Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2014

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A This return/report is for:
- [ ] a multiemployer plan;
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions); or
- [X] a single-employer plan;
- [ ] a DFE (specify) ____

B This return/report is:
- [ ] the first return/report;
- [ ] the final return/report;
- [ ] an amended return/report;
- [ ] a short plan year return/report (less than 12 months).

C If the plan is a collectively-bargained plan, check here. . . . . ▶ [ ]

D Check box if filing under:
- [X] Form 5558;
- [ ] automatic extension;
- [ ] the DFVC program;
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
EMPLOYEES' RETIREMENT PLAN OF AMETEK, INC.

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 12/29/1942

2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan)
AMETEK, INC.

1100 CASSATT ROAD
BERWYN, PA 19312

2b Employer Identification Number (EIN)
14-1682544

2c Plan Sponsor's telephone number
610-647-2121

2d Business code (see instructions)
339900

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2015	HENRY POLICARE
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

Preparer's name (including firm name, if applicable) and address (include room or suite number) (optional)

Preparer's telephone number (optional)

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report:	**4b** EIN	
a Sponsor's name	**4c** PN	

5	Total number of participants at the beginning of the plan year	**5**	5335
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	553
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	523
b	Retired or separated participants receiving benefits	**6b**	2974
c	Other retired or separated participants entitled to future benefits	**6c**	1905
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	5402
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	506
f	Total. Add lines **6d** and **6e**.	**6f**	5908
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	
h	Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	14
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
1A 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply)

(1)	[ ]	Insurance
(2)	[ ]	Code section 412(e)(3) insurance contracts
(3)	[X]	Trust
(4)	[ ]	General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)	[ ]	Insurance
(2)	[ ]	Code section 412(e)(3) insurance contracts
(3)	[X]	Trust
(4)	[ ]	General assets of the sponsor

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

(1)	[X]	**R** (Retirement Plan Information)
(2)	[ ]	**MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
(3)	[X]	**SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

(1)	[X]		**H** (Financial Information)
(2)	[ ]		**I** (Financial Information – Small Plan)
(3)	[ ]	0	**A** (Insurance Information)
(4)	[X]		**C** (Service Provider Information)
(5)	[X]		**D** (DFE/Participating Plan Information)
(6)	[ ]		**G** (Financial Transaction Schedules)

Part III	**Form M-1 Compliance Information (to be completed by welfare benefit plans)**

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ……..... ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2014 Form M-1 annual report. If the plan was not required to file the 2014 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2014

This Form is Open to Public Inspection

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan
EMPLOYEES' RETIREMENT PLAN OF AMETEK, INC.

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
AMETEK, INC.

D Employer Identification Number (EIN)
14-1682544

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2014

2 Assets:

a Market value	**2a**	401167802
b Actuarial value	**2b**	374532238

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	2897	172799614	172799614
b For terminated vested participants	1885	58757947	58757947
c For active participants	553	49084671	50892918
d Total	5335	280642232	282450479

4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	
5 Effective interest rate	**5**	6.38%
6 Target normal cost	**6**	3761748

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE

Signature of actuary

10/12/2015
Date

MATHIEU LUSSIER, F.S.A., E.A.
Type or print name of actuary

14-04831
Most recent enrollment number

TOWERS WATSON DELAWARE, INC.
Firm name

215-246-7391
Telephone number (including area code)

CENTRE SQUARE EAST, 1500 MARKET ST.
PHILADELPHIA, PA 19102
Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	9694582	72750495
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	4002014	0
9	Amount remaining (line 7 minus line 8)	5692568	72750495
10	Interest on line 9 using prior year's actual return of 14.78%	841362	10752523
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		2837
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 6.25 %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		419
	c Total available at beginning of current plan year to add to prefunding balance		3256
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	4808894	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	1725036	83503018

Part III Funding Percentages

14	Funding target attainment percentage	14	102.42 %
15	Adjusted funding target attainment percentage	15	132.60 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	100.76 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
06/04/2014	4000	0			
01/05/2015	45500000	0			
		Totals ► 18(b)	45504000	18(c)	0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years.	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	42745712

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? [X] Yes [ ] No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [X] Yes [ ] No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
4.99 %	6.32 %	6.99 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	0
22 Weighted average retirement age	**22**	64

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	**27**	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	**28**	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	**29**	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	**30**	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6)	**31a**	3761748
b Excess assets, if applicable, but not greater than line 31a	**31b**	3761748

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	**33**	0
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	**34**	0

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	**36**	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	**37**	42745712

38 Present value of excess contributions for current year (see instructions)

a Total (excess, if any, of line 37 over line 36)	**38a**	42745712
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	**38b**	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	**39**	0
40 Unpaid minimum required contributions for all years	**40**	0

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:

a Schedule elected ☐ 2 plus 7 years ☐ 15 years

b Eligible plan year(s) for which the election in line 41a was made ☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

42 Amount of acceleration adjustment	**42**	0
43 Excess installment acceleration amount to be carried over to future plan years	**43**	0

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2014** **This Form is Open to Public Inspection.**

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan	**B** Three-digit plan number (PN) ▶
EMPLOYEES' RETIREMENT PLAN OF AMETEK, INC.	001
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
AMETEK, INC.	14-1682544

Part I Service Provider Information (see instructions)

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

BANK OF NEW YORK MELLON

13-5160382

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation

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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

FRANK M. VACCARO AND ASSOCIATES

23-2148108

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
13 50	NONE	220496	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

TOWERS WATSON DELAWARE, INC.

53-0181291

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 17 50	NONE	131271	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

THE MCKEOGH COMPANY

23-3003375

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
17 50	NONE	112002	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, $5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

ERNST AND YOUNG

34-6565596

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 50	NONE	85422	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

COVINGTON AND BURLING LLP

53-0188411

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
29 50	NONE	48248	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes [ ] No [ ]	Yes [ ] No [ ]		Yes [ ] No [ ]

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received $1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

(a) Enter service provider name as it appears on line 2	**(b)** Service Codes (see instructions)	**(c)** Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	**(e)** Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

(a) Enter name and EIN or address of service provider (see instructions)	**(b)** Nature of Service Code(s)	**(c)** Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

a	Name:	**b** EIN:
c	Position:	
d	Address:	**e** Telephone:

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2014

This Form is Open to Public Inspection.

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan
EMPLOYEES' RETIREMENT PLAN OF AMETEK, INC.

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
AMETEK, INC.

D Employer Identification Number (EIN)
14-1682544

Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)

(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: EMPLOYEES' MASTER RETIREMENT TRUST

b Name of sponsor of entity listed in (a): AMETEK, INC.

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
14-1682544-060	M	436063052

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	**d** Entity code	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN
a Plan name	
b Name of plan sponsor	**c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2014

This Form is Open to Public Inspection

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan
EMPLOYEES' RETIREMENT PLAN OF AMETEK, INC.

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
AMETEK, INC.

D Employer Identification Number (EIN)
14-1682544

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	45500000
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	401167803	436063052
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	401167803	481563052
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	401167803	481563052

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

	Income		(a) Amount	(b) Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	45504000	
	(B) Participants	2a(1)(B)		
	(C) Others (including rollovers)	2a(1)(C)		
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		45504000
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)		
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		0
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		6100427
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		51604427
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	19761413	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		19761413
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: **(1)** Professional fees	2i(1)	379658	
(2) Contract administrator fees	2i(2)	220496	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	257929	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		858083
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		20619496
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		30984931
l Transfers of assets:			
(1) To this plan	2l(1)		49410318
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [ ] Unqualified **(2)** [ ] Qualified **(3)** [X] Disclaimer **(4)** [ ] Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? [X] Yes [ ] No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: ERNST AND YOUNG **(2)** EIN: 34-6565596

d The opinion of an independent qualified public accountant is **not attached** because:

(1) [ ] This form is filed for a CCT, PSA, or MTIA. **(2)** [ ] It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	

			Yes	No	Amount
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		10000000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g	X		7935860
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i		X	
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m			
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
If "Yes," enter the amount of any plan assets that reverted to the employer this year..... ☐ **Yes** ☒ **No** **Amount:**

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)? ..... ☒ Yes ☐ No ☐ Not determined

Part V Trust Information (optional)

6a Name of trust	**6b** Trust's EIN

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2014

This Form is Open to Public Inspection.

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan
EMPLOYEES' RETIREMENT PLAN OF AMETEK, INC.

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
AMETEK, INC.

D Employer Identification Number (EIN)
14-1682544

Part I Distributions

All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 13-5160382

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3** 11

Part II Funding Information (If the plan is not subject to the minimum funding requirements of section of 412 of the Internal Revenue Code or ERISA section 302, skip this Part)

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☒ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☒ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☒ **No**

Part IV ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 a Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

d Date collective bargaining agreement expires *(If employer contributes under more than one collective bargaining agreement, check box* ☐ *and see instructions regarding required attachment. Otherwise, enter the applicable date.)* Month _____ Day _____ Year _____

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	**14a**	
b The plan year immediately preceding the current plan year	**14b**	
c The second preceding plan year	**14c**	

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. [X]

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment [ ]

19 If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:
Stock: 52.0% Investment-Grade Debt: 48.0% High-Yield Debt: 0.0% Real Estate: 0.0% Other: 0.0%

b Provide the average duration of the combined investment-grade and high-yield debt:
[ ] 0-3 years [ ] 3-6 years [ ] 6-9 years [ ] 9-12 years [ ] 12-15 years [ ] 15-18 years [ ] 18-21 years [X] 21 years or more

c What duration measure was used to calculate line 19(b)?
[X] Effective duration [ ] Macaulay duration [ ] Modified duration [ ] Other (specify):

FINANCIAL STATEMENTS

AMETEK, Inc.
Selected Defined Benefit Pension Plans
Years Ended December 31, 2014 and 2013
With Report of Independent Auditors

Ernst & Young LLP

Building a better working world

AMETEK, Inc.
Selected Defined Benefit Pension Plans
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Ernst & Young LLP
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Philadelphia, PA 19103

Tel: +1 215 448 5000
Fax: +1 215 448 5500
ey.com

Report of Independent Auditors

The Pension Investment Committee
AMETEK, Inc. Selected Defined Benefit Pension Plans

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of each of the AMETEK, Inc. Selected Defined Benefit Pension Plans, which comprise the statements of net assets available for benefits listed on pages 3 and 4, as of December 31, 2014 and 2013, and the related statements of changes in net assets available for benefits, listed on pages 5 and 6, for the years then ended, and the statements of accumulated plan benefits, listed on page 7, as of December 31, 2013, and the related statements of changes in accumulated plan benefits, listed on page 8, for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in conformity with U.S. generally accepted accounting principles; this includes the design, implementation and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free of material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audits in accordance with auditing standards generally accepted in the United States. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the certified investment information described in Note 5, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the entity that certified the investment information meets the requirements of 29 CFR 2520.103-8. The plan administrator has obtained certifications as of December 31, 2014 and 2013, and for the years ended December 31, 2014 and 2013, stating that the investment information provided to the plan administrator is complete and accurate.

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Disclaimer of Opinion on Financial Statements

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Report on Compliance of Form and Content with Department of Labor's Rules and Regulations

The form and content of the information included in the financial statements, other than that derived from the certified investment information, have been audited by us in accordance with auditing standards generally accepted in the United States and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Ernst & Young LLP

October 9, 2015

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AMETEK, Inc.
Selected Defined Benefit Pension Plans
Statements of Net Assets Available for Benefits
At December 31, 2014

	001	003	012	032	043
	Retirement (a)	U.S. Gauge Sellersville (b)	Chemical Products (Wapakoneta) (c)	Chemical Products (Nesquehoning) (d)	Aerospace - Union (e)
Assets:					
Plan interest in AMETEK, Inc. Employees' Master Retirement Trust, at fair value (Note 4)	$436,063,052	$0	$8,590,661	$6,801,325	$45,677,457
Employer contributions receivable	45,500,000	-	2,000,000	2,000,000	-
Net assets available for benefits	$481,563,052	$0	$10,590,661	$8,801,325	$45,677,457

(a) Employees' Retirement Plan of AMETEK, Inc. ("Retirement"), see Note 3.
(b) Pension Plan for Shop Employees of U.S. Gauge Division of AMETEK, Inc. ("U.S. Gauge Sellersville"), see Note 3.
(c) Chemical Products (Wapakoneta, Ohio Plant) Division of AMETEK, Inc. Hourly Employees' Pension Plan ("Chemical Products (Wapakoneta)"), see Note 3.
(d) Chemical Products (Nesquehoning, Pennsylvania Plant) Division of AMETEK, Inc. Hourly Employees' Pension Plan ("Chemical Products (Nesquehoning)"), see Note 3.
(e) AMETEK, Inc. Aerospace Division Pension Plan for Union Represented Employees ("Aerospace - Union"), see Note 3.

