

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 6057(b) and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.2em; font-weight: bold;">2020</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2020 or fiscal plan year beginning <u>01/01/2020</u> and ending <u>12/31/2020</u>	
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.) ☒ 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:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>COBHAM MISSION SYSTEMS DAVENPORT LSS INC. 401K PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>08/18/2003</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>08/18/2003</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>08/18/2003</u>					
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>COBHAM MISSION SYSTEMS DAVENPORT LSS, INC.</u> <u>2734 HICKORY GROVE ROAD</u> <u>DAVENPORT, IA 52804-1299</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>57-1169120</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>563-383-6364</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>541990</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>57-1169120</u>	2c Plan Sponsor's telephone number <u>563-383-6364</u>	2d Business code (see instructions) <u>541990</u>	
2b Employer Identification Number (EIN) <u>57-1169120</u>					
2c Plan Sponsor's telephone number <u>563-383-6364</u>					
2d Business code (see instructions) <u>541990</u>					

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.	10/15/2021	ROB BAUGOUS
	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

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2020)
v. 200204

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN	
		3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN	
5 Total number of participants at the beginning of the plan year		5	1178
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)	979
a(2) Total number of active participants at the end of the plan year		6a(2)	868
b Retired or separated participants receiving benefits.....		6b	2
c Other retired or separated participants entitled to future benefits		6c	215
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	1085
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	2
f Total. Add lines 6d and 6e		6f	1087
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	1084
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	64
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: 2E 2F 2G 2J 2K 2T 3F 3H 3D 2R			
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) ☒ 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) ☒ 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) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ 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 2020 Form M-1 annual report. If the plan was not required to file the 2020 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 C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider 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
		2020
		This Form is Open to Public Inspection.

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020		
A Name of plan COBHAM MISSION SYSTEMS DAVENPORT LSS INC. 401K PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 COBHAM MISSION SYSTEMS DAVENPORT LSS, INC.	D Employer Identification Number (EIN) 57-1169120	

Part I	Service Provider Information (see instructions)
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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).. ☒ 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
FIDELITY INVESTMENTS INSTITUTIONAL
04-2647786

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

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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)

PRECEPT ADVISORY GROUP

56-1623293

(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?
27	INVESTMENT ADVISOR	68663	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STRATEGIC ADVISORS, INC.

04-2654524

(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?
27	ADVISOR	19780	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(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?
37 60 64 65 71	RECORDKEEPER	13178	Yes ☒ No ☐	Yes ☒ No ☐	0	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)

(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 ☐

(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 ☐

(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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
HTFD INTL OPPS R5 - HARTFORD ADMIN 41-0679409	0.20%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
INVS DIVRS DIVD R5 - INVESCO INVES 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
PIONEER BOND Y - DST ASSET MANAGER 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.23%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
UM BEHAVIORAL VAL L - DST ASSET MA 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
AMERICAN BEACON SMALL CAP INVESTOR 220 EAST LAS COLINAS BLVD SUITE 12 IRVING, TX 75039	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
AMERICAN NEW ECONOMYFUND CLASS A 3500 WISEMAN BLVD SAN ANTONIO, TX 78251-4321	\$18.00	

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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	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.	<small>OMB No. 1210-0110</small> 2020 This Form is Open to Public Inspection.
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For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan <u>COBHAM MISSION SYSTEMS DAVENPORT LSS INC. 401K PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>COBHAM MISSION SYSTEMS DAVENPORT LSS, INC.</u>	D Employer Identification Number (EIN) <u>57-1169120</u>	

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)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>AC IN RETIRE TR I</u>		
b Name of sponsor of entity listed in (a): <u>GLOBAL TRUST COMPANY</u>		
c EIN-PN <u>30-6406015-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>22999704</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>PIMCO STABLE INC IV</u>		
b Name of sponsor of entity listed in (a): <u>SEI TRUST COMPANY</u>		
c EIN-PN <u>45-4367155-036</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>9327067</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>CT BALANCED TRUST 1</u>		
b Name of sponsor of entity listed in (a): <u>AMERIPRISE TRUST COMPANY</u>		
c EIN-PN <u>41-0007957-159</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1455869</u>
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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	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.	<small>OMB No. 1210-0110</small> 2020 This Form is Open to Public Inspection
For calendar plan year 2020 or fiscal plan year beginning <u>01/01/2020</u> and ending <u>12/31/2020</u>		
A Name of plan <u>COBHAM MISSION SYSTEMS DAVENPORT LSS INC. 401K PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>COBHAM MISSION SYSTEMS DAVENPORT LSS, INC.</u>	D Employer Identification Number (EIN) <u>57-1169120</u>	

