALDEN MA 02148 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E - EMPLOYER FILING ELIGIBILITY SECTION E - EMPLOYER FILING ELIGIBILITY SECTION F - EMPLOYER FILING ELIGIBILITY SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable)															
KL72183 VERIS RESIDENTIAL INC. HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 21 Quarry Lane MALDEN MA 02148 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 223305147 SECTION E - EMPLOYER FILING ELIGIBILITY SECTION E - EMPLOYER FILING ELIGIBILITY SECTION F - EMPLOYER FILING ELIGIBILITY SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable)															
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E – EMPLOYER FILING ELIGIBILITY X YES (Employer Is Eligible to File) D NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS															10
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E – EMPLOYER FILING ELIGIBILITY X YES (Employer Is Eligible to File) D NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable)															
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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)															
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Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	1	0	0	0	0	0	0	0	0	0	0	0	2
Professionals Technicians	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1 0
Sales Workers	0	1	1	0	0	0	0	0	0	0	0	0	0	0	2
Administrative Support Workers 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	4	1	3	0	0	0	0	0	0	0	0	0	0	0	8
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SECTION J No Comments Provided	- HEA	DQUAI	RTERS	S OR ES	STABL	ISHME	NT-LE	VEL CO	OMME	NTS (op	tional)				

	IQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL MA51592 VERIS RESIDENTIAL INC. HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN 1100 Avenue at Port Imperial WEEHAWKEN SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E – EMPLOYER FILING ELIGIBILITY X YES (Employer Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO I SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable YES (Single-Establishment Employer is Federal Contractor)														(SF 100) 46-0049 /2026
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MA51592 VERIS RESIDENTIAL INC. HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 1100 Avenue at Port Imperial WEEHAWKEN NJ 07086 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 223305147 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)															
MA51592 VERIS RESIDENTIAL INC. HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 1100 Avenue at Port Imperial WEEHAWKEN NJ 07086 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 223305147 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														DDE	
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223305147 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															
223305147 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															
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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)															
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JOB CATEGORIES				n n		ian slan	ian tive	Rac		rica		ian slan	ian tive	Rac	Row
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Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers Professionals	0	0	0	0	0	0	0	1 0	0	0	0	0	0	0	1
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	2	0	0	0	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 Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	3	0	0	0	0	0	0	1	2	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	3	0	0	1	0	0	0	1	2	0	0	0	0	0	7
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SECTION J No Comments Provided	– HEA	DQUAI	RTERS					VEL CO	OMME	NTS (op	tional)				

U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	tandard F Revised ontrol Nu ration Dat	08/2023 mber: 30	46-0049
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OFS COMPANY ID		5201			2012			JOYER N	IAME						
L310936						VE	RIS RE	SIDEN	TIAL IN	IC.					
ADDRESS							С	ITY/TOV	VN			STATE		ZIP CC	DDE
210 HUDSON STREET, HAR	BORSI	DE III,	STE 4	00			JE	RSEY C	CITY			NJ		073 ⁻	11
SECTION C – HI	EADQU	ARTE	RS OR	ESTAF	BLISHN	MENT-I	LEVEL	IDENT	'IFICA'	FION (i	f applic	able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEAD	QUARTE					NAME				
MA87030						VE		SIDEN		IC.					
HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 40 Market Street MORRISTOWN NJ 07960 SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 223305147 SECTION E – EMPLOYER FILING ELIGIBILITY X YES (Employer Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS															
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223305147 SECTION E – EMPLOYER FILING ELIGIBILITY															
223305147 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)															
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SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable															
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Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers Professionals	0	0	1 0	0	0	0	0	0	1 0	0	0	0	0	0	2 0
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers	2	1	1	0	0	0	0	0	0	0	0	0	0	0	4
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	1	2	0	0	0	0	0	1	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	2	1	2	0	0	0	0	0	1	1	0	0	0	0	7
						E SNAP									
				10/16/2	2023 - 1	10/27/2	023								
SECTION J No Comments Provided	– HEAI	DQUAI	RTERS	S OR ES	TABL	ISHME	NT-LE	VEL CO	OMME	NTS (op	tional)				
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	EET, HARBORSIDE III, STE 400 JERSEY CITY ON C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if a FID HEADQUARTERS OR ESTABLISHMENT-LEVEL N VERIS RESIDENTIAL INC. 'ABLISHMENT-LEVEL ADDRESS CITY/TOWN ashington Boulevard JERSEY CITY SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E - EMPLOYER FILING ELIGIBILITY 'Is Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONG SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable Establishment Employer is Federal Contractor) YES (Multi-Establishment Employer is F SECTION G - NAICS INFORMATION 531311 - Residential Property Managers SECTION H - WORKFORCE DEMOGRAPHIC DATA Race/Ethnicity Hispanic Not Hispanic or Latino or Latino Wale Image: Section for Section for Latino													orm 100 08/2023 mber: 30 e: 11/30	
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		SECT	TION F	B – EMP	LOYE	R IDEN	TIFIC	ATION							
OFS COMPANY ID L310936						VEI				IC.					