AMETEK, Inc.
Selected Defined Benefit Pension Plans
Statements of Net Assets Available for Benefits
At December 31, 2013

	001	003	012	032	043
	Retirement	**U.S. Gauge Sellersville**	**Chemical Products (Wapakoneta)**	**Chemical Products (Nesquehoning)**	**Aerospace - Union**
Assets:					
Plan interest in AMETEK, Inc. Employees' Master Retirement Trust, at fair value (Note 4)	$401,167,803	$52,563,815	$8,692,224	$7,047,682	$47,068,592
Employer contributions receivable	-	-	-	-	-
Net assets available for benefits	$401,167,803	$52,563,815	$8,692,224	$7,047,682	$47,068,592

AMETEK, Inc.
Selected Defined Benefit Pension Plans
Statements of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2014

	001	003	012	032	043
	Retirement	U.S. Gauge Sellersville	Chemical Products (Wapakoneta)	Chemical Products (Nesquehoning)	Aerospace - Union
Additions:					
Increase in value of plan interest in net assets of AMETEK, Inc. Employees' Master Retirement Trust	$8,334,363	$1,099,378	$180,718	$147,963	$982,427
Employer contributions	45,504,000	-	2,000,000	2,000,000	-
Total additions	53,838,363	1,099,378	2,180,718	2,147,963	982,427
Deductions:					
Retirement and death benefits paid	19,761,413	3,838,287	193,758	310,149	1,996,032
Administrative expenses	3,092,019	414,588	88,523	84,171	377,530
Total deductions	22,853,432	4,252,875	282,281	394,320	2,373,562
Net increase (decrease) in net assets prior to plan transfers	30,984,931	(3,153,497)	1,898,437	1,753,643	(1,391,135)
Plan transfers	49,410,318	(49,410,318)	-	-	-
Net increase (decrease) in net assets	80,395,249	(52,563,815)	1,898,437	1,753,643	(1,391,135)
Net assets available for benefits at beginning of year	401,167,803	52,563,815	8,692,224	7,047,682	47,068,592
Net assets available for benefits at end of year	$481,563,052	$0	$10,590,661	$8,801,325	$45,677,457

AMETEK, Inc.
Selected Defined Benefit Pension Plans
Statements of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2013

	001	003	012	032	043
	Retirement	U.S. Gauge Sellersville	Chemical Products (Wapakoneta)	Chemical Products (Nesquehoning)	Aerospace - Union
Additions:					
Increase in value of plan interest in net assets of AMETEK, Inc. Employees' Master Retirement Trust	$55,219,052	$7,319,154	$1,183,772	$964,764	$6,472,291
Employer contributions	3,000	-	-	-	-
Total additions	55,222,052	7,319,154	1,183,772	964,764	6,472,291
Deductions:					
Retirement and death benefits paid	19,076,738	3,872,438	174,440	191,424	2,059,048
Administrative expenses	3,066,708	410,049	86,060	90,323	385,702
Total deductions	22,143,446	4,282,487	260,500	281,747	2,444,750
Net increase in net assets	33,078,606	3,036,667	923,272	683,017	4,027,541
Net assets available for benefits at beginning of year	368,089,197	49,527,148	7,768,952	6,364,665	43,041,051
Net assets available for benefits at end of year	$401,167,803	$52,563,815	$8,692,224	$7,047,682	$47,068,592

AMETEK, Inc.
Selected Defined Benefit Pension Plans
Statements of Accumulated Plan Benefits
At December 31, 2013

	001	003	012	032	043
	Retirement	**U.S. Gauge Sellersville**	**Chemical Products (Wapakoneta)**	**Chemical Products (Nesquehoning)**	**Aerospace - Union**
Vested benefits:					
Participants and beneficiaries currently receiving payments	$160,268,176	$27,486,042	$1,544,339	$1,713,637	$15,985,489
Other participants	93,855,542	6,379,314	3,799,672	3,009,738	11,498,493
Total vested benefits	254,123,718	33,865,356	5,344,011	4,723,375	27,483,982
Nonvested benefits	3,492,807	765,968	379,680	246,240	2,009,037
Actuarial present value of accumulated plan benefits at end of year	$257,616,525	$34,631,324	$5,723,691	$4,969,615	$29,493,019

AMETEK, Inc.
Selected Defined Benefit Pension Plans
Statements of Changes in Accumulated Plan Benefits
For the Year Ended December 31, 2013

	001	003	012	032	043
	Retirement	**U.S. Gauge Sellersville**	**Chemical Products (Wapakoneta)**	**Chemical Products (Nesquehoning)**	**Aerospace - Union**
Additions (deductions):					
Additional benefits accumulated	$2,418,846	$0	$158,603	$174,364	$126,566
Interest due to decrease in the discount period	18,286,376	2,510,002	397,056	348,459	2,153,511
Benefits paid	(19,076,688)	(3,872,438)	(174,440)	(191,424)	(2,059,048)
Change in actuarial assumptions	13,093,222	1,706,549	292,175	222,414	601,006
Plan amendments	-	-	-	-	-
Net increase in the actuarial present value of accumulated plan benefits	14,721,756	344,113	673,394	553,813	822,035
Actuarial present value of accumulated plan benefits at beginning of year	242,894,769	34,287,211	5,050,297	4,415,802	28,670,984
Actuarial present value of accumulated plan benefits at end of year	$257,616,525	$34,631,324	$5,723,691	$4,969,615	$29,493,019

AMETEK, Inc.
Selected Defined Benefit Pension Plans
Notes to Financial Statements
December 31, 2014 and 2013

1. Summary of Significant Accounting Policies

Allocation of the Master Retirement Trust

At December 31, 2014 and 2013, the assets of the AMETEK, Inc. ("AMETEK", "Plan Sponsor" or the "Company") Pension Plans, as listed in footnote 7, (collectively, the "Plans") were held by The Bank of New York Mellon Corporation ("Trustee") as trustee of the AMETEK, Inc. Employees' Master Retirement Trust ("Trust").

Assets attributable to the individual plans participating in the Trust are equitable shares, which are based on each Plan's proportionate share of total net assets of the Trust as of the end of each month, excluding unpaid contributions. Contributions received, benefits paid and direct administrative expenses are accounted for as direct cash flows designated to the individual plans during the period. The Trustee allocates earned income, realized gains and losses and unrealized gains and losses to individual plans based on each Plan's pro rata share of the fair value of the Trust's net assets at the end of the reporting period.

Investment valuation and Income Recognition

The Plans' investments are stated at fair value. See Note 5 for further discussion and disclosures related to fair value measurements.

Portfolio managers of the Trust may enter into certain types of futures and option contracts in order to enhance liquidity or protect the total return of the Trust's portfolio from market volatility. Realized and unrealized gains and losses from these contracts are included in investment income.

Purchases and sales of securities are reflected on the trade dates. Gains and losses on sales of securities are based on the average cost of securities. Dividend income is recorded on the ex-dividend date. Income from other investments is recorded as earned.

Actuarial cost methods

The actuarial cost methods utilized by consulting actuaries are as prescribed by Employee Retirement Income Security Act of 1974 ("ERISA") and the Internal Revenue Code ("IRC"), as amended by the Pension Protection Act of 2006, and regulatory guidance from the U.S. Treasury and the Internal Revenue Service ("IRS").

Actuarial plan benefits valuation

Accumulated plan benefits represent the actuarial present value of estimated future periodic payments, including lump-sum distributions that are attributable under the Plans' provisions to services rendered by the employees to the valuation date. Accumulated plan benefits include benefits expected to be paid to (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died, and (c) present employees or their beneficiaries. Benefits payable under all circumstances—retirement, death, disability, and termination of employment—are included, to the extent they are deemed attributable to employee services rendered to the valuation date.

Administrative expenses

Administrative expenses of all Plans are paid by the Trust and are charged to the respective Plans.

Payments of benefits

Benefits are recorded when paid.

AMETEK, Inc.
Selected Defined Benefit Pension Plans
Notes to Financial Statements
December 31, 2014 and 2013

1. Summary of Significant Accounting Policies (continued)

Basis of presentation

The accompanying financial statements have been prepared on the accrual basis of accounting.

Use of estimates

The preparation of financial statements in conformity with U.S. generally accepted accounting principles ("GAAP") requires management to make estimates and assumptions that affect amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates and assumptions.

Risks and uncertainties

The Trust invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market volatility and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that those changes could materially affect the amounts reported in the statements of net assets available for benefits.

Plan contributions are made and the actuarial present value of accumulated plan benefits are reported based on certain assumptions pertaining to interest rates, inflation rates and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimation and assumption processes, it is at least reasonably possible that changes in these estimates and assumptions in the near term could materially affect the amounts reported and disclosed in the financial statements.

Subsequent Events

Management evaluated subsequent events for the Plans through October 9, 2015, the date the financial statements were issued. Based on this evaluation, no disclosures, other than those disclosed in Note 8, were required to be made to the financial statements as of December 31, 2014.

2. Recent Accounting Pronouncements

In May 2015, the Financial Accounting Standards Board ("FASB") issued Accounting Standards Update ("ASU") No. 2015-07, *Fair Value Measurement (Topic 820): Disclosures for Investments in Certain Entities that Calculate Net Asset Value per Share (or its Equivalent).* ASU 2015-07 requires entities to disclose the fair value of investments measured using the net asset value (NAV) practical expedient so that financial statement users can reconcile amounts reported in the fair value hierarchy table to amounts reported on the statement of net assets available for benefits. ASU 2015-07 is effective for interim and annual reporting periods beginning after December 15, 2015; early adoption is permitted and requires retrospective application to all periods presented. The adoption of ASU 2015-07 will not have a significant impact on the Plans' disclosures.

In July 2015, the FASB issued ASU No. 2015-12, *Plan Accounting: Defined Benefit Pension Plans (Topic 960), Defined Contribution Pension Plans (Topic 962), Health and Welfare Benefit Plans (Topic 965): (Part I) Fully Benefit-Responsive Investment Contracts, (Part II) Plan Investment Disclosures, (Part III) Measurement Date Practical Expedient.* Part I of ASU 2015-12 eliminates the requirement that employee benefit plans measure the fair value of fully benefit-responsive investment contracts and provide the related fair value disclosures. Part II of ASU 2015-12 requires plans to disaggregate their investments measured using fair value by general type, either on the face of the financial statements or in the notes. Plans are no longer required to disclose the net appreciation/ depreciation in fair value of investments by general type or individual investments equal to or greater than 5% of net assets available for benefits. ASU 2015-12 is effective for interim and annual reporting periods beginning after December 15, 2015; early adoption is permitted and requires retrospective application to all periods presented. The adoption of ASU 2015-12 will not have a significant impact on the Plans' disclosures. Parts I and III are not applicable to the Plans.

3. Description of the Plans

Contributions, benefits and eligibility

All of the Plans are noncontributory defined benefit pension plans covering employees of AMETEK who meet certain age and service requirements. For a more detailed description of the Plans participating in the Trust, the pension plan documents should be referred to for each of the Plans listed on page 3.

