U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC) 2024 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1) BEOC Standard Form 100 (SF 10) Revised 08/2023 OMB Control Number: 3046-004 Expiration Date: 11/30/2026						46-0049									
				FION A CONSOI											
		SECT	FION I	3 – EMP	LOYE	R IDEN									
OFS COMPANY ID								.OYER N		~					
1027631						DAN			ORATI	ON					
ADDRESS								ITY/TOV				STATE		ZIP CO	
2200 PENNSYLVANIA								SHING				DC 20037			37
SECTION C – HI	EADQU	JARTE	RS OR									able)			
HQ/ESTABLISHMENT-LEVEL UNIT ID					HEADQ	UARTE	RS OR E	STABLI	SHMEN	I-LEVEL	NAME				
HEADQUARTERS OR ESTABLISHMI	ENT-LEV	VEL ADI	DRESS				С	ITY/TOV	WN			STATE ZIP CODE			
					591995	548)					
X YES (Employer Is Eligible				- EMPL oyer Is N						NO LOI	NGER	IN BUS	INESS		
SEC	CTION	F – FE	DERA	L CON	RACT	OR DE	SIGNA	TION (if applic	able)					
				ntity ID (
YES (Single-Establishm	ent Emp	ployer is	Federa	ıl Contra	ctor)	YES (I	Multi-Es	stablishr	nent Em	ployer is	s Federa	l Contra	ctor)		
	Ieadqua	rters is	Federal	Contrac	tor) 🗌	YES (N	Non-Hea	dquarter	rs Establ	ishment	is Feder	al Contr	ractor)		
				ne or Mo											
				$\overline{DNG-I}$					intents i	3 I cucit	u conu	actor)			
		551	112 - (Offices of	of Othe	r Holdin	g Com	panies							
	SE	ECTIO	N H – V	VORKF	ORCE										1
							Race/E		-						_
		banic atino			M	lale	Not	Hispai	nic or L	.atino	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	3	3	67	7	7	1	0	0	18	4	1	2	0	0	113
First/Mid-Level Officials and Managers Professionals	241 448	136 411	1482 2587	112 181	336 983	19 33	4 12	50 97	912 1937	61 209	265 891	12 37	2	24 96	3656 7924
Technicians	461	138	1496	186	375	22	5	56	377	58	158	5	3	17	3357
Sales Workers	78	57	752	52	81	0	4	17	496	34	83	2	1	13	1670
Administrative Support Workers Craft Workers	66 0	145 0	105 0	19 0	40 0	3	2	8 0	299 0	66 0	72 0	9 0	2 0	16 0	852 0
Operatives	482	513	1161	411	516	30	9	55	665	262	520	23	11	34	4692
Laborers and Helpers Service Workers	0	0	3	1 0	0	0	0	0	1 0	2	0	0	0	0	7
CURRENT 2024 REPORTING YEAR TOTAL	1779	1403	7653	969	2338	108	36	283	4705	696	1990	90	21	200	22271
PRIOR 2023 REPORTING YEAR TOTAL	1788	1327	7872	938	2441	79 E SNA D	40 SHOT	262	4786	668	2060	61	21	188	22531
	i	SECIE	UNI-	WORK 12/16/2		E SINAP 12/31/20		PERIO	D						
SECTION J Not Applicable	– HEA	DQUA	RTERS	5 OR ES	TABL	[SHME]	NT-LE'	VEL CO	OMME	NTS (op	tional)				

U.S. EQUAL 2024 EMPLO	F OMB Cor	EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049 Expiration Date: 11/30/2026					
	SECTION K – OFFICIAL CE	RTIFICATION OF SUBMISSION					
	EMPLOYER I	DENTIFICATION					
OFS COMPANY ID 1027631		EMPLOYER NAME DANAHER CORPORATION					
ADD	DRESS	CITY/TOWN	STATE	ZIP CODE			
2200 PENNSYLV	ANIA AVE STE 800W	WASHINGTON	DC	20037			
	CERTIFICATION	COMMENTS (optional)					
No Certification Comments Provid							
and was prep	cluding any workforce demographic a pared in conformity with the direction illfully false statements on this repo	s set forth in the form and accompany	ying instructions. ²	,			
		:48 PM [EST]					
		RTIFYING OFFICIAL					
Name of Employ	yer's Certifying Official		rtifying Official				
Patr	ricia Kim	Vice President & Chief Co	unsel, Labor & En	abor & Employment			
Email Address	s of Certifying Official	Telephone Numb	er of Certifying Officia	1			
patricia.kim	n@danaher.com	202-4	19-7602				
	RIMARY POINT OF CONTACT (POC)) FOR EEO-1 COMPONENT 1 REPOR	RTING				
	f Primary POC		oyer of Primary POC				
Pati	ricia Kim	Vice President & Chief Co	unsel, Labor & En Corporation	npioyment			
Email Addr	ess of Primary POC		nber of Primary POC				
	-	_	-				
patricia.kim	n@danaher.com	202-4	19-7602				