U.S. EQUAL EMPLO 2022 EMPLOYER IN													tandard F Revised ontrol Nu ration Da	08/2023 mber: 30	46-0049
						E OF RI ED REP									
		SECT	FION E	3 – EMI	PLOYE	R IDEN									
OFS COMPANY ID								LOYERN							
B492427							VISA	A USA	INC						
ADDRESS							С	ITY/TO	WN			STATE		ZIP CC	DDE
900 METRO CENTER	BOUL	EVAR	C				FO	STER (	CITY			CA 94404			
SECTION C – HI	EADQU	JARTE	RS OR	ESTAF								able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEADQ	QUARTE	RS OR E	STABLI	SHMEN	Γ-LEVEL	. NAME				
HEADQUARTERS OR ESTABLISHMI	ENT-LEV	/EL ADI	ORESS				C	ITY/TOV	WN			STATE		ZIP CC	DE
					941721					D					
X YES (Employer Is Eligible						FILING				NO LO	NGER	IN BUS	INESS		
SE	CTION	F – FE	DERA	L CON	ГRACT	OR DE	SIGNA	TION	if applic	able)					
		Un	ique Er	ntity ID (	<u>(UEI)</u> :	DAJ1V9	9WMN6	6R7							
<b>YES</b> (Single-Establishm	ent Emp	oloyer is	Federa	ıl Contra	ctor) 🔀	YES (I	Multi-Es	stablishr	nent Em	ployer is	s Federa	l Contra	ctor)		
X YES (F	Headqua	rters is	Federal	Contrac	ctor) 🗖	YES (N	Jon-Hea	dauarte	rs Establ	ishment	is Fede	ral Conti	actor)		
	readqua							-					ue (01)		
		S	ECTIO	DNG-1	NAICS	-Headqu INFOR	MATIO	ON				actor)			
522320 -	Financ	cial Tra	nsactio	ons Pro	cessing	, Reser	ve, and	d Clear	inghous	se Activ	ities				
	SE		NH-V	VORKE	ORCE	DEMO									r
	Hier	anic	1				Race/E		nic or L	atino					-
		atino			Μ	lale	NOL	пэра		auno	Fer	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	14	15	92	10	24	1	1	2	52	4	6	0	0	1	222
First/Mid-Level Officials and Managers	150 601	109	624 1712	68 391	587 2399	4 15	6 14	38 108	446 1331	55 371	312 1772	3 19	1 6	21 100	2424 9386
Professionals Technicians	0	547 0	0	0	2399	0	0	0	0	1	0	0	0	0	2
Sales Workers	39	15	93	15	13	1	0	2	53	7	10	0	0	2	250
Administrative Support Workers Craft Workers	18 0	56 0	58	11	16	0	0	6 0	83	27 0	41 0	1 0	0	17	334 5
Operatives	0	0	1	0	1 0	0	0	0	1	0	0	0	0	1 0	5 0
	0		0	0	0	0	0	0	0	0	0	0	0	0	0
Laborers and Helpers	0	0	0						0	0	0			•	3
Laborers and Helpers Service Workers		0	0	0	0	0	0	0	2	U	0	0	1	0	
	0		-	0 496	0 3041	0 21	0 21	0 156	1968	465	2141	23	1 8	142	12626
Service Workers	0 0 822 721	0 742 617	0 2580 2363	496 384 WORK	3041 2572 FORCI	21 21 E SNAP	21 17 SHOT	156 128	1968 1735						12626 10856
Service Workers CURRENT 2022 REPORTING YEAR TOTAL PRIOR 2021 REPORTING YEAR TOTAL	0 0 822 721	0 742 617 SECTI	0 2580 2363 ON I –	496 384 WORK 12/17/2	3041 2572 FORCI 2022 - 1	21 21 E SNAP 12/31/20	21 17 SHOT 2 22	156 128 <b>PERIO</b>	1968 1735 D	465 340	2141 1814	23	8	142	
Service Workers CURRENT 2022 REPORTING YEAR TOTAL	0 0 822 721	0 742 617 SECTI	0 2580 2363 ON I –	496 384 WORK 12/17/2	3041 2572 FORCI 2022 - 1	21 21 E SNAP 12/31/20	21 17 SHOT 2 22	156 128 <b>PERIO</b>	1968 1735 D	465 340	2141 1814	23	8	142	

U.S. EQUAL 2022 EMPLO	OMB Co	EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 08/31/2024					
	SECTION K – OFFICIAL C	ERTIFICATION OF SUBMISSION	N 1				
	EMPLOYER	<b>IDENTIFICATION</b>					
OFS COMPANY ID B492427		EMPLOYER NAME VISA USA INC					
ADD	DRESS	CITY/TOWN	STATE	ZIP CODE			
900 METRO CEI	NTER BOULEVARD	FOSTER CITY	CA	94404			
	CERTIFICATIO	N COMMENTS (optional)					
No Certification Comments Provi	ded						
and was prep	cluding any workforce demographic pared in conformity with the direction	FION STATEMENT t data, provided in this report is correct ons set forth in the form and accompanist ort are punishable by law, US Code	nying instructions.	."			
	DATE OF	CERTIFICATION					
		12:01 PM [EST]					
Name of Devil-	EMPLOYER'S C	ERTIFYING OFFICIAL	artifying Official				
	E ANGULO		Title of Certifying Official Sr HR Analytics Manager				
	of Certifying Official		ber of Certifying Offici	ial			
	0@VISA.COM	-	365-3176				
זת	ΟΙΜΑ DV DΩΙΝΊΤ ΩΕ ΩΩΝΊΤΑ ΩΤ (ΦΩ	C) FOD FEO.1 COMDONENT 1 DEDO	PTINC				
	RIMARY POINT OF CONTACT (PO f Primary POC	C) FOR EEO-1 COMPONENT 1 REPO Title and Emp	DRTING bloyer of Primary POC				
	E ANGULO	Sr HR Ana	lytics Manager J.S.A. Inc.				
Email Addre	ess of Primary POC		umber of Primary POC				
	D@VISA.COM	-	365-3176				