U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)
2024 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
CONSOLIDATED REPORT

SECTION B – EMPLOYER IDENTIFICATION

OFS COMPANY ID	EMPLOYER NAME
6259707	ECOLAB INC

ADDRESS	CITY/TOWN	STATE	ZIP CODE
1 ECOLAB PLACE	SAINT PAUL	MN	55102

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)
410231510

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): PCUAKJCDD8G3

☐ **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
325611 - Soap and Other Detergent Manufacturing

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	1	42	4	6	0	0	1	20	2	3	0	0	0	82
First/Mid-Level Officials and Managers	243	76	2056	171	164	14	14	46	882	69	79	2	5	22	3843
Professionals	136	94	1362	142	200	4	5	34	908	96	160	1	0	26	3168
Technicians	60	13	248	54	15	1	4	5	40	14	5	0	0	3	462
Sales Workers	515	45	2655	178	78	12	18	68	265	10	11	1	2	12	3870
Administrative Support Workers	72	119	322	66	37	1	2	14	683	144	39	1	4	19	1523
Craft Workers	922	80	2603	851	126	41	28	114	213	139	7	3	0	21	5148
Operatives	275	90	411	394	58	4	9	26	104	86	9	1	0	4	1471
Laborers and Helpers	30	8	94	63	3	0	1	1	28	15	2	0	0	1	246
Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2024 REPORTING YEAR TOTAL	2256	526	9793	1923	687	77	81	309	3143	575	315	9	11	108	19813
PRIOR 2023 REPORTING YEAR TOTAL	2092	466	9497	1743	635	75	75	298	3062	543	286	11	13	99	18895

SECTION I – WORKFORCE SNAPSHOT PERIOD
12/17/2024 - 12/31/2024

SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)
Not Applicable

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SECTION K – OFFICIAL CERTIFICATION OF SUBMISSION

EMPLOYER IDENTIFICATION

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6259707	ECOLAB INC

ADDRESS	CITY/TOWN	STATE	ZIP CODE
1 ECOLAB PLACE	SAINT PAUL	MN	55102

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

6/24/2025 3:04 PM [EST]

EMPLOYER'S CERTIFYING OFFICIAL

Name of Employer's Certifying Official	Title of Certifying Official
Sandra Putman	Director, Employee Relations and Compliance
Email Address of Certifying Official	**Telephone Number of Certifying Official**
sandra.putman@ecolab.com	651-250-2511

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

Name of Primary POC	Title and Employer of Primary POC
Sandra Putman	Director, Employee Relations and Compliance Ecolab Inc
Email Address of Primary POC	**Telephone Number of Primary POC**
sandra.putman@ecolab.com	651-250-2511