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
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	Total noninterest-bearing cash.....	1a	2345	0
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions	1b(1)	0	67860
	(2) Participant contributions.....	1b(2)	0	104843
	(3) Other	1b(3)	0	0
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	298922	906984
	(2) U.S. Government securities	1c(2)	0	0
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)	0	0
	(B) All other	1c(3)(B)	0	0
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)	0	0
	(B) Common	1c(4)(B)	757500	1065158
	(5) Partnership/joint venture interests	1c(5)	0	0
	(6) Real estate (other than employer real property)	1c(6)	0	0
	(7) Loans (other than to participants)	1c(7)	0	0
	(8) Participant loans	1c(8)	1447771	1454303
	(9) Value of interest in common/collective trusts	1c(9)	26987043	33782640
	(10) Value of interest in pooled separate accounts	1c(10)	0	0
	(11) Value of interest in master trust investment accounts	1c(11)	0	0
	(12) Value of interest in 103-12 investment entities	1c(12)	0	0
	(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	67026701	77357395
	(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	0	0
	(15) Other.....	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(1)	Employer securities.....	1d(1) 0	1836
(2)	Employer real property.....	1d(2) 0	0
e	Buildings and other property used in plan operation	1e 0	0
f	Total assets (add all amounts in lines 1a through 1e)	1f 96520282	114741019
Liabilities			
g	Benefit claims payable	1g 0	0
h	Operating payables	1h 0	0
i	Acquisition indebtedness.....	1i 0	0
j	Other liabilities.....	1j 0	0
k	Total liabilities (add all amounts in lines 1g through 1j)	1k 0	0
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l 96520282	114741019

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.

		(a) Amount	(b) Total
Income			
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A) 3630299	
	(B) Participants	2a(1)(B) 6410723	
	(C) Others (including rollovers).....	2a(1)(C) 757283	
(2)	Noncash contributions	2a(2) 0	10798305
(3)	Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)	2a(3)	
b	Earnings on investments:		
(1)	Interest:		
(A)	Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A) 1118	
(B)	U.S. Government securities	2b(1)(B) 0	
(C)	Corporate debt instruments	2b(1)(C) 0	
(D)	Loans (other than to participants)	2b(1)(D) 0	
(E)	Participant loans.....	2b(1)(E) 78758	
(F)	Other	2b(1)(F) 0	
(G)	Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)	79876
(2)	Dividends: (A) Preferred stock.....	2b(2)(A) 0	
	(B) Common stock	2b(2)(B) 15682	
	(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C) 3364069	
(D)	Total dividends. Add lines 2b(2)(A), (B), and (C)	2b(2)(D)	3379751
(3)	Rents	2b(3)	0
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A) 1246639	
	(B) Aggregate carrying amount (see instructions).....	2b(4)(B) 1134329	
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	112310
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A) 0	
	(B) Other	2b(5)(B) -23748	
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		3221299
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		8578113
c Other income	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		26145906

Expenses**e** Benefit payment and payments to provide benefits:

(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	7821690	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other.....	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		7821690
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions).....	2g		1958
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Investment advisory and management fees	2i(3)	19780	
(4) Other.....	2i(4)	81741	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		101521
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		7925169

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		18220737
l Transfers of assets:			
(1) To this plan.....	2l(1)		0
(2) From this plan	2l(2)		0

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) ☐ Unmodified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: **TRONCONI, SEGARRA & ASSOCIATES LLP**

(2) EIN: **04-3728817**

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:

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.)

	Yes	No	Amount
4a		X	

	Yes	No	Amount
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	
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?	X		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
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	
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.)	X		
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		X	
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		X	

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

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 Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

<div>SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Retirement Plan Information</div> <div>This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).</div> <div>▶ File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2020</div> <div>This Form is Open to Public Inspection.</div>
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For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan COBHAM MISSION SYSTEMS DAVENPORT LSS INC. 401K PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 COBHAM MISSION SYSTEMS DAVENPORT LSS, INC.	D Employer Identification Number (EIN) 57-1169120

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	
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): 04-6568107		
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	

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 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

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Schedule R (Form 5500) 2020
v. 200204

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 deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14a	
14b	
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.....

b The corresponding number for the second preceding plan year.....

