

Memorandum

To: DISTRICT LABOR COMPLIANCE MANAGERS

Date: June 15, 2026

From: LINDSEY WOOLSEY

Labor Compliance Manager
Division of Construction

Subject: **2026 ANNUAL EQUAL EMPLOYMENT OPPORTUNITY REPORT: FORM FHWA 1391**

Pursuant to United States Code of Federal Regulations, Title 23, Section 230.121 and federal-aid contract requirements, contractors are required to report annually on the composition of their workforce by race, gender, and job category. Using the federal form FHWA 1391, "Federal-Aid Highway Construction Contractors Annual EEO Report," prime contractors and any lower-tier subcontractors with subcontracts in excess of \$10,000 must complete the report for work performed during the last full work week of July.

The 2026 reporting period begins **Sunday, July 19th, 2026 through Saturday, July 25th, 2026**. To facilitate timely processing contractors should be directed to submit completed reports to designated district construction staff no later than August 14, 2026. Contractors should also be informed that they are subject to a progress pay deduction for failure to submit the report or if the report they submit is unsigned, illegible, or incomplete. The applicable procedures and amounts are listed in Sections 8-209, "Deducting Payment for Failure to Submit Reports," and Section 5-103F (1c), "Deductions" of the *Construction Manual*.

Districts must forward the completed reports electronically to the Caltrans Office of Civil Rights (OCR) at the e-mail address 1391@dot.ca.gov

District/Region Responsibility

- Notify all contractors of the reporting requirement and due date.
- Review the form for completeness and accuracy including both the contractor and district construction personnel signatures.
- Return incomplete or inaccurate reports to the contractor as soon as possible.
- Submit all completed forms to OCR.

Reporting Milestones

- Reporting period is July 19, 2026 through July 25, 2026
- Reports are due to district construction no later than August 14, 2026
- Reports are due to OCR no later than August 21, 2026

Attached is the FHWA 1391 form with instructions. This is federal document and cannot be modified in any way other than entering the requested information. The form is also located on the USDOT FHWA internet site at:

<https://www.fhwa.dot.gov/eforms/> (Ctrl+Click to follow link)



Local agency reports will continue to be collected by the Division of Local Assistance and inquiries they may contact Loi.Tran@dot.ca.gov. If you have any questions regarding the reporting requirements, please contact Leah Van Dyne at (916) 879-6065 or Leah.VanDyne@dot.ca.gov

Attachments

- FHWA-1391 Form
- FHWA-1391 Instructions
- Guide: How to Process Annual EEO Report Form FHWA-1391

CALIFORNIA DEPARTMENT OF TRANSPORTATION INSTRUCTIONS FOR COMPLETING FORM FHWA-1391 FEDERAL FISCAL YEAR 2026

AUTHORITY

- Code of Federal Regulations, Title 23, Subpart A, Section 230.121
- FHWA-1273, "Required Contract Provisions Federal-Aid Contracts"
- Caltrans Standard Specifications
- Caltrans Local Assistance Procedures Manual (local public agency contracts only)

WHO IS REQUIRED TO REPORT?

- All prime contractors on FHWA-assisted construction contracts, and all related subcontractors with subcontracts of \$10,000 or more
- A separate FHWA-1391 must be completed by each prime contractor and each related subcontractor that meets the reporting threshold

REPORTING PERIOD

- Contractors must identify all employees who perform work during all or any part of the last payroll period of July 2026.
- Capture data for employees' who worked during the last payroll period in July as shown below:
 - July 19 through July 25

DUE DATES

- Caltrans contracts: FHWA-1391s are due to Caltrans' District Labor Compliance Offices by August 14, 2026
- All reports shall be submitted electronically to Office of Civil Rights 1391@dot.ca.gov no later than August 21, 2026

CONTACT

Leah Van Dyne, Caltrans, Office of Civil Rights, at (916) 879-6065, or Leah.VanDyne@dot.ca.gov

CALIFORNIA DEPARTMENT OF TRANSPORTATION

INSTRUCTIONS FOR COMPLETING FORM FHWA-1391

FEDERAL FISCAL YEAR 2026

JOB CATEGORIES LISTED IN TABLE A OF FORM FHWA-1391

The job categories shown in Table A of the FHWA-1391 can often be different than the specific job category or work classification that is printed on the certified payroll report. Use the following examples to place employees in the appropriate job classification:

Example #1: List flaggers as Laborers-Unskilled

Example #2: List operators of paint striping trucks as Truck Drivers or Equipment Operators

Example #3: List form builders and helper as Carpenters

Example #4: List form setters as Laborers-Semi-Skilled

Example #5: List survey crews as Laborers-Semi-Skilled

INSTRUCTIONS FOR FILLING OUT FIELDS

1. Mark Appropriate Block	Check only one box
2. Company Name, City, State	Enter the complete company name, city, and state in which the company is based
3. Project Number	Caltrans contracts: Enter the contract number Local public agency contracts: Enter the local public agency's contract number and the federal-aid contract number If you are a subcontractor and do not know the contract number or federal-aid project number, contact the prime contractor
4. Dollar Amount of Contract	Enter the dollar amount of the contract, including amendments
5. Project Location	Enter the county/counties and stat(s) in which the work is taking place
6. Pay Period Ending	Enter the "26" for "2026"
7. Employment Data: Table A, Table B, and Table C	Enter the number of employees, apprentices, and on-the-job trainees by race, gender, and job category Note: Totals for tables B and C for the FHWA-1391 should match. Table C must include a breakdown, by ethnicity, of all apprentices/trainees shown in table B
8. Prepared by	Signature and title of contractor's representative
9. Date	Date the form was signed
10. Reviewed by	For Caltrans/local public agency use only
11. Date	For Caltrans/local public agency use only

Note: Fields 1-9 are required to be completed by contractors. Fields 10 and 11 are required to be completed by Caltrans/local public agency staff.

FEDERAL-AID HIGHWAY CONSTRUCTION CONTRACTORS ANNUAL EEO REPORT

1. MARK APPROPRIATE BLOCK <input type="checkbox"/> Contractor <input type="checkbox"/> Subcontractor	2. COMPANY NAME, CITY, STATE:	3. PROJECT NUMBER:	4. DOLLAR AMOUNT OF CONTRACT:	5. PROJECT LOCATION: (County and State)
---	--------------------------------------	---------------------------	--------------------------------------	--

This collection of information is required by law and regulation 23 U.S.C. 140a and 23 CFR Part 230. The OMB control number for this collection is 2125-0019 expiring in March 2025.

6. WORKFORCE ON FEDERAL-AID AND CONSTRUCTION SITE(S) DURING LAST FULL PAY PERIOD ENDING IN JULY 20 (INSERT YEAR)

JOB CATEGORIES	TABLE A																TABLE B					
	TOTAL EMPLOYED		TOTAL RACIAL/ ETHNIC MINORITY		BLACK or AFRICAN AMERICAN		WHITE/HISPANIC OR LATINO		AMERICAN INDIAN OR ALASKA NATIVE		ASIAN		NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER		TWO OR MORE RACES		WHITE/NON-HISPANIC OR LATINO		APPRENTICES		ON THE JOB TRAINEES	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
OFFICIALS	0	0	0	0																		
SUPERVISORS	0	0	0	0																		
FOREMEN/WOMEN	0	0	0	0																		
CLERICAL	0	0	0	0																		
EQUIPMENT OPERATORS	0	0	0	0																		
MECHANICS	0	0	0	0																		
TRUCK DRIVERS	0	0	0	0																		
IRONWORKERS	0	0	0	0																		
CARPENTERS	0	0	0	0																		
CEMENT MASONS	0	0	0	0																		
ELECTRICIANS	0	0	0	0																		
PIPEFITTER/PLUMBERS	0	0	0	0																		
PAINTERS	0	0	0	0																		
LABORERS-SEMI SKILLED	0	0	0	0																		
LABORERS-UNSKILLED	0	0	0	0																		
TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

TABLE C (Table B data by racial status)																						
APPRENTICES	0	0	0	0																		
OJT TRAINEES	0	0	0	0																		

8. PREPARED BY: (Signature and Title of Contractors Representative) _____	9. DATE _____	10. REVIEWED BY: (Signature and Title of State Highway Official) _____	11. DATE _____
--	-----------------------------	---	------------------------------

Guide for Caltrans Districts: How to Process Annual EEO Report Form FHWA-1391 (July 20__)