AMETEK's contributions, which are determined annually on an actuarial basis, along with net appreciation (depreciation) in the fair value of the investments, are designed to sufficiently fund the benefits to be paid to the Plans' participants. The contributions of AMETEK are calculated using the assumptions and methods prescribed by ERISA and the IRC, as amended by the Pension Protection Act of 2006, and applicable regulations. Generally, the minimum required contribution is the Plan's target normal cost (the value of benefits to be earned during the year) and seven-year amortization of any funding shortfall (the excess of the funding target over assets). The Plans have met the ERISA minimum funding requirements.

Although it has not expressed an intention to do so, the Company reserves the right under the Plans to discontinue its contributions at any time and to terminate the Plans subject to the provisions of ERISA. Upon termination, the net assets of the Plans will be allocated for payment to the participants in an order of priority as prescribed by ERISA and its related regulations and the plan documents.

Should the Plans terminate at some future time, their assets generally will not be available on a pro rata basis to provide participants' benefits. Whether a particular participant's accumulated plan benefits will be paid depends on both the priority of those benefits and the level of benefits guaranteed by the Pension Benefit Guaranty Corporation ("PBGC") at that time. Some benefits may be fully or partially provided for by the then-existing assets and the PBGC guarantee, while other benefits may not be provided for at all.

The actuarial present value of accumulated plan benefits under the Plans was calculated by the consulting actuaries, based on the latest available data as of December 31, 2013. The actuarial present value of accumulated plan benefits is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits earned by participants to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

Participation in the Employees' Retirement Plan of AMETEK, Inc. (the "Retirement Plan") is limited to (1) Retirement Plan employees at participating divisions who joined AMETEK prior to January 1, 1997, (2) employees at divisions that formerly participated in the AMETEK, Inc. Hourly Employees' Pension Plan, and (3) employees at the Specialty Metal Products division who joined AMETEK prior to January 1,1997. All Retirement Plan employees joining AMETEK on or subsequent to January 1, 1997 are eligible to participate in a retirement feature offered within other defined contribution plans sponsored by AMETEK.

While participation in the Retirement Plan is closed to Retirement Plan employees hired or rehired on or after January 1, 1997 as described above, hourly employees at participating divisions will participate in the Retirement Plan once they meet the former Hourly Employees' Pension Plan related eligibility requirements.

3. Description of the Plans (continued)

Significant actuarial assumptions

Assumed rate of return on investments

The assumed rate of return on investments is 7.75% at December 31, 2013 compounded annually, net of investment expenses.

Funding interest rate

Liabilities are calculated using the segment rates as prescribed in IRC Section 430(h)(2). The segment rates are equivalent to the following effective interest rates, net of investment expenses:

Plan	Effective interest rate
Retirement	6.38 %
U.S. Gauge Sellersville	6.22 %
Chemical Products (Wapakoneta)	6.52 %
Chemical Products (Nesquehoning)	6.53 %
Aerospace – Union	6.37 %

Mortality basis

At December 31, 2013, mortality is based on the RP-2014 gender-specific mortality table (with MP-2014 projected improvements after 2006 removed) projected from 2006 with Scale BB-2 dimensional and blue collar adjustment (no collar adjustment for Retirement). At December 31, 2012, mortality is based on a variation of the RP-2000 Mortality Table with separate rates for annuitants and non-annuitants. The effect of the change in mortality assumptions is recorded as a change in actuarial assumptions on the accompanying statements of changes in accumulated plan benefits for the year ended December 31, 2013.

Retirement

Retirement under the various Plans is assumed to take place based on retirement rates which generally result in assumed retirement at ages ranging from 62 to 65.

Actuarial Assumptions

These actuarial assumptions are based on the presumption that the Plans will continue. Were the Plans to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

3. Description of the Plans (continued)

Employee Retirement Benefits

Plan	Benefit	Years of Service Limitation
Retirement	*a) For Retirement Plan participants other than former Haveg Retirement Plan, Microfoam Retirement Plan, Plymouth Products, Aerospace Non-union Plan, Drexelbrook Engineering Pension Plan, Cameca Instruments Pension Plan, Lamb – Kent Pension Plan, Specialty Metal Products Pension Plan and the Hourly Pension Plan participants:* Benefits equal the sum of 102% of: one-twelfth of 32% of final average annual compensation up to covered compensation plus one-twelfth of 40% of final average annual compensation above covered compensation. Effective for retirements or terminations occurring on or after January 1, 1990, there is an additional pension benefit equal to one-twelfth of 1/2% of final average annual compensation multiplied by the projected number of years of service at age 65, in excess of 15 years (but not in excess of 25 years). Benefit calculated above is multiplied by the ratio of service at retirement or termination to service at normal retirement. Retirement benefit is reduced if credited service at normal retirement is less than 15 years.	None
	b) For participants of the former Haveg Retirement Plan (merged into the Retirement Plan on August 1, 1991): Benefit equal to the sum of 1.15% of average monthly earnings for the plan year up to "covered compensation" plus 1.35% of average monthly earnings in excess of covered compensation for each year of credited service not in excess of 35, plus 1.35% of average monthly earnings for each year of credited service in excess of 35 years.	None
	c) For participants of the former Microfoam Retirement Plan (merged into the Retirement Plan on July 1, 1992): Benefit equal to the greater of (a) 1.2% of average monthly pay multiplied by credited service, or (b) the sum of 1.08% of average monthly pay plus 0.35% of average monthly pay above "covered compensation" multiplied by credited service, not in excess of 35 years; plus 1.35% of average monthly pay for each year of credited service in excess of 35 years.	None
	d) For Covered Employees of the former Plymouth Products Division of AMETEK, Inc.: Same as section a) above, except that average annual compensation is determined by treating compensation earned with Culligan and its successors after July 31, 1997 as though it were earned with AMETEK. The amount that will be recognized is limited to 1996 compensation, increased by 5% per year, compounded annually. Credited service with Culligan and its successors after July 31, 1997 shall be included for vesting and certain benefit eligibility purposes, but not for benefit determination.	None

3. Description of the Plans (continued)

Employee Retirement Benefits (continued)

Plan	Benefit	Years of Service Limitation
Retirement	*e) For participants of the former Aerospace Non-union Plan (merged with the Retirement Plan on December 31, 1999):* Amount equal to sum of one-twelfth of (a) and (b), where (a) is equal to 32.5% of average annual compensation not in excess of covered compensation, plus 40% of average annual compensation in excess of covered compensation, with such sum multiplied where service is less than 15 years at normal retirement by ratio that years of service bears to 15 (never more than one), and (b) is equal to 0.5% of average annual compensation multiplied by years of service at normal retirement date which are in excess of 15 years, but not in excess of 25 years. Benefit calculated above is multiplied by the ratio of service at retirement or termination to service at normal retirement.	None
	f) For participants of the former Drexelbrook Engineering Pension Plan (merged with the Retirement Plan on January 1, 2005): The sum of (a) the accrued benefit determined under the prior plan up to April 30, 1989, plus (b) 0.75% of average compensation up to covered compensation plus 1.5% of average compensation in excess of social security covered compensation for each year of service from May 1, 1989 (maximum 10 years). Effective December 31, 1999, accruals for Drexelbrook participants were frozen. No further benefits will accrue but vesting will continue.	None
	g) For participants of the former CAMECA Instruments, Inc. Defined Benefit Plan (merged with the Retirement Plan on December 31, 2007): 35% of average compensation, reduced proportionately for service less than 25 years. Service prior to January 1, 1983 is excluded.	None
	h) For participants of the former Lamb – Kent Pension Plan (merged with the Retirement Plan on January 1, 2010): *For employees whose employment commencement date was prior to September 15, 1987:* $19.00 times credited service for terminations on or after September 15, 2000 *For employees whose employment commencement date is on or after September 15, 1987:* $12.00 times credited service for terminations on or after September 15, 2000	None

3. Description of the Plans (continued)

Employee Retirement Benefits (continued)

Plan	Benefit	Years of Service Limitation
	i) For participants of the former Specialty Metal Products Pension Plan (merged with the Retirement Plan on January 1, 2010): One-twelfth of the larger of (1) 1.4% of the participant's career earnings or (2) the sum of 1.28% of the participant's career average earnings up to covered compensation, plus 1.65% of the participant's career average earnings in excess of covered compensation multiplied by his years of service, up to a maximum of 35 years	35
	j) For participants of the former Hourly Pension Plan (merged with the Retirement Plan on January 1, 2010):	
	Amount per Month per Year of Credited Service: Aerospace – Binghamton: $24.00 – Service September 19, 1994 to present	30
	Electromechanical, N.C.: $11.00 – Service January 1, 2002 to present	30
	Feasterville (PMT): $10.00 – Service January 1, 1990 to present	30
	Haveg – Hourly: $25.00 – For retirements or terminations on or after May 18, 2002	None
	Lamb – Cambridge: $21.00 – Service April 1, 1997 to present	30
	Lamb – Racine: $18.00 – Service January 1, 2001 to present	30
	Largo (Mansfield and Green): $7.00 – Service through December 31, 1996 $10.00 – Service January 1, 1997 to present	30
	Microfoam – Fresno: $12.00 – Service January 1, 1993 to present	30
	Panalarm: $10.00 – Service prior to January 1, 1995 $15.00 – Service January 1, 1995 to December 31, 1997 $20.00 – Service January 1, 1998 to present	30
	P&AI: $12.00 – Service October 1, 1988 to present	30

3. Description of the Plans (continued)

Employee Retirement Benefits (continued)

Plan	Benefit	Years of Service Limitation
	Amount per Month per Year of Credited Service: U.S. Gauge – Allentown: $7.00 – Service July 1, 1989 to present	30
	U.S. Gauge – Bartow: $12.00 – Service January 1, 1997 to present	30
Aerospace – Union	Effective January 1, 1993 to present, sum of one twelfth of (a) 1.65% of compensation in each plan year up to the Breakpoint, plus 2.10% of remainder, not to exceed the Breakpoint, for each of first 34 years of credited service, plus (b) 1.65% of compensation in plan year for each year over 34 years. Compensation is limited to $48,000 for the years 1997 – 2002, $50,000 for the years 2003 – 2005, and $50,500 for 2006 and later. The Breakpoint is, generally, covered compensation. However, the Breakpoint shall not exceed $42,000 for the years 2005 – 2007, and the Breakpoint shall not exceed $41,000 for the period August 1, 2008 – December 31, 2011, and, for members of Local 201, the Breakpoint shall not exceed $41,000 for the period July 28, 2012 – December 31, 2015.	None
Chemical Products (Wapakoneta)	Amount per Month per Year of Credited Service: $40.00 Service January 15, 2004 to January 14, 2007 $41.00 Service January 15, 2007 to January 14, 2008 $42.00 Service January 15, 2008 to January 14, 2009 $43.00 Service January 15, 2009 to January 14, 2010 $44.00 Service January 15, 2010 to January 14, 2011 $45.00 Service January 15, 2011 to January 14, 2012 $46.00 Service January 15, 2012 to January 13, 2013 $48.00 Service January 14, 2013 to January 12, 2014 $50.00 Service January 13, 2014 to January 11, 2015 $52.00 Service on and after January 12, 2015	None
Chemical Products (Nesquehoning)	Amount per Month per Year of Credited Service: $21.00 Service pre – October 1, 2003 $23.00 Service October 1, 2003 to September 30, 2006 $31.00 Service October 1, 2006 to September 23, 2007 $36.00 Service September 24, 2007 to September 23, 2008 $38.00 Service September 24, 2008 to September 23, 2009 $41.00 Service September 24, 2009 to September 23, 2010 $43.00 Service September 24, 2010 to September 23, 2011 $45.00 Service September 24, 2011 to September 23, 2012 $47.00 Service September 24, 2012 to September 23, 2013 $49.00 Service September 24, 2013 to September 23, 2014 $51.00 Service September 24, 2014 to September 23, 2015 $53.00 Service on and after September 24, 2015	None
U.S. Gauge Sellersville	$26.00 times credited service for terminations on or after September 1, 2000	None

3. Description of the Plans (continued)

Early Retirement Benefits

Retirement (Retirement and Aerospace Nonunion structures)	Age 55 or over with 10 or more years of service. Benefit is reduced 6.667% per year prior to Normal Retirement Date ("NRD").
Retirement- *(Lamb – Kent)*	Age 55 or over with 15 or more years of service. Benefit is reduced 4.8% per year prior to NRD. Employees who had reached 62 but not age 65 with 15 or more years of service as of the dates shown in the table below and who retired during the period indicated in the table below were granted an unreduced early retirement pension.