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210 HUDSON STREET, HARBORSIDE III, STE 400 JERSEY CITY NJ 07311 SECTION C - HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID MA90121 VERIS RESIDENTIAL INC. HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 401 Washington Boulevard JERSEY CITY NJ 07310 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E - EMPLOYER FILING ELIGIBILITY SECTION E - EMPLOYER FILING ELIGIBILITY SECTION E - EMPLOYER FILING ELIGIBILITY SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable)														11	
ADDRESS CITY/TOWN STATE ZIP CODE 210 HUDSON STREET, HARBORSIDE III, STE 400 JERSEY CITY NJ 07311 SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME VERIS RESIDENTIAL INC. MA90121 VERIS RESIDENTIAL INC. VERIS RESIDENTIAL INC. HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 401 Washington Boulevard JERSEY CITY NJ 07310 SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 223305147 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)															
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Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1
Technicians Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Administrative Support Workers	0	1	0	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 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	0	0	0	0	0	0	0	0	0	0	0	0	2
PRIOR 2022 REPORTING YEAR TOTAL	2	1	0	0	0	0	0	0	0	0	0	0	0	0	3
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SECTION J	- HEAI	DOUAI	RTERS					VEL CO	OMME	NTS (op	tional)				
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U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	andard F Revised ontrol Nu ation Dat	08/2023 mber: 30	
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		SECT				R IDEN		ATION							
OFS COMPANY ID L310936					2012		EMPI	OYER N		IC.					
ADDRESS							С	ITY/TOW	WN			STATE		ZIP CC	DDE
210 HUDSON STREET, HAR	BORSI	DE III,	STE 4	00			JEI	RSEY	CITY			NJ		073	11
•					HEAD	-					NAME				
HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME MA71026 VERIS RESIDENTIAL INC. HEADQUARTERS OR ESTABLISHMENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE 145 Front Street WORCESTER MA 01608 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION D - EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION E - EMPLOYER FILING ELIGIBILITY SECTION E - EMPLOYER FILING ELIGIBILITY SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UEI): Not Applicable Unique Entity ID (UEI): Not Applicable VES (Single-Establishment Employer is Federal Contractor) [YES (Multi-Establishment Employer is Foderal Contractor) [YES (Multi-Establishment Employer is Contractor)															
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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															
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				Bla		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		Afri		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	
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Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	0 1	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	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	1	1
Operatives 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	0	2	0	0	0	0	0	2	0	0	0	0	1	6
PRIOR 2022 REPORTING YEAR TOTAL	1	0	2	1	0	0	0	0	2	0	0	0	0	0	6
	5	SECTI	ON I –			E SNAP 10/27/20		PERIO	D						
SECTION J No Comments Provided	– HEAI	DQUAI	RTERS					VEL CO	OMME	NTS (op	tional)				

U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C		08/2023 mber: 30	46-0049
	OMB Control Number: 2006-0009 Expiration Date: 11/30/2026 SECTION A - TYPE OF REPORT ESTABLISHMENT REPORT SECTION B - EMPLOYER IDENTIFICATION EMPLOYER NAME VERIS RESIDENTIAL INC. SECTION B - EMPLOYER IDENTIFICATION EMPLOYER NAME VERIS RESIDENTIAL INC. SECTION B - EMPLOYER IDENTIFICATION EMPLOYER NAME VERIS RESIDENTIAL INC. SECTION B - EMPLOYER IDENTIFICATION (if applicable) HEADQUARTERS OR ESTABLISHMENT-LEVEL DENTIFICATION (if applicable) HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME VERIS RESIDENTIAL INC. ISENTION 0 - EMPLOYER IDENTIFICATION NUMBER (EIN) 22306147 SECTION D - EMPLOYER FILING ELIGIBILITY Eligible to File) NO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS SECTION F - EMPLOYER FILING ELIGIBILITY Eligible to File) MO (Employer Is Not Eligible to File) EMPLOYER NO LONGER IN BUSINESS SECTION F - EMPLOYER FILING ELIGIBILITY SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UE): Not Applicable SECTION F - FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity ID (UE): Not Applicable SECTION H - WORKFORCE DEMOGRAPHIC DATA SECTION H - WORKFORCE DEMOGRAPHIC DATA Se														
		SECT	TION F	B – EMP	LOYE	R IDEN	TIFIC	ATION							
OFS COMPANY ID L310936						VEI				IC.					
