

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 4043463			EMPLOYER NAME LOEWS CORPORATION												
ADDRESS 9 West 57th Street						CITY/TOWN NEW YORK				STATE NY		ZIP CODE 10019			
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) 130980810															
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): UNAVAILABLE															
☐ 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 551112 - Offices of Other Holding Companies															
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	5	3	122	3	5	0	1	2	57	1	5	0	0	0	204
First/Mid-Level Officials and Managers	277	190	1206	148	96	2	3	47	730	132	75	3	5	42	2956
Professionals	106	147	1501	153	275	4	7	66	1373	252	172	2	3	60	4121
Technicians	19	31	64	22	3	0	0	6	46	8	1	1	0	5	206
Sales Workers	8	20	65	5	2	0	0	3	71	11	2	0	1	4	192
Administrative Support Workers	139	310	218	77	26	0	0	25	842	301	63	3	8	62	2074
Craft Workers	340	38	399	159	27	5	5	10	21	13	3	0	0	0	1020
Operatives	197	113	719	194	32	4	3	13	75	85	8	0	2	1	1446
Laborers and Helpers	262	224	255	254	41	9	7	24	123	69	36	8	0	5	1317
Service Workers	1418	1619	555	845	126	6	19	72	429	1186	140	6	10	58	6489
CURRENT 2024 REPORTING YEAR TOTAL	2771	2695	5104	1860	633	30	45	268	3767	2058	505	23	29	237	20025
PRIOR 2023 REPORTING YEAR TOTAL	2484	2403	4316	1701	373	60	43	197	3143	1877	366	35	32	181	17211
SECTION I – WORKFORCE SNAPSHOT PERIOD 12/15/2024 - 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				
OFS COMPANY ID 4043463		EMPLOYER NAME LOEWS CORPORATION		
ADDRESS 9 West 57th Street		CITY/TOWN NEW YORK	STATE NY	ZIP CODE 10019
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 6/18/2025 3:12 PM [EST]				
EMPLOYER'S CERTIFYING OFFICIAL				
Name of Employer's Certifying Official Ira Altman		Title of Certifying Official VP, Human Resources		
Email Address of Certifying Official ialtman@loews.com		Telephone Number of Certifying Official 212-521-2555		
PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING				
Name of Primary POC Ira Altman		Title and Employer of Primary POC VP, Human Resources Loews Corporation		
Email Address of Primary POC ialtman@loews.com		Telephone Number of Primary POC 212-521-2555		