15a	
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.....

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.....

16a	
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. ☐

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: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

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 ☐ 21 years or more

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

- 20 PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:
☐ Yes.
☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.
☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.
☐ No. Other. Provide explanation _____

**Cobham Mission Systems
Davenport LSS, Inc.
401(k) Plan**

**Financial Statements and
Supplemental Schedule**

December 31, 2020 and 2019

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan
Financial Statements

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Independent Auditors' Report

To the Plan Sponsor and Participants of the
Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan
Davenport, Iowa

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, and the related statements of changes in net assets available for benefits for the years 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 accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' 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 of America ("GAAS"). 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 ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Fidelity Management Trust Company (the "Trustee"), except for comparing such information with the related information included in the financial statements. We have been informed by the Plan Administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The Plan Administrator has obtained a certification from the Trustee as of and for the years ended December 31, 2020 and 2019, that the information provided to the Plan Administrator by the Trustee is complete and accurate.

Disclaimer of Opinion

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.

Other Matter

The supplemental schedule of assets (held at end of year) as of December 31, 2020 is required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule.

Report on Form and Content in Compliance with DOL Rules and Regulations

The form and content of the information included in the financial statements and supplementary schedule, other than that derived from the information certified by the Trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Tronconi Segura & Associates LLP

Williamsville, New York
October 15, 2021

Cobham Mission Systems Davenport LLS, Inc. 401(k) Plan

Statements of Net Assets Available for Benefits

December 31, 2020 and 2019

	<u>2020</u>	<u>2019</u>
<i>Investments</i>		
Investments, at fair value	\$ 113,114,013	\$ 95,072,511
<i>Receivables</i>		
Notes receivable from participants	1,454,303	1,447,771
Employee	104,843	0
Employer	<u>67,860</u>	<u>0</u>
Total receivables	<u>1,627,006</u>	<u>1,447,771</u>
Net assets available for benefits	<u>\$ 114,741,019</u>	<u>\$ 96,520,282</u>

See independent auditors' report and notes to financial statements.

Cobham Mission Systems Davenport LLS, Inc. 401(k) Plan

Statements of Changes in Net Assets Available for Benefits

for the years ended December 31, 2020 and 2019

	<u>2020</u>	<u>2019</u>
<i>Additions to Net Assets Attributed to:</i>		
Net appreciation in fair value of investments	\$ 11,887,974	\$ 13,168,886
Interest and dividends	<u>3,459,627</u>	<u>2,871,771</u>
Net investment income	15,347,601	16,040,657
Contributions		
Employer		
Match	2,478,338	2,582,094
Service	847,149	864,288
Supplemental	304,812	316,278
Qualified discretionary	<u>0</u>	<u>3,736</u>
Total employer	3,630,299	3,766,396
Participant	<u>7,168,006</u>	<u>6,638,054</u>
Total contributions	<u>10,798,305</u>	<u>10,404,450</u>
Total additions	26,145,906	26,445,107
<i>Deductions from Net Assets Attributed to:</i>		
Benefits paid to participants	7,823,648	7,024,783
Administrative expenses (net of revenue credits)	<u>101,521</u>	<u>88,655</u>
Total deductions	<u>7,925,169</u>	<u>7,113,438</u>
Net increase	18,220,737	19,331,669
<i>Net Assets Available for Benefits</i>		
Beginning of year	<u>96,520,282</u>	<u>77,188,613</u>
End of year	<u><u>\$ 114,741,019</u></u>	<u><u>\$ 96,520,282</u></u>

See independent auditors' report and notes to financial statements.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan

Notes to Financial Statements

1. Description of Plan

The following description of the Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan (the “Plan”) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan’s provisions.