ADDRESS							С	ITY/TOV	VN			STATE		ZIP CC	DDE
210 HUDSON STREET, HAR	BORSI	DE III, i	STE 4	00			JE	RSEY C	ITY			NJ		073	11
	EADQU	ARTE	RS OR	ESTAB	LISHN	MENT-I	LEVEL	IDENT	IFICA	ΓΙΟΝ (i	f applic	able)			
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	5	SECTIO	ON E -				G ELIG	IBILIT	Y						
X YES (Employer Is Eligible	to File)	🗌 NO	(Empl	oyer Is N	lot Elig	ible to F	ile) 🔲	EMPL	OYER	NO LOI	NGER	IN BUS	INESS		
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YES (Single-Establishm	ent Emp	oloyer is	Federa	l Contra	ctor)	YES (I	Multi-Es	stablishn	nent Em	ployer is	Federa	l Contra	ctor)		
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Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers															
Professionals Technicians															
Sales Workers	-														
Administrative Support Workers															
Craft Workers Operatives															
Laborers and Helpers	-			-											
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	7	0	0	0	1	0	0	0	0	0	0	0	0	0	8
PRIOR 2022 REPORTING YEAR TOTAL										0	0	0	0	0	7
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SECTION J	- HEA	DOUAI	RTERS					VEL CO	OMME	NTS (op	tional)				
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SECTION C – HI	EADQU	ARTE	RS OR	ESTAE	BLISHN	MENT-I	LEVEL	IDENT	'IFICA'	FION (it	f applica	able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID MA79594					HEAD	QUARTE		STABLIS SIDEN			NAME				
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YES (Single-Establishm	ent Emp	ployer is	Federa	l Contra	ctor)	YES (1	Multi-Es	stablishn	nent Em	ployer is	Federa	l Contra	ctor)		
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Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	1	0	0	0	0	0	0	0	3	0	0	0	0	0	4
Professionals Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers Operatives	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
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	3	0	1	0	0	0	0	0	3	0	0	0	0	0	7
PRIOR 2022 REPORTING YEAR TOTAL	2		0	0 WORK					2	0	0	0	0	0	4
	ì	SECII	UNI-			E SNAP 10/27/20		PERIO	U						
SECTION J No Comments Provided	- HEA	DQUAI	RTERS	S OR ES	TABL	ISHME	NT-LE	VEL CO	OMME	NTS (op	tional)				
1															

U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	tandard F Revised ontrol Nu ration Dat	08/2023 mber: 30	46-0049
	SECTION A – TYPE OF REPORT ESTABLISHMENT REPORT SECTION B – EMPLOYER IDENTIFICATION EMPLOYER NAME VERIS RESIDENTIAL INC. SECTION B – EMPLOYER IDENTIFICATION ISPESS CITY/TOWN T, HARBORSIDE III, STE 400 STATE 2000E HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) D VERIS RESIDENTIAL INC. SIGTION D – EMPLOYER IDENTIFICATION (If applicable) D STATE 2000E HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME VERIS RESIDENTIAL INC. SIGTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 223305147 SECTION P – EMPLOYER ILOR ELIGIBILITY Eligible to File) D NO (Employer Is Not Eligible to File) D EMPLOYER NO LONGER IN BUSINESS SECTION F – FEDERAL CONTRACTOR DESIGNATION (if applicable) Unique Entity DU (CUE): NO (Applicable) SECTION F – FEDERAL CONTRACTOR DESIGNATION (Stapplicable) SECTION F – FEDERAL CONTRACTOR DESIGNATION (Stapplicable) SECTION F – NOR-Headquarters Establishment is Federal Contractor) SECTION F – KORMATION S331311 - Residential Property Managers SECTION H – WORKFORCE DEMORGER PHILD DATA (SeCTION C – NAICS INFORMATION S3311 + Residential Property Managers SECTION H – WORKFORCE DEMORGER/EIN) SECTION I – ORKFORCE DEMORGER PHILD ATA (SeCTION N – STAPL NOR HEADQUARTER SETTION – STAPL NOR HEADQUARTER SE														
		SECT	FION E	B – EMP	LOYE	R IDEN	TIFIC	ATION							
OFS COMPANY ID L310936						VEI				IC.					
ADDRESS							С	CITY/TOW	WN			STATE		ZIP CC	DDE
210 HUDSON STREET, HAR	BORSI	DE III,	STE 4	00			JEI	RSEY (CITY			NJ		073	11
	EADQU	ARTE	RS OR	ESTAB	BLISHN	MENT-I	LEVEL	IDENI	'IFICA'	TION (i	f applic	able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEADQ	-					NAME				
MA80652						VEI				IC.					
HEADQUARTERS OR ESTABLISHME 3-5 Avenue at Po			ORESS												
				2	223305	5147)			•		
X YES (Employer Is Eligible										NO LOI	NGER	IN BUS	INESS		
			· •	•											
YES (Single-Establishm	ent Emp	oloyer is	Federa	l Contra	ctor)	YES (1	Multi-Es	stablishn	nent Em	ployer is	s Federa	al Contra	ctor)		
	Ieadaua	rters is l	Federal	Contrac	tor) 🗖	YES (N	Non-Hea	dauarter	s Establ	ishment	is Fede	ral Cont	ractor)		
	1							-					,		
		S	ECTIC	DNG-1	NAICS	INFOR	MATIC	ON	intento i	5 I cucit	u conu	actor)			
	CT.	5	31311	- Resid	ential F	Property	/ Mana	gers	700 A						
	SE		NH-V	VORKF	ORCE										
	Hisp	anic							-	atino					-
					M	lale					Fe	male			
												. 5			
				an		io u	e or	lces		an			e or	Ices	_
JOB CATEGORIES		e		fric an	_	aiia Isla	dia	e Re		or eric	_	aiia Isla	dia	e Re	Row Total
	lale	ma	/hite	or A eric	siar	awa	a N	Vore	/hite	Am	siar	awa	an	lore	
	2	Fe	\$	Am	A	/e H Pac	rica ask	or N	2	Bla	A	le H Pac	rica ask	or N	
				Bla		Vativ ther	Ame	Ň		Afri		Vativ ther	Ame	[wo	
						-0	-					-0		-	
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	0	0	0	0	0	0		0	0	•		0	0	•	0
Professionals	-														
Technicians															
Sales Workers Administrative Support Workers															
Craft Workers															
Operatives	-														
Laborers and Helpers Service Workers								_				-			
CURRENT 2023 REPORTING YEAR TOTAL															
PRIOR 2022 REPORTING YEAR TOTAL	2	0	1	2	0	0	0	0	0	0	0	0	0	0	5
	5	SECTIO	ON I –					PERIO	D						
SECTION J No Comments Provided	– HEA	DQUAI	RTERS					VEL CO	OMME	NTS (op	tional)				
No comments i towded															

U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	tandard F Revised ontrol Nu ation Dat	08/2023 mber: 30	46-0049
				TION A STABLI							1				
		SECT	TION	B – EMP	LOYE	R IDEN	TIFIC	ATION							
OFS COMPANY ID L310936							EMPI	LOYER N		IC.					