Reached Age 62 but not 65 at:	Retired:
September 15, 1987	September 15, 1987 – October 1, 1987
September 15, 1991	September 15, 1991 – October 1, 1991
January 1, 1992	January 1, 1992 – January 1, 1993
November 1, 1994	November 1, 1994
December 31, 1995	January 1, 1996
December 31, 1996	January 1, 1997
September 15, 2000 – September 15, 2003	September 15, 2000 – September 15, 2003

Retirement- *(Hourly Employees)*	Age 60 or over (age 55 for Electromechanical, Feasterville, Lamb – Cambridge and Largo participants) with 10 or more years of service (15 years for Lamb – Cambridge participants). Benefit is reduced 6.667% per year prior to NRD (4.8% per year for Lamb – Cambridge participants).
Retirement- *(Specialty Metal Products)*	Age 50 or over with 10 or more years of service and sum of age plus service totals 65 or more, or sum of age plus service totals 90 or more. Benefit is reduced 4% per year prior to NRD (if age plus service totals 90 or more, benefit is unreduced at age 60 and reduced 4% per year prior to age 60).
Chemical Products (Wapakoneta)	Age 60 or over with 10 or more years of service. Benefit is reduced 6.667% per year prior to NRD.
Chemical Products (Nesquehoning)	Age 55 or over with 10 or more years of service. Benefit is reduced 6.0% per year prior to NRD.
U.S. Gauge Sellersville	Age 60 or over with 10 or more years of service. Benefit is reduced 6.667% per year prior to age 62. An employee who a) reached age 61 as of October 1, 1995 or attained age 61 before January 1, 1996 with ten years of credited service at that time and elected early retirement, or b) who reached age 61 after January 1, 1996, but before July 31, 2000, with ten years of credited service at the time he or she reached age 61 and elected early retirement, received one additional year credited to their age for early retirement eligibility purposes.

3. Description of the Plans (continued)

Early Retirement Benefits (continued)

Aerospace – Union	Age 55 or over with 5 or more years of service. Benefit is unreduced at age 60, reduced 8% per year prior to age 60. Certain participants are eligible to receive supplemental pension payments as follows: ▪ For participants who transferred their employment directly from GE or had recall rights, and who begin receiving a pension prior to age 65, an "Additional Early Retirement Supplement" is payable until Social Security Normal Retirement Age. The amount of such supplement shall be $550 per month for participants who are members of Local 201 who were active on July 1, 2012, and $450 per month for other participants, reduced for commencement prior to age 60. ▪ For participants who are members of Local 201 who have at least 20 years of Credited Service on or after August 7, 1989, and who retire on or after July 28, 2012 but before June 1, 2016, and who begin receiving their pension on or after January 1, 2013 but before June 1, 2016, a "Longevity Pension Supplement" is payable from the date pension benefits commence and continuing until the earlier of 48 monthly payments or death. The amount of the Longevity Pension Supplement is $125 per month. The "Regular Early Retirement Supplement" of $13 per month for each year of service after August 7, 1989, and the "Special Early Retirement Supplement" of $275 per month have generally been eliminated effective July 28, 2012 for participants whose benefits have not yet commenced.

Pre-Retirement Death Benefits

All Plans provide the statutory qualified pre-retirement surviving spouse annuity. In addition, the Plans listed below provide additional pre-retirement death benefits as follows:

Retirement (Retirement and Aerospace Nonunion structures)	60 times the accrued monthly pension, reduced for early commencement, for an unmarried participant who dies while entitled to an early retirement pension which has not yet commenced
Retirement (Lamb – Kent)	Present value of 60 times the accrued monthly pension at date of death
Chemical Products (Nesquehoning)	$100 per year of credited service up to a maximum of ten years
Aerospace – Union	Lump sum amount equal to the present value of employee retirement benefit for five years

3. Description of the Plans (continued)

Post-Retirement Death Benefits

Retirement (Retirement and Aerospace Nonunion structures)	$5,000
Retirement- *(Lamb – Kent)*	(A) For a pensioner receiving a Joint and Survivor annuity, $1,000. For a pensioner receiving other than a Joint and Survivor annuity, the larger of (a) 120 times the monthly pension, less the aggregate payments received prior to death, or (b) $1,000. (B) $3,000 for pensioners who have completed 15 years of credited service. This amount is in addition to any amount payable under Part (A).
Retirement- *(Hourly Employees)*	$1,000 except as follows: $2,000 for former Hunter Spring Plan and the two East Moline Plans; $3,000 for Binghamton participants; $10,500 for Haveg participants; and $5,000 for Lamb – Cambridge participants.
U.S. Gauge Sellersville	$3,000
Chemical Products (Wapakoneta)	$6,500 for employees retiring on or after January 20, 2004
Chemical Products (Nesquehoning)	The remainder of 60 times the pensioner's monthly pension less aggregate payments received prior to death
Aerospace – Union	Only for those employees who transferred their employment directly from GE, or had recall rights, or for members of Local 201 who were hired in 1991 and were active on July 28, 2012, $13,000 (if retired after May 18, 2002) will be paid upon death of the retiree.

4. Related Party Transactions

At December 31, 2014 and 2013, the Trust held an investment in AMETEK common stock. At December 31, 2014, the investment consisted of 512,565 shares having a cost of $254,102 and a market value of $26,976,296 and the Trust received $169,146 in related dividends in 2014. At December 31, 2013, the investment consisted of 550,837 shares having a cost of $273,075 and a market value of $29,012,585 and the Trust received $146,400 in related dividends in 2013. During 2014 and 2013, there were no party-in-interest transactions which are prohibited by ERISA Section 406 and for which there is no statutory or administrative exemption.

5. Investment Information

All investment information disclosed in the accompanying financial statements including plan interest in the AMETEK, Inc. Employees' Master Retirement Trust at December 31, 2014 and 2013 and change in value of plan interest in net assets of AMETEK, Inc. Employees' Master Retirement Trust for the years ended December 31, 2014 and 2013, were obtained or derived from information supplied to the plan administrator and certified as complete and accurate by the Trustee.

The following is a summary of the fair value of the net assets held by the Trust at December 31, 2014 and 2013.

	2014		2013	
	Cost	Fair Value	Cost	Fair Value
Assets				
Investments:				
Cash and temporary investments	$ 2,412,325	$ 2,412,325	$ 3,588,815	$ 3,588,815
Equity securities:				
AMETEK common stock	254,102	26,976,296	273,075	29,012,585
U.S. Small cap common stocks	23,390,698	31,586,988	20,146,545	33,224,187
U.S. Large cap common stocks (1)	49,459,892	105,312,503	45,605,135	99,136,664
Diversified common stocks – Global (2)	71,118,065	93,558,479	68,905,148	94,900,658
Total equity securities	144,222,757	257,434,266	134,929,903	256,274,094
Fixed income securities and other:				
U.S. Corporate (3)	21,812,057	23,999,295	22,117,757	22,533,408
U.S. Government	4,561,511	4,916,534	2,902,843	2,983,233
Global asset allocation * (4)	186,733,322	187,201,632	178,463,616	186,349,870
Inflation-related funds (5)	15,092,564	13,728,743	32,514,981	34,212,903
Total fixed income securities and other	228,199,454	229,846,204	235,999,197	246,079,414
Alternative investments:				
Collective trust	—	—	1,069,149	1,069,149
Inflation-related pooled investment fund	11,300,000	9,045,907	11,300,000	11,088,266
Total alternative investments	11,300,000	9,045,907	12,369,149	12,157,415
Total investments	$ 386,134,536	498,738,702	$ 386,887,064	518,099,738
Employer contributions receivable		50,000,000		—
Receivable for securities sold and other		626,073		296,495
Total assets		549,364,775		518,396,233
Liabilities				
Accounts payable for securities purchased		441,960		14,031
Net assets		$ 548,922,815		$ 518,382,202

* This asset class was invested in diversified companies in all geographical areas.
(1) The asset class includes investments in individual common stocks and common collective trusts.
(2) The asset class includes investments in common collective trusts.
(3) The asset class includes investments in mutual funds and corporate obligations.
(4) The asset class includes investments in mutual funds, partnerships and corporate obligations.
(5) The asset class includes investments in common collective trusts.

5. Investment Information (continued)

Investment managers have discretionary authority for the purchase and sale of investments based on agreements with the investment managers and subject to certain limiting provisions of ERISA.

Investment (loss) income

A summary of the investment income on investments held by the Trust for the years ended December 31, 2014 and 2013 was as follows:

	2014		2013	
	Net Appreciation (Depreciation) in Fair Value During Year	Fair Value at End of Year	Net Appreciation (Depreciation) in Fair Value During Year	Fair Value at End of Year
Investments at fair value				
Fair value as determined by quoted market price:				
Fixed income (1)	$ (2,458,998)	$ 232,258,529	$ (4,022,307)	$ 249,668,229
Equities (2)	4,536,802	257,434,266	69,198,597	256,274,094
Fair value estimated:				
Alternative investments (3)	(2,042,359)	9,045,907	(2,919,259)	12,157,415
Net appreciation at fair value	35,445	$ 498,738,702	62,257,031	$ 518,099,738
Dividends and interest on investments	10,777,900		9,154,781	
Total investment income	$ 10,813,345		$ 71,411,812	

(1) Fixed income includes cash and temporary investments, government obligations, corporate obligations, diversified mutual funds and partnership interests.
(2) Equities include preferred stocks, common stocks, common collective trusts and partnership interests.
(3) Alternative Investments include a collective trust and an inflation related pooled investment fund.

5. Investment Information (continued)

The Plans utilize a valuation hierarchy for disclosure of the inputs to the valuation used to measure fair value. This hierarchy prioritizes the inputs into three broad levels as follows. Level 1 inputs are quoted prices (unadjusted) in active markets for identical assets or liabilities. Level 2 inputs are quoted prices for similar assets and liabilities in active markets or inputs that are observable for the asset or liability, either directly or indirectly through market corroboration, for substantially the full term of the financial instrument. Level 3 inputs are unobservable inputs based on the Plans' own assumptions used to measure assets and liabilities at fair value. A financial asset or liability's classification within the hierarchy is determined based on the lowest level input that is significant to the fair value measurement.

The following is a description of the valuation methodologies used for assets at fair value. There have been no changes in the methodologies used at December 31, 2014 and 2013.

Level 1 investments are unadjusted, observable inputs from active markets. Investments such as common stocks traded on exchanges are valued at the last reported sale prices on the last business day of the year or, if not available, the last reported bid prices. Fixed income securities such as certain government and corporate obligations are primarily measured using a market approach pricing methodology, where observable prices are obtained by market transactions involving identical or comparable securities of issuers with similar credit ratings. Corporate obligations are all investment grade quality. Mutual funds are valued at quoted market prices which represent the net asset values of shares held by the Plans at year-end. Securities that use similar valuation techniques and inputs as described above are categorized as Level 1 of the fair value hierarchy.

Level 2 investments are equity funds and fixed income funds that are valued by the vendor using observable market inputs. Temporary cash investments are stated at cost, which approximates fair value. Common collective trusts are valued based on the Plan's unit of ownership and net asset value of the investment entity's pooled investments. Investments in partnership interests are valued based on estimated net asset value of the underlying investments. These level 2 investments have no unfunded commitments and no limits as to the frequency of redemptions. The level 2 investments have various redemption terms and notice periods. U.S. large cap stock investments have daily redemption without notice. Diversified common stocks – Global investments have redemption terms that range from daily to monthly with no notice period. Global asset allocation and inflation-related fund investments have monthly redemption terms with no notice period.

