U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)

EEOC Standard Form 100 (SF 100) Revised 08/2023 OMB Control Number: 3046-0049

2022 EMPLOYER INFORMATION REPORT (EEO-1 COMPONENT 1)									Expiration Date: 08/31/2024						
SECTION A - TYPE OF REPORT															
SINGLE ESTABLISHMENT REPORT															
OFS COMPANY ID	SECTION B - EMPLOYER IDENTIFICATION														
CE40828	EMPLOYER NAME AXCELIS TECHNOLOGIES INC														
ADDRESS						CITY/TOWN						STATE	ZIP CODE 01915		
108 CHERRY HILL DRIVE						BEVERLY						MA		019	15
SECTION C – HEADQUARTERS OR ESTABLISHMENT-LEVEL IDENTIFICATION (if applicable) HQ/ESTABLISHMENT-LEVEL UNIT ID HEADQUARTERS OR ESTABLISHMENT-LEVEL NAME															
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HEADQUARTERS OR ESTABLISHM	MENT-LEVEL ADDRESS CITY/TOWN STATE ZIP CODE							DE							
HEADQUARTERS OR ESTABLISHIV	VIEN I -LEVEL ADDRESS					CITY/TOWN						STATE ZIP CODE		DE	
SECTION D – EMPLOYER IDENTIFICATION NUMBER (EIN) 341818596															
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 333242 - Semiconductor Machinery Manufacturing															
SECTION H - WORKFORCE DEMOGRAPHIC DATA															
	Race/Ethnicity														
	Hispanic Not Hispanic or Latino														
or Latino						Male I					Fer	Female			
						ē	_	S				- a	_	S	
				än		Native Hawaiian or Other Pacific Islander	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	Row
JOB CATEGORIES		<u>e</u>	a)	Black or African American	_	aiia	nerican Indian Alaska Native	e R	ø	or	_	aiia	nerican Indian Alaska Native	e K	Total
	Male	Female	White	or A eric	Asian	aw	n Ir a N	Nor	White	Black or an Amer	Asian	aw	n a N	Jor.	
	2	Fe	>	ck or Afric American	Ř	e H Pac	ica ask	٦٠	>	Bla	Ř	e H Pac	ica	<u>~</u>	
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Executive/Senior Level Officials and Managers	0	0	20	0	0	0	0	0	5	0	1	0	0	0	26
First/Mid-Level Officials and Managers	1	0	69	0	14	0	0	0	24	1	4	0	0	0	113
Professionals	14	6	197	11	57	0	0	5	40	0	8	0	0	1	339
Technicians Sales Workers	0	0	27 0	0	0	0	0	0	0	0	0	0	0	0	39 0
Administrative Support Workers	8	1	15	1	4	0	0	0	11	1	6	0	0	0	47
Craft Workers	1	0	2	0	1	0	0	0	0	0	0	0	0	0	4
Operatives	16	7	50	3	59	0	0	4	4	0	16	0	0	1	160
Laborers and Helpers Service Workers	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
CURRENT 2022 REPORTING YEAR TOTAL		15	380	15	142	0	0	9	85	2	37	0	0	2	728
PRIOR 2021 REPORTING YEAR TOTAL	39	7	411	12	127	1	1	8	94	2	23	0	0	0	725
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SECTION I – WORKFORCE SNAPSHOT PERIOD 10/10/2022 - 10/22/2022

SECTION J – HEADQUARTERS OR ESTABLISHMENT-LEVEL COMMENTS (optional)

Not Applicable

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SECTION K - OFFICIAL CERTIFICATION OF SUBMISSION

OFS COMPANY ID CE40828 ADDRESS ADDRESS CITY/TOWN BEWPLOYER NAME AXCELIS TECHNOLOGIES INC CITY/TOWN STATE ZIP CODE BEVERLY MA 01915

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 11/14/2023 2:06 PM [EST]

EMPLOYER'S CERTIFYING OFFICIAL							
Name of Employer's Certifying Official	Title of Certifying Official						
JENNIFER CAHILL	Mgr, HCM						
Email Address of Certifying Official	Telephone Number of Certifying Official						
JENNIFER.CAHILL@AXCELIS.COM	978-787-4488						
PRIMARY POINT OF CONTACT (POC) FOR EEO-1 COMPONENT 1 REPORTING							
Name of Primary POC	Title and Employer of Primary POC						
JENNIFER CAHILL	Mgr, HCM						
	Axcelis Technologies Inc						
Email Address of Primary POC	Telephone Number of Primary POC						
JENNIFER.CAHILL@AXCELIS.COM	978-787-4488						