ADDRESS							С	ITY/TOV	VN			STATE		ZIP CC	DDE
210 HUDSON STREET, HAR	BORSI	DE III,	STE 4	00			JEI	RSEY	YTI			NJ		073 [,]	11
SECTION C – HI	EADQU	ARTE	RS OR	ESTAB	BLISHN	MENT-I	LEVEL	IDENT	IFICA	ΓΙΟΝ (i	f applica	able)			-
HQ/ESTABLISHMENT-LEVEL UNIT ID MB11582					HEAD(QUARTE		STABLIS SIDEN			NAME				
HEADQUARTERS OR ESTABLISHME	INT LEX		DESS			VE		ITY/TOV		0.		STATE		ZIP CC	
900 Avenue at Pc			JKE55					EHAW				NJ		0708	
	SECTI	ON D -	EMP	LOYER	IDEN' 223305		TION	NUMBE	CR (EIN)					
X YES (Employer Is Eligible				• EMPL							NGER	IN RUS	INESS		
				L CONT							ULK	III DOD			
JEX DEX				ntity ID (n appne	abic)					
YES (Single-Establishm	ent Emp	oloyer is	Federa	l Contra	ctor)	YES (Multi-Es	stablishn	nent Em	ployer is	Federa	l Contra	ctor)		
YES (H	Ieadqua	rters is 1	Federal	Contrac	tor) 🗌	YES (N	Non-Hea	dquarter	s Establ	ishment	is Feder	ral Contr	actor)		
				ne or Mo				-					,		
		S	ECTIO	DNG -1	NAICS	INFOR	MATIC	DN							
	SE			- Resid					ТА						
	SE		11-,	VOKKI	OKCL			Ethnicit							T
		anic					Not	Hispar	nic or L	atino					1
	or La	atino			N	lale				1	Fer	nale			-
						r P	F	s				r ler	5	s	
				can		an (land	an o ive	Race		icaı		an (land	an o ive	Race	Row
JOB CATEGORIES	e	ale	ite	Afri icar	an	vaii ic Is	Indi Nati	reF	ite	k or mer	an	vaii ic Is	Indi Nati	reF	Total
	Male	Female	White	ck or Afric American	Asian	Hav	an ika	ъ	White	Black or an Amer	Asian	Hav acifi	an ika	Мо	
				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	American Indian or Alaska Native	Two or More Races	
				B		Native Hawaiian or Other Pacific Islander	Am /	Ě		Af		Native Hawaiian or Other Pacific Islander	Am A	Twe	
Fundation (Operior) and Officials and Management					-		0			0	0		_	0	L
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Professionals	0	0	1	0	0	0	0	0	0	0	0	0	0	1	2
Technicians Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0 2
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1
Craft Workers Operatives	2	1 0	0	0	0	0	0	0	0	0	0	0	0	0	3
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	2	2	1	0	1	0	0	0	0	0	0	0	0	2	8
PRIOR 2022 REPORTING YEAR TOTAL	2	2	1	0	0	0	0	0	0	0	0	0	0	1	6
	5	SECTIO	DN I –	WORK 10/16/2		E SNAP 10/27/2		PERIO	D						
SECTION J No Comments Provided	- HEA	DQUAI	RTERS					VEL CO	OMME	NTS (op	tional)				

U.S. EQUAL EMPLO 2023 EMPLOYER IN													tandard F Revised ontrol Nu ation Dat	08/2023 mber: 30	46-0049
				FION A STABLI							1_				
		SECT	TION E	B – EMP	LOYE	R IDEN	TIFIC	ATION							
OFS COMPANY ID L310936							EMPI	LOYER N		IC.					