Alternative investments are considered level 3 investments as their values are determined by the sponsor using unobservable market data. The Plan's investment policy, developed by the Pension Investment Committee, limits the amount the Plans may invest in investments that are difficult to value. Valuation of these investments is determined by the management of the Plan Sponsor on an annual basis at the reporting date. The valuation procedures include, but are not limited to, the review of periodic due diligence materials provided by the third-party investment consultants and investment staff of the Plan Sponsor, as well as the investments' annual audited financial statements. Unobservable inputs, such as information obtained through periodic due diligence, are typically used to determine whether the net asset values, used as fair value as a practical expedient, would not be representative of fair values as of the reporting date. These investments are redeemable; however, cash reimbursement may be delayed or a portion held back until asset finalization.

5. Investment Information (continued)

A summary of the fair value of plan assets at December 31, 2014 and 2013 was as follows.

Asset Category	2014 Total	2014 Level 1	2014 Level 2	2013 Total	2013 Level 1	2013 Level 2
			(In thousands)			
Cash and temporary investments	$ 2,413	$ —	$ 2,413	$ 3,589	$ —	$ 3,589
Equity securities:						
AMETEK common stock	26,979	26,979	—	29,012	29,012	—
U.S. Small cap common stocks	31,629	31,629	—	33,229	33,229	—
U.S. Large cap common stocks (1)	105,288	67,484	37,804	99,211	65,737	33,474
Diversified common stocks – Global (2)	93,558	—	93,558	94,905	—	94,905
Fixed income securities and other:						
U.S. Corporate (3)	24,162	7,290	16,872	22,732	8,230	14,502
U.S. Government	4,917	3,840	1,077	2,984	2,058	926
Global asset allocation * (4)	187,202	111,860	75,342	186,350	112,965	73,385
Inflation-related funds (5)	13,729	—	13,729	34,213	—	34,213
Alternative investments:						
Collective trust	—	—	—	1,069	—	—
Inflation-related pooled investment fund	9,046	—	—	11,088	—	—
Total investments	$ 498,923	$ 249,082	$ 240,795	$ 518,382	$ 251,231	$ 254,994

* This asset class was invested in diversified companies in all geographical areas.

(1) The asset class includes investments in individual common stocks and common collective trusts.
(2) The asset class includes investments in common collective trusts.
(3) The asset class includes investments in mutual funds and corporate obligations.
(4) The asset class includes investments in mutual funds, partnerships and corporate obligations.
(5) The asset class includes investments in common collective trusts.

The table below sets forth a summary of changes in the fair value of the Plans' level 3 assets (in thousands):

	Alternative Investment
Balance, December 31,2012	$ 20,543
Unrealized losses relating to instruments still held at the reporting date*	(212)
Realized gains relating to instruments sold during the year	840
(Sales) Purchases	(9,014)
Balance, December 31, 2013	12,157
Unrealized losses relating to instruments still held at the reporting date*	(3,111)
Realized gains relating to instruments sold during the year	—
(Sales) Purchases	—
Balance, December 31, 2014	$ 9,046

* Reported in Increase in value of plan interest in net assets of AMETEK, Inc. Employees' Master Retirement Trust in the Statements of Changes in Net Assets Available for Benefits.

5. Investment Information (continued)

The objectives of the Plans' investment strategy are to maximize the Plans' funded status and minimize Company contributions and Plan expense. Because the goal is to optimize returns over the long term, an investment policy that favors equity holdings has been established. Since there may be periods of time where both equity and fixed-income markets provide poor returns, an allocation to alternative assets may be made to improve the overall portfolio's diversification and return potential. The Pension Investment Committee periodically reviews the Trust's asset allocation, taking into consideration plan liabilities, plan benefit payment streams and the investment strategy of the pension plans. The actual asset allocation is monitored frequently relative to the established targets and ranges and is rebalanced when necessary.

The equity portfolio is diversified by market capitalization and style. The equity portfolio also includes an international component.

The objective of the fixed-income portion of the pension assets is to provide interest rate sensitivity for a portion of the assets and to provide diversification. The fixed-income portfolio is diversified within certain quality and maturity guidelines in an attempt to minimize the adverse effects of interest rate fluctuations.

Other than investments in certain alternative investment collective trusts and pooled investments funds, certain investments are prohibited. Prohibited investments include venture capital, private placements, unregistered or restricted stock, margin trading, commodities, short selling and rights and warrants. Foreign currency futures, options and forward contracts may be used to manage foreign currency exposure.

6. Income Tax Status

The Plans have received determination letters from the IRS dated as follows:

Employees' Retirement Plan of AMETEK, Inc. (001)	August 7, 2013
Pension Plan for Shop Employees of U.S. Gauge Division of AMETEK, Inc. (003)	January 17, 2012
Chemical Products (Wapakoneta, Ohio Plant) Division of AMETEK, Inc. Hourly Employees' Pension Plan (012)	October 19, 2010
Chemical Products (Nesquehoning, Pennsylvania Plant) Division of AMETEK, Inc. Hourly Employees' Pension Plan (032)	October 19, 2010
AMETEK, Inc. Aerospace Division Pension Plan for Union Represented Employees (043)	October 19, 2010

The determination letters state that each of the Plans qualifies under Section 401(a) of the IRC and, therefore, the related trusts are exempt from taxation. Subsequent to the issuance of the determination letters, all of the Plans were amended and restated. Once qualified, the Plans are required to operate in conformity with the IRC to maintain their qualification. On January 30, 2015, the Plan Sponsor submitted applications to the IRS for new determination letters for the plans described above, except for the U.S. Gauge plan which was merged into the Retirement Plan effective December 31, 2014, as described in Note 8, in accordance with the IRC's five-year remedial amendment cycle requirement, and responses are pending. The Plan Sponsor believes the Plans are being operated in compliance with the applicable requirements of the IRC and therefore believes the Plans, as amended and restated, are qualified and the related trusts are tax-exempt.

6. Income Tax Status (continued)

Accounting principles generally accepted in the United States require plan management to evaluate uncertain tax positions taken by the Plans. The financial statement effects of a tax position are recognized when the position is more likely than not, based on the technical merits, to be sustained upon examination by the IRS. The Plan Sponsor has analyzed the tax positions taken by the Plans, and has concluded that as of December 31, 2014, there are no uncertain positions taken or expected to be taken. The Plans have recognized no interest or penalties related to uncertain tax positions. The Plans are subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan Sponsor believes it is no longer subject to IRS income tax examinations for years prior to 2012.

7. Participating Plans

The following is a list of the Plans participating in the AMETEK, Inc. Employees' Master Retirement Trust and their respective percentage interest in the Trust at December 31, 2014 and 2013:

Serial Number	Name of Plan	Percentage Interest in the Master Retirement Trust 2014	2013
001	Employees' Retirement Plan of AMETEK, Inc. (1) (2)	87.40%	77.39%
003	Pension Plan for Shop Employees of U.S. Gauge Division of AMETEK, Inc. (2)	-%	10.14%
012	Chemical Products (Wapakoneta, Ohio Plant) Division of AMETEK, Inc. Hourly Employees' Pension Plan	1.72%	1.68%
032	Chemical Products (Nesquehoning, Pennsylvania Plant) Division of AMETEK, Inc. Hourly Employees' Pension Plan	1.36%	1.36%
043	AMETEK, Inc. Aerospace Division Pension Plan for Union Represented Employees	9.16%	9.08%
046	EDAX, Inc. Pension Plan for Hourly Employees – District Lodge No. 15 (3)	0.36%	0.35%

(1) Includes hourly participants at the following current and former operations of AMETEK at December 31, 2014 and 2013:

Aerospace Binghamton	Hunter Spring	Microfoam Fresno
East Moline	Lamb – Cambridge	P&AI
Electromechanical, N.C.	Lamb – Kent	Panalarm
Feasterville (PMT)	Lamb – Racine	Specialty Metal Products
Haveg	Largo (Mansfield & Green)	U.S. Gauge Allentown
Hourly Employees'	Microelectronics	U.S. Gauge Bartow

(2) At December 31, 2014, the Pension Plan for Shop Employees of U.S. Gauge Division of AMETEK, Inc. was amended to merge the plan's net assets into the Retirement Plan.

(3) The EDAX, Inc. Pension Plan is a participating plan in the AMETEK, Inc. Employees' Master Retirement Trust. An audit is not required as it is considered a small pension plan, as defined by Form 5500.

8. Plan Amendments

In December 2013, the Chemical Products (Wapakoneta) plan was amended to increase the employee retirement benefit amount per month per year of credited service as follows: $48 for service from January 14, 2013 through January 12, 2014; $50 for service from January 13, 2014 through January 11, 2015; and $52 for service on and after January 12, 2015.

In December 2013, the Chemical Products (Nesquehoning) plan was amended to increase the employee retirement benefit amount per month per year of credited service as follows: $49 for service from September 24, 2013 through September 23, 2014; $51 for service from September 24, 2014 through September 23, 2015; and $53 for service on and after September 24, 2015.

Effective March 18, 2014, all of the Plans were amended to affirmatively state that responsibility for collecting employer contributions has been assigned to a trustee committee.

Effective December 31, 2014, the Pension Plan for Shop Employees of U.S. Gauge Division of AMETEK, Inc. was amended to merge the plan's net assets into the Retirement Plan.

Effective January 1, 2015, all benefits accrued under the Retirement Plan for all active hourly employees accruing a dollars-per-month-per-year-of-service benefit under the Hourly Plan component were spun off into a new defined benefit plan, the AMETEK, Inc. Monthly Formula Pension Plan.

As of January 1, 2015, all of the plans were amended and restated to include: (1) all amendments adopted to date, (2) required amendments to reflect the U.S. Supreme Court decision *United States v. Windsor*, and (3) for the Retirement Plan, changes necessary to reflect the plan merger and spin-off described above.

Effective August 17, 2015, the Retirement Plan was amended to document the availability of a feature in which a joint and survivor annuity can increase to a straight life annuity upon the death of the participant's spouse for participants who commenced retirement benefits under the U.S. Gauge Division at the Bartow, Florida plant between April 1, 1997 and February 28, 2007.