FEDERAL-AID HIGHWAY CONSTRUCTION CONTRACTORS ANNUAL EEO REPORT																								
1. MARK APPROPRIATE BLOCK <input type="checkbox"/> Contractor <input type="checkbox"/> Subcontractor			2. COMPANY NAME, CITY, STATE:				3. PROJECT NUMBER:				4. DOLLAR AMOUNT OF CONTRACT:				5. PROJECT LOCATION: (County and State)									
This collection of information is required by law and regulation 23 U.S.C. 140a and 23 CFR Part 230. The OMB control number for this collection is 2125-0019 expiring in March 2025.																								
6. WORKFORCE ON FEDERAL-AID AND CONSTRUCTION SITE(S) DURING LAST FULL PAY PERIOD ENDING IN JULY 20__ (INSERT YEAR)																								
TABLE A															TABLE B									
JOB CATEGORIES	TOTAL EMPLOYED		TOTAL RACIAL/ETHNIC MINORITY		BLACK or AFRICAN AMERICAN		WHITE/HISPANIC OR LATINO		AMERICAN INDIAN OR ALASKA NATIVE		ASIAN		NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER		TWO OR MORE RACES		WHITE/NON-HISPANIC OR LATINO		APPRENTICES		ON THE JOB TRAINEES			
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
OFFICIALS	0	0	0	0																				
SUPERVISORS	0	0	0	0																				
FOREMEN/WOMEN	0	0	0	0																				
CLERICAL	0	0	0	0																				
EQUIPMENT OPERATORS	0	0	0	0																				
MECHANICS	0	0	0	0																				
TRUCK DRIVERS	0	0	0	0																				
IRONWORKERS	0	0	0	0																				
CARPENTERS	0	0	0	0																				
CEMENT MASONS	0	0	0	0																				
ELECTRICIANS	0	0	0	0																				
PIPEFITTER/PLUMBERS	0	0	0	0																				
PAINTERS	0	0	0	0																				
LABORERS-SEMI SKILLED	0	0	0	0																				
LABORERS-UNSKILLED	0	0	0	0																				
TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
TABLE C (Table B data by racial status)																								
APPRENTICES	0	0	0	0																				
OJT TRAINEES	0	0	0	0																				
8. PREPARED BY: (Signature and Title of Contractors Representative)										9. DATE					10. REVIEWED BY: (Signature and Title of State Highway Official)					11. DATE				

Form FHWA-1391 (Rev. 06-77)

PREVIOUS EDITIONS ARE OBSOLETE

Note: The 1391 cannot be altered from the FHWA-approved form (e.g.: Adding/Changing Job Categories, adding/changing races, etc.). Any alterations will not be accepted. Additionally, forms must be completed correctly and, in their entirety, to be accepted. Instructions for each field:

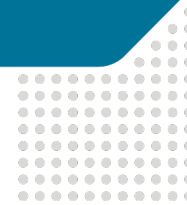
1.

1. MARK APPROPRIATE BLOCK

Contractor

Subcontractor

- One box must be checked.



2.

2. COMPANY NAME, CITY, STATE:

- The complete company name, city, and state in which the company is based must be listed.

3.

3. PROJECT NUMBER:

- The **contract number** and the **federal-aid contract number**.
 - A common area where errors occur is the omission of the federal-aid contract number. Please ensure this number is included. A helpful way to identify it is to look for a sequence of letters and numbers formatted as follows:

3. PROJECT NUMBER: PR 40A0 (082)
3. PROJECT NUMBER: ATPL 5173(037)

3. PROJECT NUMBER: 12-OR3114
3. PROJECT NUMBER: ACNH-P091(159)E

- It should not consist solely of numbers, nor should it be formatted in the following manner::

3. PROJECT NUMBER

CE-20-21-01



- If this field is completed in error, the system will display the following message:
"Please re-submit the form and ensure that the full and correct federal-aid project number is provided in Box 3."

4. **4. DOLLAR AMOUNT OF CONTRACT:**

- The dollar amount of the contract, including amendments.

5. **5. PROJECT LOCATION: (County and State)**

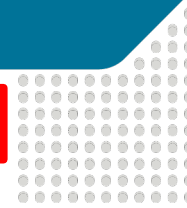
- The county/counties and state(s) in which the work is taking place.