ADDRESS							С	ITY/TOW	WN			STATE		ZIP CO	DDE
210 HUDSON STREET, HAR	BORSI	DE III,	STE 4	00			JEI	RSEY (CITY			NJ		073	11
SECTION C – HI	EADQU	ARTE	RS OR									able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEADQ	-				I-LEVEL	NAME				
KL60611						VE		SIDEN		IC.				-	
HEADQUARTERS OR ESTABLISHME 33 Hudson S		/EL ADI	DRESS					ITY/TOW				STATE NJ		ZIP CO 073	
	SECTI	ON D -	- EMPI	LOYER	IDEN 223305		TION	NUMBE	ER (EIN	1)	•		•		
X YES (Employer Is Eligible				- EMPL							NGER	IN RUS	INFSS		
				L CONT							VGEN .	IN DUS	INESS		
SEC	TION			ntity ID (ii appiic	(able)					
YES (Single-Establishm	ent Emp		-						nent Em	ployer is	Federa	l Contra	ctor)		
	-	•													
	icauqua							-					actor)		
				ne or Mo		-			iments i	s Federa	I Contr	actor)			
	CE.			- Resid					TA						
	SE		NH-V	VORKF	ORCE			Ethnicit							1
	Hisp	anic	1					Hispar	-	atino					
	or La	atino		1	M	lale	I			1	Fer	nale	1	I	
								6						6	
				an		n o and	lo ol	ace		can		n o and	lo ol	ace	Row
JOB CATEGORIES		e	e	lfric San	<u>ح</u>	aiia Isla	ativ	eR	e	or	c	aiia Isla	ndia	e R	Total
	Male	Female	White	ck or Afric American	Asian	law cific	a Ir	Mor	White	Black or an Amer	Asian	Haw Cific	an Ir (a N	Mor	
	~	Ъе	5	Black or African American	•	ле Н Рас	nerican Indian Alaska Native	or	5	Black or African American	A	/e H Pac	nerican Indian Alaska Native	or	
				Bla		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		Afri		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
First/Mid-Level Officials and Managers	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1
Professionals	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1
Technicians Sales Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0 3
Administrative Support Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Craft Workers Operatives	4	0	0	1 0	0	0	0	0	0	0	0	0	0	0	5 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	4	2	0	2	0	0	0	0	1	1	0	0	0	0	10
PRIOR 2022 REPORTING YEAR TOTAL	6	2	1	1	0	0	0	0	1	0	0	0	0	0	11
	2	SECTIO	JNI-	WORK 10/16/2		E SNAP 10/27/2(PERIO	D						
SECTION J No Comments Provided	– HEAI	DQUAI	RTERS					VEL CO	OMME	NTS (op	tional)				

U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	tandard F Revised ontrol Nu ation Dat	08/2023 mber: 30	46-0049
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		SECT		-	-	R IDEN	-	ATION							
OFS COMPANY ID		5201			2012			OYER N	IAME						
L310936						VEI	RIS RE	SIDEN	TIAL IN	IC.					
ADDRESS							С	ITY/TOV	VN			STATE		ZIP CC	DDE
210 HUDSON STREET, HAR	BORSI	DE III,	STE 4	00			JEF	RSEY C	ITY			NJ		073	11
SECTION C – HI	EADQU	ARTE	RS OR	ESTAF	BLISH	MENT-I	LEVEL	IDENT	IFICA	FION (i	f applica	able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEAD	QUARTE					NAME				
NR19300						VEI		SIDEN		IC.					
HEADQUARTERS OR ESTABLISHME		EL ADI	ORESS					ITY/TOV				STATE		ZIP CC	
40 East Pier								BOSTO				MA		021:	28
					223305				-)					
X YES (Employer Is Eligible						FILING							DIEGG		
				•							NGER	IN BUS	INE 55		
SEC	CTION					ror de Not App			if applic	able)					
YES (Single-Establishm	ent Emr	-	-						nent Em	nlover is	Federa	1 Contra	ctor)		
	-	-													
YES (H	leadqua							-					actor)		
						n-Headqu			iments i	s Federa	l Contra	actor)			
		5	31311	- Resid	ential F	Property	/ Manag	gers							
	SE	CTION	N H – V	VORKF	ORCE	DEMO									r
	Llien	anic	1					thnicit Hispar		atino					
		atino			N	lale	NOt	nispar		atino	Fer	nale			
				_		or	P	es		_		or der	ç	es	
JOB CATEGORIES				וכמו ר		ian slan	ian	Rac		rica		ian slan	ian	Rac	Row
	е	ale	ite	Afr ical	an	wai ic Is	Ind	re	ite	ne Me	an	vai ic Is	Ind Nat	re	Total
	Male	Female	White	ck or Afric American	Asian	Hay acif	an ika	Ň	White	Black or an Amer	Asian	Hay	an ika	Мо	
				Black or African American		ive	nerican Indian Alaska Native	o		Black or African American		i ve	nerican Indian Alaska Native	o or	
				B		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races		Afr		Native Hawaiian or Other Pacific Islander	American Indian or Alaska Native	Two or More Races	
						- 0						- 0			
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers Professionals	0	0	2	0	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	1	0	0	0	0	0	2
Administrative Support Workers Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0 4
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	0	0	0	0	0	0	0	2	0	0	0	0	0	0 9
	2	Ū	-		Ŭ	Ŭ	Ŭ	Ŭ	-	Ű	U U	Ŭ	Ŭ	Ŭ	Ű
PRIOR 2022 REPORTING YEAR TOTAL	2					0 E SNAP	0 SHOT		2	1	0	0	0	0	7
	r.	SECIN				10/27/20		FERIO	U						
SECTION J No Comments Provided	– HEA	DQUAI	RTERS	S OR ES	STABL	ISHME	NT-LE	VEL CO	DMME	NTS (op	tional)				

U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	tandard F Revised ontrol Nur ration Dat	08/2023 mber: 30	46-0049
				FION A STABLI											
		SECT	TION E	B – EMP	LOYE	R IDEN	TIFIC	ATION							
OFS COMPANY ID L310936							EMPI	LOYER N		IC.					