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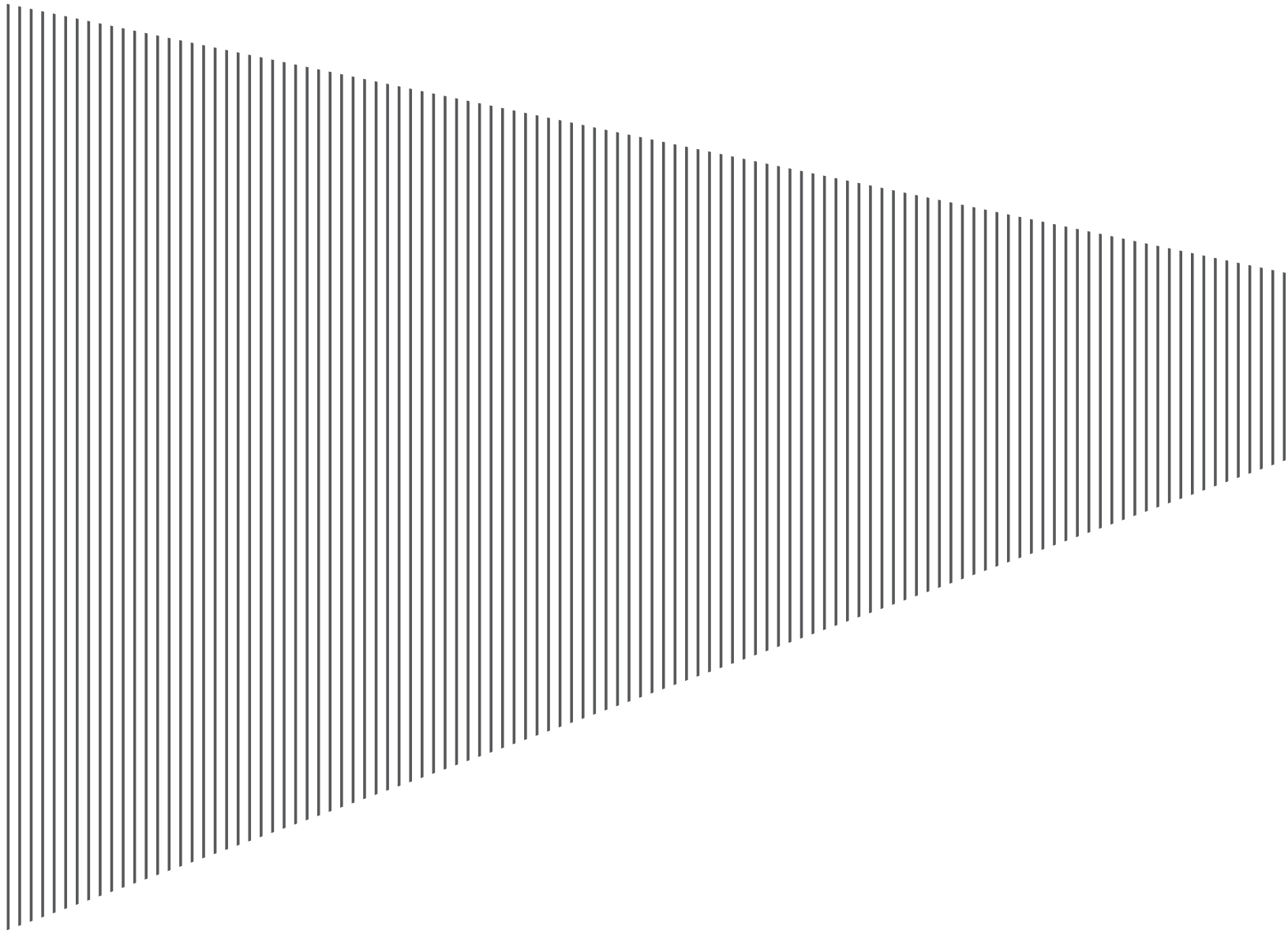


Ametek, Inc.
Employee's Retirement Plan of Ametek, Inc.
EIN: 14-1682544; Plan Number: 001
Attachment - 2014 Schedule SB
Schedule SB, line 26 - Schedule of Active Participant Data

Age Nearest Birthday		Completed Years of Service								
		Under 1	**1 to 4**	**5 to 9**	**10 to 14**	**15 to 19**	**20 to 24**	**25 to 29**	**30 to 34**	**Over 34**
15 to 24	Count	1	1	0	0	0	0	0	0	0
	Total Earnings	0	0	0	0	0	0	0	0	0
	Average Earnings	0	0	0	0	0	0	0	0	0
25 to 29	Count	1	7	1	0	0	0	0	0	0
	Total Earnings	0	0	0	0	0	0	0	0	0
	Average Earnings	0	0	0	0	0	0	0	0	0
30 to 34	Count	0	10	3	1	0	0	0	0	0
	Total Earnings	0	0	0	0	0	0	0	0	0
	Average Earnings	0	0	0	0	0	0	0	0	0
35 to 39	Count	0	7	4	1	0	0	0	0	0
	Total Earnings	0	0	0	0	0	0	0	0	0
	Average Earnings	0	0	0	0	0	0	0	0	0
40 to 44	Count	2	7	5	5	11	0	0	0	0
	Total Earnings	0	0	0	0	0	0	0	0	0
	Average Earnings	0	0	0	0	0	0	0	0	0
45 to 49	Count	1	6	5	8	17	24	15	0	0
	Total Earnings	0	0	0	0	0	3,192,423	0	0	0
	Average Earnings	0	0	0	0	0	133,018	0	0	0
50 to 54	Count	3	11	11	3	34	26	26	5	1
	Total Earnings	0	0	0	0	1,988,690	2,378,199	2,476,799	0	0
	Average Earnings	0	0	0	0	58,491	91,469	95,262	0	0
55 to 59	Count	1	7	12	4	28	27	39	13	8
	Total Earnings	0	0	0	0	1,414,632	2,276,822	3,064,363	0	0
	Average Earnings	0	0	0	0	50,523	84,327	78,573	0	0
60 to 64	Count	0	8	7	6	20	21	21	13	22
	Total Earnings	0	0	0	0	1,036,390	2,087,555	2,019,320	0	1,901,067
	Average Earnings	0	0	0	0	51,819	99,407	96,158	0	86,412
65 to 69	Count	0	1	1	4	4	5	7	3	2
	Total Earnings	0	0	0	0	0	0	0	0	0
	Average Earnings	0	0	0	0	0	0	0	0	0
Over 69	Count	0	0	1	1	0	0	1	2	1
	Total Earnings	0	0	0	0	0	0	0	0	0
	Average Earnings	0	0	0	0	0	0	0	0	0

Average Age = 53.8 Average Service = 19.6

Employees' Retirement Plan of AMETEK, Inc.

EIN: 14-1682544 PN: 001

Schedule SB, Part V – Statement of Actuarial Assumptions and Methods

Statement of actuarial assumptions and methods

Economic Assumptions

Interest rate basis:

► Applicable month	January 2014
► Interest rate basis	3-Segment Rates[1]
► HATFA applied for funding	Yes
► HATFA applied for benefit restrictions	Yes

Interest rates:	Reflecting HATFA Corridors	Not Reflecting Corridors
► First segment rate	4.99%	1.25%
► Second segment rate	6.32%	4.06%
► Third segment rate	6.99%	5.08%
► Effective interest rate (Reflecting HATFA Corridors)		6.38%

PBGC variable premium basis:

► PBGC method	Standard
► PBGC segment rates:	1.25%, 4.57%, 5.60%

Annual rates of increase

► Salaries	3.75%
► Future Social Security wage bases	3.25%

Demographic Assumptions

Inclusion date	The valuation date coincident with or next following the date on which the employee is hired.
New or rehired employees	It was assumed there will be no new or rehired employees.
Mortality	
► Healthy	Separate rates for non-annuitants (based on RP-2000 "Employees" table without collar or amount adjustments, projected to 2029 using Scale AA) and annuitants (based on RP-2000 "Healthy Annuitants" table without collar or amount adjustments, projected to 2021 using Scale AA).
► Disabled	Same as Healthy Mortality

[1] Represents the 24 month average of segment rates through December 2014

Termination

Rates varying by age and, for certain plans, by service during a select period.

- Sample rates:

During Select Period

	Years of Service				
Plan	*<2*	*3*	*6*	*9*	*>10*
Retirement Plan					
– Retirement Salaried	.200	.150	.090	N/A	N/A
– Aerospace Non-Union *	.250	.175	.100	N/A	N/A
All other plans†	N/A	N/A	N/A	N/A	N/A

* Aerospace Non-Union merged into the Retirement Plan effective December 31, 1999 but continues to use different termination rates.

† Specialty Metal, Hourly, and Lamb Kent merged into the Retirement Plan effective January 1, 2010 but continue to use different rates.

After Select Period

	Age		
Plan	*25*	*35*	*45*
Retirement Plan			
– Retirement Plan	.080	.056	.042
– Aerospace Non-Union **	.085	.064	.044
– Specialty Metal * †	.099	.049	.017
– Hourly - Lamb Racine and Process & Analytical divisions only †	.099	.049	.017
– Hourly - all divisions other than Lamb Racine and Process & Analytical †	.149	.074	.027
– Lamb Kent†	.149	.074	.027

* Rates for females are set forward five years.

** Aerospace Non-Union merged into the Retirement Plan effective December 31, 1999 but continues to use different termination rates.

† Specialty Metal, Hourly, and Lamb Kent merged into The Retirement Plan effective January 1, 2010 but continue to use different rates.

Disability — Rates varying by age and sex.

- Sample rates:

	Age/Sex					
	25		*40*		*55*	
Plan	*Male*	*Female*	*Male*	*Female*	*Male*	*Female*
Retirement Plan						
– Retirement Salaried	.00038	.00047	.00117	.00211	.00722	.00952
All other plans†	.00093	.00096	.00314	.00357	.01502	.01490

Retirement — Rates varying by age

- Sample rates:

	Age				Expected Retirement Age
Plan	*55*	*60*	*62*	*65*	
Retirement Plan					
– Retirement Salaried	.06	.08	.25	.40	62
– Specialty Metal†	.05	.04	.15	.67	63
– Lamb Kent†	.04	.04	.30	.75	62
– Hourly†	.00	.00	.00	1.00	65

† Specialty Metal, Hourly, and Lamb Kent merged into the Retirement Plan effective January 1, 2010 but continue to use different rates.

Benefit commencement date:

- Retirement benefit — Immediately upon retirement
- Deferred vested benefit — Age 65

Form of payment

Plan	Assumption
Retirement Plan (Drexelbrook & Cameca)	100% life annuity
Retirement Plan† (all other Legacy Retirement Salaried groups)	100% 5-year certain and continuous
All other plans†	100% life annuity

† Specialty Metal, Hourly, and Lamb Kent merged into the Retirement Plan effective January 1, 2010 but continue to use different rates.

Percent married	80%
Spouse age	Wife three years younger than husband
Valuation pay	Base pay for the year preceding the valuation date plus the average of the bonuses accrued for the two years preceding the valuation date, adjusted to the valuation year using the assumed salary increase rate.

Methods

Valuation date	First day of plan year
Funding target	Present value of accrued benefits The IRC §430 regulations describe the required methodology for attributing benefits among Funding Target, current year Target Normal Cost, and future years' Target Normal Costs for disability benefits, Social Security benefits, death benefits and other ancillary benefits.
Target normal cost	Present value of benefits expected to accrue during the plan year plus plan-related expenses expected to be paid from plan assets during the plan year.
Actuarial value of assets	Average of the fair market value of assets on the valuation date and the two immediately preceding valuation dates, adjusted for contributions, benefits, administrative expenses and expected earnings (with such expected earnings limited as described in IRS Notice 2009-22) . The average asset value must be within 10% of fair value, including contributions receivable. The method of computing the actuarial value of assets complies with rules governing the calculation of such values under the Pension Protection Act of 2006 (PPA). These rules produce smoothed values that reflect the underlying market value of plan assets but fluctuate less than the market value. As a result, the actuarial value of assets will be lower than the market value in some years and greater in other years. However, over the long term under PPA's smoothing rules, the method has a significant bias to produce an actuarial value of assets that is below the market value of assets.

Schedule SB, Part V – Statement of Actuarial Assumptions and Methods

Benefits not valued	Certain plans pay small benefits with a present value up to $5,000 in a single lump sum payment. Such lumps sums are not explicitly valued as such; rather such participants benefits are valued using the benefit choice assumptions described above.
Change in assumptions and methods since prior valuation	The segment interest rates used to calculate the funding target and target normal cost were updated from an applicable month of January 2013 to January 2014. The required mortality table used to calculate the funding target and target normal cost was updated to include one additional year of projected mortality improvements.

SCHEDULE SB (Form 5500)	Single-Employer Defined Benefit Plan Actuarial Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	2014 This Form is Open to Public Inspection

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of $1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan	B Three-digit plan number (PN) ▶	
EMPLOYEES' RETIREMENT PLAN OF AMETEK, INC.		001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF	**D** Employer Identification Number (EIN)	
AMETEK, Inc.	14-1682544	

E Type of plan: [X] Single [ ] Multiple-A [ ] Multiple-B

F Prior year plan size: [ ] 100 or fewer [ ] 101-500 [X] More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2014

2 Assets:

a Market value	2a	401167802
b Actuarial value	2b	374532238

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	2897	172799614	172799614
b For terminated vested participants	1885	58757947	58757947
c For active participants	553	49084671	50892918
d Total	5335	280642232	282450479

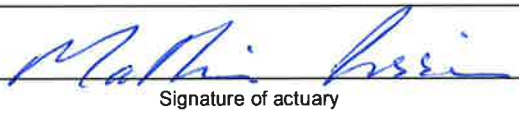
4 If the plan is in at-risk status, check the box and complete lines (a) and (b) [ ]

a Funding target disregarding prescribed at-risk assumptions	4a	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b	
5 Effective interest rate	5	6.38%
6 Target normal cost	6	3761748

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE



Signature of actuary

10/12/2015

Date

MATHIEU LUSSIER, F.S.A., E.A.