6. **PERIOD ENDING IN JULY 20 (INSERT YEAR)**

- Fill in "FY" for the year "20XX."
 - Example: enter "26" for the year of "2026"


7. Tables A, B, and C:

- Table A (basic employment data) must be complete (blanks count as zeros) and the figures must balance, across and down



- One of the most frequent errors occurs in Tables B and C. Please pay close attention to ensure that the number of Apprentices and On-the-Job Trainees reported in Table B exactly matches the number reported in Table C, and vice versa.

8.

<p>8. PREPARED BY: (Signature and Title of Contractors Representative)</p> <p></p>

- Sign with the Name and Title of Contractor's Representative

9.

9. DATE

[Blank box for date]



- Date the form was signed by preparer.

10.

10. REVIEWED BY:
(Signature and Title of State Highway Official)

- Name and Title of State Highway Official
- A common error is leaving Box #10 unsigned, often due to the mistaken belief that it is reserved for Caltrans. If a form is submitted without a signature in Box #10, the appropriate response is: *"Please re-submit the form with Boxes #10 and 11 signed."*
- Box #10 should be signed by the Local Agency Resident Engineer or the Project Manager—whichever individual is responsible for enforcing submission of the forms. This person is accountable for verifying the accuracy of the information provided and will serve as the point of contact in the event of an audit or discrepancy.

11.



- Date the form was signed by the local agency.

12. If no work was performed, please submit the form with the notation 'No Work Performed' clearly indicated.

Example:

FEDERAL-AID HIGHWAY CONSTRUCTION CONTRACTORS ANNUAL EEO REPORT																						
1. MARK APPROPRIATE BLOCK <input type="checkbox"/> Contractor <input type="checkbox"/> Subcontractor			2. COMPANY NAME, CITY, STATE:			3. PROJECT NUMBER:			4. DOLLAR AMOUNT OF CONTRACT:			5. PROJECT LOCATION: (County and State)										
This collection of information is required by law and regulation 23 U.S.C. 140a and 23 CFR Part 230. The OMB control number for this collection is 2125-0019 expiring in March 2025.																						
6. WORKFORCE ON FEDERAL-AID AND CONSTRUCTION SITE(S) DURING LAST FULL PAY PERIOD ENDING IN JULY 20 (INSERT YEAR)																						
JOB CATEGORIES	TOTAL EMPLOYED		TOTAL RACIAL/ ETHNIC MINORITY		BLACK or AFRICAN AMERICAN		WHITE/HISPANIC OR LATINO		AMERICAN INDIAN OR ALASKA NATIVE		ASIAN		NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER		TWO OR MORE RACES		WHITE/NON-HISPANIC OR LATINO		APPRENTICES		ON THE JOB TRAINEES	
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F
	OFFICIALS	0	0	0	0																	
SUPERVISORS	0	0	0	0																		
FOREMEN/WOMEN	0	0	0	0																		
CLERICAL	0	0	0	0																		
EQUIPMENT OPERATORS	0	0	0	0																		
MECHANICS	0	0	0	0																		
TRUCK DRIVERS	0	0	0	0																		
IRONWORKERS	0	0	0	0																		
CARPENTERS	0	0	0	0																		
CEMENT MASONS	0	0	0	0																		
ELECTRICIANS	0	0	0	0																		
PIPEFITTER/PLUMBERS	0	0	0	0																		
PAINTERS	0	0	0	0																		
LABORERS-SEMI SKILLED	0	0	0	0																		
LABORERS-UNSKILLED	0	0	0	0																		
TOTAL	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TABLE C (Table B data by racial status)																						
APPRENTICES	0	0	0	0																		
OJT TRAINEES	0	0	0	0																		
8. PREPARED BY: (Signature and Title of Contractors Representative)									9. DATE			10. REVIEWED BY: (Signature and Title of State Highway Official)						11. DATE				

No work performed

13. Once the form has been completed in full and verified for accuracy, please forward it to the appropriate contact at Caltrans.

Common Errors

- Ensure the form is signed by both the Prime Contractor and the Resident Engineer (RE) or Contract Manager.
- Verify that the figures in Table B exactly match those in Table C.
- Do not modify, alter, or reformat the form in any way.
- Confirm that the date (2026) is correctly included on the form.
- Ensure the project number is accurate.