ADDRESS							C	ITY/TOV	VN			STATE		ZIP CC	DDE
210 HUDSON STREET, HAR	BORSI	DE III,	STE 4	00			JEI	RSEY	YTI			NJ		073	11
SECTION C – HI	EADQU	ARTE	RS OR	ESTAB	LISHN	MENT-I	LEVEL	IDENT	IFICA	FION (i	fapplica	able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID MA79220					HEADQ	QUARTE		STABLI: SIDEN			NAME				
HEADQUARTERS OR ESTABLISHME	ENT-LEV	/EL ADI	DRESS					ITY/TOV				STATE		ZIP CC	DDE
25 Christopher Colu								RSEY				NJ		073	
					223305	5147			-)					
X YES (Employer Is Eligible				- EMPL							ICED	IN BUS	INFSS		
				L CONT							NGER	IN DUS	INESS		
SEC				ntity ID (n applie	able)					
YES (Single-Establishm	ent Emp	oloyer is	Federa	l Contra	ctor)	YES (Multi-E	stablishn	nent Em	ployer is	Federa	l Contra	ctor)		
YES (H	Ieadqua	rters is 1	Federal	Contrac	tor) 🗌	YES (N	lon-Hea	dquarter	s Establ	ishment	is Feder	ral Contr	actor)		
		🗌 Y	ES (O	ne or Mo	ore Nor	n-Headqu	uarters I	Establish	nments i	s Federa	l Contra	actor)			
				ONG-I - Resid											
	SE			VORKF					ТА						_
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		anic atino			M	lale	Not	Hispar	nic or L	atino	Fer	nale			-
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JOB CATEGORIES				rica In		iian slar	dian	Ra		eric:		iian slaı	dian	Rai	Row
	Male	Female	White	r Afi rica	Asian	awa fic I	n Inc	ore	White	Ame Ame	Asian	awa fic I	n Inc	ore	Total
	Ë	Fen	Ż	ck or Afric American	As	e Ha Paci	nerican Indian Alaska Native	ž	Ž	Black or an Amer	As	e Ha Paci	nerican Indian Alaska Native	ž	
				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 or Alaska Native	Two or More Races	
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Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers Professionals	1	0	1 0	0	0	0	0	0	1	0	0	0	0	0	3
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	0	1	0	0	0	0	0	1	0	1	0	0	0	3
Administrative Support Workers Craft Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0 6
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 CURRENT 2023 REPORTING YEAR TOTAL	0 5	0	0	0	0	0	0	0	0	0	0	0	0	0	0 13
CORRENT 2023 REPORTING TEAR TOTAL	D	2	2	U	U	U	U	0	3	U	1	U	0	0	13
PRIOR 2022 REPORTING YEAR TOTAL	3	1 SECTIO		0 WORK		0 F SNAP	0 SHOT	0 PFRIO	4	0	1	0	0	1	12
	L	JECIN				10/27/20		I LINIO	U						
SECTION J	- HEA	DQUAI	RTERS	S OR ES	TABL	ISHME	NT-LE	VEL CO	OMME	NTS (op	tional)				
No Comments Provided															

U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	tandard F Revised ontrol Nu ration Dat	08/2023 mber: 30	46-0049
				FION A STABLI				•			1_				
		SECT	TION I	B – EMP	LOYE	R IDEN	TIFIC	ATION							
OFS COMPANY ID L310936							EMPI	OYER N		IC.					