Type or print name of actuary

1404831

Most recent enrollment number

TOWERS WATSON DELAWARE, INC.

Firm name

215-246-7391

Telephone number (including area code)

CENTRE SQUARE EAST, 1500 MARKET ST.

PHILADELPHIA PA 19102

Address of the firm

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions [ ]

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	9694582	72750495
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	4002014	0
9	Amount remaining (line 7 minus line 8)	5692568	72750495
10	Interest on line 9 using prior year's actual return of 14.78%	841362	10752523
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		2837
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 6.25%		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		419
	c Total available at beginning of current plan year to add to prefunding balance		3256
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	4808894	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	1725036	83503018

Part III Funding Percentages

14	Funding target attainment percentage	14	102.42%
15	Adjusted funding target attainment percentage	15	132.60%
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	100.76%
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage.	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
06/04/2014	4000	0			
01/05/2015	45500000	0			
			Totals ▶ 18(b)	45504000	18(c) 0

19	Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:		
	a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
	b Contributions made to avoid restrictions adjusted to valuation date	19b	0
	c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	42745712

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? [X] Yes [ ] No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? [X] Yes [ ] No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th
0	0	0	0

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:

	1st segment:	2nd segment:	3rd segment:	
a Segment rates:	4.99%	6.32%	6.99%	☐ N/A, full yield curve used

b Applicable month (enter code)	21b	0
22 Weighted average retirement age	22	64

23 Mortality table(s) (see instructions) ☐ Prescribed - combined ☒ Prescribed - separate ☐ Substitute

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment	☐ Yes	☒ No
26 Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment	☒ Yes	☐ No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment	27	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a)	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29)	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):		
a Target normal cost (line 6)	31a	3761748
b Excess assets, if applicable, but not greater than line 31a	31b	3761748

32 Amortization installments:	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment	0	0

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33	0
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33)	34	0

	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement	0	0	0

36 Additional cash requirement (line 34 minus line 35)	36	0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	42745712
38 Present value of excess contributions for current year (see instructions)		
a Total (excess, if any, of line 37 over line 36)	38a	42745712
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances	38b	0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0
40 Unpaid minimum required contributions for all years	40	0

Part IX Pension Funding Relief Under Pension Relief Act of 2010 (See Instructions)

41 If an election was made to use PRA 2010 funding relief for this plan:

a Schedule elected ☐ 2 plus 7 years ☐ 15 years

b Eligible plan year(s) for which the election in line 41a was made ☐ 2008 ☐ 2009 ☐ 2010 ☐ 2011

42 Amount of acceleration adjustment	42	0
43 Excess installment acceleration amount to be carried over to future plan years	43	0

Schedule SB - Statement by Enrolled Actuary

Plan Sponsor	AMETEK, Inc.
EIN/PN	14-1682544/001
Plan Name	Employees' Retirement Plan of AMETEK, Inc.
Valuation Date	January 1, 2014
Enrolled Actuary	Mathieu Lussier, FSA, EA
Enrollment Number	14-04831

The actuarial assumptions that are not mandated by IRC § 430 and regulations, represent the enrolled actuary's best estimate of anticipated experience under the plan, subject to the following conditions:

The actuarial valuation, on which the information in this Schedule SB is based, has been prepared in reliance upon the employee and financial data furnished by the plan administrator and the trustee. The enrolled actuary has not made a rigorous check of the accuracy of this information but has accepted it after reviewing it and concluding it is reasonable in relation to similar information furnished in previous years.

AMETEK, INC.

Employees' Retirement Plan of AMETEK, Inc.
EIN: 14-1682544
Plan Num: 001
Attachment to 2014 Schedule SB
Schedule SB, Line 22 - Description of Weighted Average Retirement Age

The average retirement age for Line 22 was calculated by creating a hypothetical life table with retirement as the only decrement, and then computing the average retirement age for the table.

	(A)	(B)	(A) * (B)
Legacy Plan	**Percentage of Active Participants as of January 1, 2014**	**Average Retirement Age**	**Weighted Average Retirement Age**
Salaried	41%	62.4	25.58
Specialty Metals	12%	63.2	7.58
Hourly	47%	65.0	30.55
Lamb Kent	0%	N/A	N/A
Combined Weighted Average Retirement Age (rounded):			64

Please reference the enclosed exhibits for calculation of each legacy plan's expected retirement age.

Employees' Retirement Plan of AMETEK, Inc.

EIN: 14-1682544 PN: 001

Schedule SB, Part V – Summary of Plan Provisions

Summary of plan provisions

Plan Provisions

Plan Name/No.	Employees Retirement Plan of AMETEK, Inc, Inc./001 - Legacy Retirement Salaried
Effective Date	December 29, 1942. Amended and restated effective January 1, 2010. Most recent amendment; December 11, 2012
Participation	Salaried employees hired prior to January 1, 1997 who do not participate in another AMETEK qualified pension plan (other than the AMETEK Savings and Investment Plan) participate on the January 1 or July 1 following attainment of age 21 and completion of one year of service. Salaried employees hired on and after January 1, 1997 are ineligible to participate in this plan. Former Drexelbrook Engineering Company Pension Plan participants are eligible to participate in this plan as of January 1, 2005. Benefit accruals under the Drexelbrook plan were frozen effective December 31, 1999. Benefits for these participants are as outlined in the former Drexelbrook Plan document. Former Cameca employees are eligible to participate in this plan as of December 31, 2007. Former participants of the Specialty Metal Products Division of AMETEK, Inc. Employees' Pension Plan, AMETEK Hourly Employees' Pension Plan, or AMETEK Lamb Kent Hourly Employees' Pension Plan are eligible to participate in this plan as of January 1, 2010 (Provisions for Legacy plans are included separately).

Definitions

Plan Year	Twelve month period ending December 31.
Vesting Service	Service from date of hire as a covered employee, including service with GE for Aerospace Non-Union participants who directly transferred from GE on August 7, 1989.
Credited Service (CS)	Service from date of hire as a covered employee. For Aerospace Non-Union participants, service prior to August 7, 1989 is excluded. For Specialty Metal participants, service prior to January 8, 1988 is excluded. For Plymouth participants, service is frozen as of August 1, 1997. For Drexelbrook participants, service is frozen as of December 31, 1999. For Cameca participants, includes past service with Cameca Instruments Inc. but disregarding years of service prior to January 1, 1983.

Employees' Retirement Plan of AMETEK, Inc.

EIN: 14-1682544 PN: 001

Schedule SB, Part V – Summary of Plan Provisions

Normal Retirement Date (NRD)	First of the month coincident with or next following attainment of age 65 with five years of participation.
Annual Plan Compensation (APC)	Total compensation (excluding awards, gifts, loans and fees) plus the bonus accrued during the year.
Average Monthly Compensation (AMC)	One-twelfth of average annual plan compensation for the highest five consecutive plan years out of the ten years preceding date of benefit determination. For Cameca participants, one-twelfth of the highest average annual earings in any five consecutive calendar years of employment.
Actuarial Equivalence	The conversion factors for optional forms of payment are determined using the UP 1984 Unisex mortality table (set back 3 years for beneficiaries), and an interest rate of 8%. The conversion factor for lump sum conversions for Drexelbrook participants is determined based on one the following, whichever produces the greater value: ▸ Prescribed 417(e)(3) (unisex) mortality table and the 417(e)(3) rate in the month prior to the distribution; ▸ UP 1984 mortality and a 5% interest rate. The conversion factor for lump sum conversions for Cameca participants is determined based on one the following, whichever produces the greater value: ▸ Prescribed 417(e)(3) (unisex) mortality table and the 417(e)(3) rate in the month prior to the distribution; ▸ UP 1984 mortality and a 6% interest rate. No pre-retirement mortality is assumed for purposes of determining lump sums payable to Cameca participants.
Career Earnings	Total earnings during last 35 years of credited service.
Career Average Earnings (CAE)	Career earnings divided by credited service, not in excess of 35 years.
Covered Compensation (CC)	Average of the Social Security wage bases during the 35-year period ending with the year employee reaches Social Security normal retirement age, rounded to the nearest $600.

Accrued Monthly Pension	For Retirement Plan participants, on any given date, the sum of (a) plus (b) times (c), but not less than (d), times 1.02: (a) 32% (32.5% for Aerospace Non-Union participants) x AMC not in excess of CC plus 40% of AMC in excess of CC, times CS at NRD (maximum of 15 years) divided by 15. (b) .5% x AMC x CS at NRD in excess of 15 years (maximum of ten years). (c) CS at such date divided by CS at NRD, maximum of 1.0. (d) $16.00 x CS at such date.
For Cameca Participants	On any given date, (a) x (b) x (c): (a) 35% x AMC (b) CS at normal retirement date divided by 25, not greater than 1 (c) CS at termination date divided by CS at normal retirement date, not greater than 1

Eligibility for Benefits

Normal Retirement	Retire on or after NRD.
Early Retirement	Retire before NRD but on or after both attaining age 55 and completing ten years of vesting service.
Disability Retirement	Retire after completing 10 years of vesting service due to a disability incurred while a covered employee which results in entitlement to a Social Security disability pension.
Temporary Supplement	Aerospace Non-Union participants who retire on or after age 60 but before age 65, and who directly transferred employment from GE.
Deferred Vested	Terminate for reasons other than death or retirement after completing 5 years of vesting service.
Preretirement Death	Die with surviving spouse while eligible for a deferred vested, early or normal retirement benefit.
Postretirement Death	Die while receiving a normal, early or disability retirement benefit (if disability occurs after age 60).

Benefits Paid Upon the Following Events

Normal Retirement	Accrued monthly pension at actual retirement date.
Early Retirement	Accrued monthly pension at early retirement date, reduced 1/15th (or 6.67%) per year for pre-NRD commencement (reduced 3% per year from age 65 to age 62 and 6.67% per year from age 62 to age 55 for Aerospace Non-Union participants).

Disability Retirement	Accrued monthly pension at date of disability, with payments commencing immediately.
Temporary Supplement	$190 per month payable from date of retirement to age 65.
Vested Termination	Accrued monthly pension at termination date, reduced 1/15th per year for pre-NRD commencement (reduced 3% per year from age 65 to age 62 and 6.67% per year from age 62 to age 55 for Aerospace Non-Union participants).
Preretirement Death	50% of accrued monthly pension as of date of death, reduced for 50% joint and survivor annuity and for payment before NRD. Lifetime payments to spouse may begin at participant's earliest retirement date.
Postretirement Death	$5,000 lump sum paid to designated beneficiary ($1,000 for Aerospace Non-Union participants who transferred from GE on August 7, 1989 and who were age 50 but not eligible to retire under the GE Plan on August 7, 1989).
Forms of Payment	Monthly pension benefits are paid to unmarried participants as a single life annuity. Married participants are entitled to actuarially reduced benefits in the form of a 50% joint and survivor annuity. If spouse dies within ten years of participant's retirement, pension increases to single life amount. Participants may elect (with spousal consent) to receive benefits in another actuarially equivalent optional form offered by the plan.

Changes in Benefits Valued Since Prior Year

There were no changes in benefits valued since the prior year except to reflect increases in the statutory limits on pay and benefits.

Employees' Retirement Plan of AMETEK, Inc.

EIN: 14-1682544 PN: 001

Schedule SB, Part V – Summary of Plan Provisions

Plan Provisions

Plan Name/No.	Employees Retirement Plan of AMETEK, Inc./001 - Legacy Specialty Metal
Effective Date	January 8, 1988. Amended and restated effective January 1, 2010. Most recent amendment; December 11, 2012
Participation	Employees at the Specialty Metal Division hired prior to January 1, 1997 participate on the January 1 or July 1 following completion of one year of service. Employees hired on and after January 1, 1997 are ineligible to participate in this plan.