ADDRESS							С	ITY/TOV	VN			STATE		ZIP CO	DDE
210 HUDSON STREET, HAR								RSEY C				NJ		073	11
SECTION C - HI	EADQU	ARTE	RS OR	ESTAB	LISHN	MENT-I QUARTE	LEVEL	IDENT	'IFICA'	FION (i	f applica	able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID NQ69952					HEAD	-		STABLIS SIDEN			NAME				
HEADQUARTERS OR ESTABLISHME		/EL ADI	ORESS					ITY/TOV				STATE		ZIP CO	
87 Madison A			EMD	LOVED	IDEN	TIFICA)		NJ		076	56
					223305	5147			-)					
X YES (Employer Is Eligible				- EMPL						NO LOI	NGER	IN BUS	INESS		
		F – FE	DERA	L CONT	RACT	FOR DE	SIGNA	TION (
VES (Single Established	ant Eme		-	ntity ID (aant Em	n101101 is	Fadam	1 Contro	aton)		
YES (Single-Establishm	-	-													
	leadqua			ne or Mo				-					actor)		
		S	ECTIO	DNG-1	NAICS	INFOR	MATIO	DN		s redera	ii Collu	actory			
	SF			- Resid					ТА						
					01102			thnicit							
		anic					Not	Hispar	nic or L	atino	F				
	or La	atino			N	lale					Fer	nale			-
				_		or der	ъ	se		c		or der	5	se	
JOB CATEGORIES				icar		ian slan	nerican Indian Alaska Native	Rac		rica		ian slan	ian	Rac	Row
UCD GATEGORIES	Male	ale	White	Afr ica	Asian	wai ic Is	Ind Nat	ore	White	k ol	Asian	wai ic Is	Ind Nat	ore	Total
	Ма	Female	٩Ŋ	ck or Afric American	Asi	Ha	can ska	Ň	ЧХ	Black or an Amer	Asi	Ha	nerican Indian Alaska Native	M	
		_		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 or Alaska Native	Two or More Races	
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Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers Professionals	0	0	1 0	1 0	0	0	0	0	0	0	0	0	0	0	2
Technicians	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Sales Workers	0	1	0	0	0	0	0	0	0	0	0	0	0	0	1
Administrative Support Workers Craft Workers	0	1 0	0	0	0	0	0	0	0	0	0	0	0	0	1 2
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	2	2	1	1	0	0	0	0	0	0	0	0	0	0	6
PRIOR 2022 REPORTING YEAR TOTAL	2	1	0	1	0	0	0	0	0	0	0	0	0	0	4
			ON I –	WORK		E SNAP		PERIO							
SECTION J	-HEA	DOLIAI	RTERS			10/27/20 ISHME		VEL CO	MME	NTS (on	tional)				
No Comments Provided		Quin			1.101				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(1)	uonui)				
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210 HUDSON STREET, HAR								RSEY C				NJ		073	11
SECTION C – HI	EADQU	ARTE	RS OR	ESTAE	BLISHN	MENT-I	LEVEL	IDENT	'IFICA'	FION (i	f applica	able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEAD	QUARTE		STABLIS			NAME				
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HEADQUARTERS OR ESTABLISHME 64 Midland		EL ADI	JRESS					ITY/TOW JCKAH				STATE NY		ZIP CC 107	
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		SECTI	ON E -		223305 OYER	5147 FILING	G ELIG	BILIT	Y						
X YES (Employer Is Eligible	to File)		(Empl	oyer Is N	Not Elig	ible to F	ile) 🔲	EMPL	OYER	NO LOI	NGER	IN BUS	INESS		
SEC	CTION					OR DE			if applic	able)					
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YES (H	Ieadqua	rters is l	Federal	Contrac	tor)	YES (N	lon-Hea	dquarter	s Establ	ishment	is Feder	ral Conti	ractor)		
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JOB CATEGORIES	ø	le	e	Afric	2	/aiia	ndia lati	e R	e	or	۲	/aiia	ndia lati ⁻	e R	Total
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		ш	>	Black or African American	4	ve i Pa	nerican Indian Alaska Native	o	>	Black or African American	4	- Pa	nerican Indian Alaska Native	o	
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						20						20			
Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Technicians	1	0	0	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	1	1
Administrative Support Workers 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	2	0	1	0	0	0	0	0	0	0	0	0	0	1	4
PRIOR 2022 REPORTING YEAR TOTAL	2		1 0N I			0 E SNAP	0 SHOT		0	0	0	0	0	1	4
	r.	SECIN	0111-			10/27/20		LUIU	U						
SECTION J No Comments Provided	- HEA	DQUAI	RTERS	S OR ES	TABL	ISHME	NT-LEV	VEL CO	OMME	NTS (op	tional)				

U.S. EQUAL EMPLO 2023 EMPLOYER IN												OMB C	tandard F Revised ontrol Nu ation Dat	08/2023 mber: 304	46-0049
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		SECT	TION	B – EMP	LOYE	R IDEN	TIFIC	ATION							
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SECTION C – HI	EADQU	ARTE	RS OR	ESTAB	BLISHN	MENT-I DUARTE	LEVEL	IDENT	'IFICA'	FION (i	f applica	able)			
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HEADQUARTERS OR ESTABLISHME	NTIE		DESS		-	VLI		ITY/TOV		10.		STATE		ZIP CC	DE
185 Hudson Stree			NL35					RSEY C				NJ		0730	
					223305	5147			-)					
X YES (Employer Is Eligible				• EMPL over Is N						NO LOI	NGER	IN BUS	INESS		
				L CONI	-						(olin				
				tity ID (n uppne	uore)					
YES (Single-Establishm	ent Emp	oloyer is	Federa	l Contra	ctor)	YES (1	Multi-Es	stablishn	nent Em	ployer is	Federa	l Contra	ctor)		
YES (F	Ieadqua	rters is l	Federal	Contrac	tor) 🔲	YES (N	lon-Hea	dquarter	s Establ	ishment	is Feder	ral Contr	actor)		
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Executive/Senior Level Officials and Managers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
First/Mid-Level Officials and Managers	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1
Professionals 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 Craft Workers	0	1 0	0	0	0	0	0	0	0	0	0	0	0	0	1
Operatives	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2023 REPORTING YEAR TOTAL	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0
PRIOR 2022 REPORTING YEAR TOTAL	0	1	0	0	1	0	0	0	0	0	0	0	0	0	2
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	L	JECIN	5111-			10/27/20		I EKIO	U						
SECTION J	– HEA	DQUAI	RTERS	S OR ES	TABL	ISHME	NT-LE	VEL CO	OMME	NTS (op	tional)				
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ADDRESS								ITY/TOW				STATE		ZIP CC	DDE
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SECTION C – H HO/ESTABLISHMENT-LEVEL UNIT ID	EADQU	ARTE	RS OR							<mark>ΓΙΟΝ</mark> (i Γ-LEVEL		able)			
KL72150						-		SIDEN							
HEADQUARTERS OR ESTABLISHM			DRESS					ITY/TOW				STATE		ZIP CC	
17 Avenue at Po								TNEW				NJ		0709	93
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X YES (Employer Is Eligible				- EMPL	-						NCFD	IN RUS	INESS		
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YES (Single-Establishm	ient Emp	oloyer is	Federa	l Contra	ctor)	YES (Multi-Es	stablishn	nent Em	ployer is	s Federa	al Contra	ictor)		
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JOB CATEGORIES	Male	Female	White	lack or Afric American	Asian	tive Hawaiiar er Pacific Isla	nerican India Alaska Nativ	o or More Rá	White	Black or rican Amerio	Asian	tive Hawaiia er Pacific Islá	nerican India Alaska Nativ	o or More Ra	-
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	-
JOB CATEGORIES	Male	Female	White	 Black or Afric American 	o	 Native Hawaiiar Other Pacific Isla 	 American India Alaska Nativ 	o Two or More R	White	0 Black or African Americ	Asian	 Native Hawaiia Other Pacific Isla 	 American India Alaska Nativ 	o Two or More Ra	-
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers	0	0	0	0 0	0	0 0	0	0	0	0	0	0	0	0	Total 0 2
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers Professionals	0	0	0	0	0	0	0	0	0	0	0	0	0	0	Total
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers Professionals Technicians Sales Workers	0 1 0	0 0 0	0 1 0	0 0 0	0 0 0 0	0 0 0	0 0 0 0 0	0 0 1	0 0 0 0 0	0 0 0	0 0 0 0 0	0 0 0	0 0 0 0 0	0 0 0	O 2 1 0 2
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers Professionals Technicians Sales Workers Administrative Support Workers	0 1 0 0 0	0 0 0 0 2 0	0 1 0 0 0 0	0 0 0 0 0 0	0 0 0 0 0	0 0 0 0 0	0 0 0 0 0 0 0	0 0 1 0 0 0	0 0 0 0 0 0	0 0 0 0 0 0	0 0 0 0 0 0	0 0 0 0 0 0	0 0 0 0 0 0	0 0 0 0 0	O 2 1 0 2 0 0 0 0
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers Professionals Technicians Sales Workers Administrative Support Workers Craft Workers	0 1 0 0 0 0 3	0 0 0 2 0 0 0	0 1 0 0 0 0 0 0	0 0 0 0 0 0 0 0	0 0 0 0 0 0 0	0 0 0 0 0 0 0	0 0 0 0 0 0 0 0	0 0 1 0 0 0 0 0	0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0	0 0 0 0 0 0 0	0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0	0 0 0 0 0 0 0	O 2 1 0 2 0 3
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers Professionals Technicians Sales Workers Administrative Support Workers Craft Workers Operatives Laborers and Helpers	0 1 0 0 0 0 3 0 0 0	0 0 0 2 0 0 0 0 0	0 1 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	0 0 1 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0	Total 0 2 1 0 2 0 3 0 0
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers Professionals Technicians Sales Workers Administrative Support Workers Craft Workers Operatives Laborers and Helpers Service Workers	0 1 0 0 0 0 0 3 0 0 0 0 0 0	0 0 0 2 0 0 0 0 0 0 0	0 1 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 1 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	O 2 1 0 3 0 0 0 0 0 0 0
Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers Professionals Technicians Sales Workers Administrative Support Workers Craft Workers Operatives Laborers and Helpers Service Workers CURRENT 2023 REPORTING YEAR TOTAL	0 1 0 0 0 0 0 0 0 0 0 4	0 0 0 2 0 0 0 0 0 0 2	0 1 0 0 0 0 0 0 0 0 0 0 1	0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	0 0 1 0 0 0 0 0 0 0 0 0 1	0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0	O 2 1 0 2 3 0 3 0 8
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Executive/Senior Level Officials and Managers First/Mid-Level Officials and Managers Professionals Technicians Sales Workers Administrative Support Workers Craft Workers Operatives Laborers and Helpers Service Workers CURRENT 2023 REPORTING YEAR TOTAL PRIOR 2022 REPORTING YEAR TOTAL	0 1 0 0 0 0 0 0 0 4 2	0 0 2 0 0 0 0 0 2 2 1 5ECTI(0 1 0 0 0 0 0 0 0 0 1 1 0 0 N I –	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 1 0 0 0 0 0 0 0 0 0 0 1 1 1 PERIO	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0 0 0 0	O 2 1 0 2 3 0 0 3 0 8
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