Definitions

Plan Year	Twelve month period ending December 31.
Years of Service	Service from date of hire, including service under the Pfizer Annuity Plan.
Credited Service (CS)	Service from date of hire as a covered employee, or January 8, 1988 if later.
Normal Retirement Date (NRD)	First of the month coincident with or next following attainment of age 65 with five years of service
Annual Plan Compensation (APC)	Total compensation (excluding gifts, loans and fees) plus the bonus accrued during the year.
Actuarial Equivalence	The conversion factors for optional forms of payment are determined using the UP 1984 Unisex mortality table (set back 3 years for beneficiaries) and an interest rate of 8%.
Career Earnings	Total earnings during last 35 years of credited service.
Career Average Earnings (CAE)	Career earnings divided by credited service, not in excess of 35 years.
Covered Compensation (CC)	Average of the social security wage bases during the 35-year period ending with the year the participant reaches social security normal retirement age.
Accrued Monthly Pension	One-twelfth of the greater of: (a) 1.4% x CE, or (b) 1.28% x CAE up to CC plus 1.65% x CAE over CC, times credited service maximum 35 years.

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Employees' Retirement Plan of AMETEK, Inc.

EIN: 14-1682544 PN: 001

Schedule SB, Part V – Summary of Plan Provisions

Eligibility for Benefits

Normal Retirement	Retire on or after NRD.
Early Retirement	Retire before NRD but (a) on or after both attaining age 50 and completing 10 Years of Service, and sum of age and Years of Service equals 65 or more, or (b) sum of age and Years of Service equals 90 or more.
Disability Retirement	Retire after completing 5 Years of Service due to a disability incurred while a covered employee.
Deferred Vested	Terminate for reasons other than death or retirement after completing 5 Years of Service.
Preretirement Death	Die with surviving spouse while eligible for a deferred vested, early or normal retirement benefit.

Benefits Paid Upon the Following Events

Normal Retirement	Accrued monthly pension at actual retirement date.
Early Retirement	Accrued monthly pension at early retirement date, reduced 4% per year for pre-NRD commencement. If age plus Years of Service equals 90 or more, reduction is as follows:

Age at Retirement	Years of Service	Percentage	Age at Retirement	Years of Service	Percentage
64	26	100%	58	32	92%
63	27	100%	57	33	88%
62	28	100%	56	34	84%
61	29	100%	55	35	80%
60	30	100%	54	36	76%
59	31	96%	53	37	72%

Changes in Benefits Valued Since Prior Year

None.

Employees' Retirement Plan of AMETEK, Inc.

EIN: 14-1682544 PN: 001

Schedule SB, Part V – Summary of Plan Provisions

Plan Provisions

Plan Name/No.	Employees Retirement Plan of AMETEK, Inc./001 - Legacy Hourly
Effective Date	March 14, 1985. Amended and restated effective January 1, 2010. Most recent amendment December 11, 2012
Participation	Each hourly-paid employee at the following division becomes a participant on the January 1 or July 1 immediately following completion of one year of service.

Binghamton	Process & Analytical
Electromechanical	U.S. Gauge Allentown
Lamb Racine	U.S. Gauge Bartow
Largo (Mansfield & Green)	U.S. Gauge Feasterville

In addition, inactive participants at the following former divisions participate based on the date the division adopted the plan, or the date of merger: Carsonite, Orionics, Valley Foundry, Microfoam Fresno, Hunter Spring, East Moline, Microelectronics, Panalarm, and Lamb Cambridge.

Former Haveg Division Hourly Employees' Pension Plan participants will participate in this plan as of December 31, 2005.

Definitions

Plan Year	Twelve month period ending December 31.
Vesting Service	Generally, service from date of hire as a covered employee.
Accrual Service	Generally, 1/12th of a year for each month in which the covered employee completes at least one hour of service. Service prior to January 1, 1983 is excluded for participants in the Electromechanical Group.
Normal Retirement Date (NRD)	First of month coinciding with or next following attainment of age 65.

Accrued Monthly Pension	Rate times accrual service, maximum of 30 years.

Division	Rate
Binghamton	$24.00
Electromechanical Group	$11.00
Lamb Racine	$18.00
Process & Analytical	$12.00
U.S. Gauge Allentown	$7.00
U.S. Gauge Feasterville	$10.00

U.S. Gauge Bartow — $9.00 times accrual service prior to January 1, 1997; $12.00 times accrual service on and after January 1, 1997.

Largo (M&G) — $7.00 times accrual service prior to January 1, 1997; $10.00 times accrual service on and after January 1, 1997.

Haveg — $25.00 times accrual service.

Actuarial Equivalence	The conversion factors for optional forms of payment are determined using the UP 1984 Unisex mortality table (set back 3 years for beneficiaries) and an interest rate of 8%.

Eligibility for Benefits

Normal Retirement	Retire on or after NRD.
Early Retirement	Retire before NRD but on or after both attaining age 60 (age 55 for Electromechanical Group, Largo (M&G) and U.S. Gauge, Feasterville participants) and completing 10 years of vesting service.
Early Retirement Supplement	Haveg participants - Retire before eligible for Medicare benefits.
Disability Retirement	Retire after completing 10 years of vesting service due to a disability incurred while a covered employee which results in entitlement to a Social Security disability pension.
Deferred Vested	Terminate for reasons other than death or retirement after completing 5 years of vesting service.
Preretirement Death	Die with surviving spouse while eligible for a deferred vested, early or normal retirement benefit.
Postretirement Death	Die while receiving a normal, early or disability retirement benefit.

Employees' Retirement Plan of AMETEK, Inc.

EIN: 14-1682544 PN: 001

Schedule SB, Part V – Summary of Plan Provisions

Benefits Paid Upon the Following Events

Normal Retirement	Accrued monthly pension at actual retirement date.
Early Retirement	Accrued monthly pension at early retirement date, reduced 1/15th per year for pre-NRD commencement. Haveg participants reduced 1/10th per year for pre-NRD commencement, unreduced if retire before NRD but on or after age 62 with 15 years of accrual service, or age 63 with 14 years of accrual service, or age 64 with 12 years of accrual service.
Early Retirement Supplement	$60 per month for participant and eligible spouse. Supplement is payable until recipient is eligible for Medicare benefits. This supplement increased to $65.00 per month effective May 18, 2002.
Disability Retirement	Accrued monthly pension at date of disability, with payments commencing immediately.
Vested Termination	Accrued monthly pension at termination date, reduced 1/15th per year for pre-NRD commencement. Haveg participants - Benefits is actuarially reduced if commencement is on or after participant's age 62. If commencement is prior to age 62, benefit is reduced 10% per year for pre-NRD commencement.
Preretirement Death	50% of accrued monthly pension as of date of death, reduced for 50% joint and survivor annuity and for payment before NRD. Lifetime payments to spouse may begin at participant's earliest retirement date.
Postretirement Death	Lump sum paid to designated beneficiary as follows: Binghamton participants — $3,000; Hunter Spring and East Moline participants — $2,000; Haveg participants — $10,500; all others — $1,000.
Forms of Payment	Monthly pension benefits are paid to unmarried participants as a single life annuity. Married participants are entitled to actuarially reduced benefits in the form of a 50% joint and survivor annuity. Participants may elect (with spousal consent) to receive benefits in another actuarially equivalent optional form offered by the plan.

Changes in Benefits Valued Since Prior Year

None.

Employees' Retirement Plan of AMETEK, Inc.

EIN: 14-1682544 PN: 001

Schedule SB, Part V – Summary of Plan Provisions

Plan Provisions

Plan Name/No.	Employees Retirement Plan of AMETEK, Inc./001 - Legacy Lamb Kent Hourly
Effective Date	September 1, 1969. Amended and restated effective January 1, 2010. Most recent amendment December 11, 2012
Participation	Each hourly-paid employee at the Kent, Ohio location within the bargaining unit represented by the Union becomes a participant on his date of hire, or September 1, 1969 if later.

Definitions

Plan Year	Twelve month period ending December 31.
Vesting Service	Service from date of hire as a covered employee.
Accrual Service	Prior to October 1, 1976, years (and fractions thereof) of Vesting Service. Beginning on October 1, 1976, 1/12th of a year for each month in which the covered employee completes at least one hour of service.
Normal Retirement Date (NRD)	First of month coinciding with or next following attainment of age 65.
Accrued Monthly Accrual Pension	Hired prior to September 15, 1987: $19.00 times accrual service. Hired September 15, 1987 or later: $12.00 times service. (Increased from $18.00 and $11.00, respectively, at September 15, 2000.)
Actuarial Equivalence	The conversion factors for optional forms of payment are determined using the UP 1984 Unisex mortality table (set back 3 years for beneficiaries) and an interest rate of 8%.

Employees' Retirement Plan of AMETEK, Inc.

EIN: 14-1682544 PN: 001

Schedule SB, Part V – Summary of Plan Provisions

Eligibility for Benefits

Normal Retirement	Retire on or after NRD.
Early Retirement	Retire before NRD but on or after both attaining age 55 and completing 15 years of vesting service.
Disability Retirement	Retire after completing 2 years of vesting service due to a total and permanent disability incurred while a covered employee which results in entitlement to a Social Security disability pension.
Deferred Vested	Terminate for reasons other than death or retirement after completing 5 years of vesting service.
Preretirement Death	Die with surviving spouse while eligible for a deferred vested, early or normal retirement benefit, or after 10 years of vesting service.
Postretirement Death	Die while receiving a normal, early or disability retirement benefit.

Benefits Paid Upon the Following Events

Normal Retirement	Accrued monthly pension at actual retirement date.
Early Retirement	Accrued monthly pension at early retirement date, reduced 4.8% per year for pre-NRD commencement.
Disability Retirement	Accrued monthly pension at date of disability, minimum $50.00, with payments commencing immediately.
Vested Termination	Accrued monthly pension at termination date, reduced 4.8% per year for pre-NRD commencement.
Preretirement Death	Married, vested: 50% of accrued monthly pension as of date of death, reduced for 50% joint and survivor annuity and for payment before NRD. Lifetime payments to spouse may begin at participant's earliest retirement date. Spouse may elect benefit payment to single participants as outlined below. Not married: Beneficiary may elect 60 monthly payments of participant's accrued monthly pension, or lump sum actuarial equivalent payment.
Postretirement Death	Sum of (1) and (2): (1) Receiving benefits in joint and survivor or single life form: $1,000. Receiving benefits in single life with certain period form: larger of (1) 120 times pension being paid to participant at the time of his death, less payments received prior to death, or (2) $1,000. (2) If deceased participant had completed 15 years of vesting service (ten years if disability retiree): $3,000.

Forms of Payment	Monthly pension benefits are paid to unmarried participants as a single life annuity. Married participants are entitled to actuarially reduced benefits in the form of a 50% joint and survivor annuity. Participants may elect (with spousal consent) to receive benefits in another actuarially equivalent optional form offered by the plan.

Changes in Benefits Valued Since Prior Year

None.

Employees' Retirement Plan of AMETEK, Inc.

EIN: 14-1682544 PN: 001

Schedule R, Line 17 – Information on Assets and Liabilities Transferred to or Merged with This Plan

Plan being merged as of December 31, 2014:

Plan name	Pension Plan for Shop Employees of U.S. Gauge Division of AMETEK, Inc.
Employer Identification Number	14-1682544
Plan number	003
December 31, 2013 Liabilities	$37,887,192
December 31, 2013 Market Value of Assets	$52,563,815

Plan being merged into as of December 31, 2014:

Plan name	Employees' Retirement Plan of AMETEK, Inc.
Employer Identification Number	14-1682544
Plan number	001
December 31, 2013 Liabilities	$282,450,479
December 31, 2013 Market Value of Assets	$401,167,802

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