General – The Plan is a defined contribution plan established on August 18, 2003 and sponsored by Cobham Mission Systems Davenport LSS, Inc. (the “Plan Sponsor”). The Plan covers substantially all employees of the Plan Sponsor, and is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

Effective November 1, 2016, the Plan was amended and restated as a volume-submitter defined contribution plan sponsored by Fidelity Management & Research Company (“Fidelity”). The Carleton Life Support System’s Retirement Plan was merged with the Plan as of the effective date. The Plan was amended effective November 1, 2019 to change the name of the Plan to the Cobham Mission Systems Davenport LSS Inc. 401(k) Plan to align with the change in the Plan Sponsor’s name.

The Plan Sponsor was acquired by Eaton in June 2021. The Plan’s management is in discussions with Eaton’s management to determine what action, if any, will be taken with respect to this Plan. As of the date the financial statements were available to be issued, no actions have been determined.

Contributions – Participants may elect to contribute to the Plan amounts equal to a full percentage between 1% and 90% of the participant’s eligible compensation as defined by the Plan, limited by the amount imposed by law. Any new employee on or after May 1, 2018 who fails to provide the Plan Sponsor an elective deferral agreement will automatically become a participant in the Plan and have 10% of his or her compensation withheld each pay period and contributed as a pre-tax employee elective deferral. Participants may make Roth contributions into the Plan which are accounted for in separate participant-level subaccounts. Roth contributions made to the Plan amounted to \$679,284 and \$616,795 during the years ended December 31, 2020 and 2019, respectively. Additionally, participants age 50 or older may elect to make a catch-up contribution limited to the amount imposed by law. Contributions received from participants for the years ended December 31, 2020 and 2019 include rollover contributions of \$757,283 and \$519,775, respectively.

The Plan Sponsor matches 50% of the first 10% of eligible compensation contributed to the Plan by the employee.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan

Notes to Financial Statements (continued)

1. Description of Plan (continued)

Effective November 1, 2016 and in accordance with the Plan document, the Plan Sponsor also makes service-weighted contributions based on the following criteria:

Completed Years of Service	Service-Weighted Contribution
0 – 4	.50% of eligible compensation
5 – 9	1.25% of eligible compensation
10 – 14	2.00% of eligible compensation
15 – 19	2.75% of eligible compensation
20 – 24	3.50% of eligible compensation
25 – 29	4.25% of eligible compensation
30+	5.00% of eligible compensation

Also, effective November 1, 2016, the Plan Sponsor makes a supplemental contribution for those eligible participants who commenced employment on or before August 18, 2003 (Acquisition Date of Life Support Division of Litton Systems, Inc.). Such participants who met The Rule of 100 on August 18, 2003, or who subsequently meet the Rule of 100 as of January 1st of a given Plan year, are eligible to receive the supplemental contribution. The Rule of 100 requires that the sum of 2½ times the participant's age as of his or her most recent birthday and the number of full years of benefit service completed by the participant as of the most recent anniversary of his or her most recent date of hire in a given Plan year is greater than 100.

Participant Accounts – Individual accounts are maintained for each Plan participant. Participant accounts are increased by participant contributions, Plan Sponsor contributions, and the participant's share of Plan earnings. Participant accounts are decreased by participant distributions and the participant's share of Plan expenses and losses. The allocation of earnings and losses to participant accounts is based on the value of an individual account in relation to the total assets of the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting – Participants are immediately vested in their salary deferral and rollover contribution accounts and the earnings thereon. Participants vest ratably in Plan Sponsor contributions at 25% for each year of service and become fully vested after four years.

Notes Receivable from Participants – In accordance with Plan provisions, participants are permitted to borrow a minimum of \$1,000 up to a maximum amount equal to the lesser of \$50,000, less the highest outstanding previous loan balance, if any, during the one-year period ending immediately before the date of any new loan, or 50% of their vested balance as of the date the loan is made. Participants may have only one loan outstanding at any time.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan

Notes to Financial Statements (continued)

1. Description of Plan (continued)

The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates determined by the Plan administrator. Repayment terms may not exceed five years, with the exception of a loan used to purchase a primary residence, in which case repayment terms may not exceed 10 years. Principal and interest is paid ratably through each payroll deduction. Delinquent notes receivable from participants are recorded as a distribution based upon the terms of the Plan document.

Payments of Benefits – Plan assets allocated to a participant's account will be distributed upon termination of employment, after reaching age 65, or death. Participants may withdraw funds from their rollover account at any time. Participants may withdraw funds from their matching contribution account at any time after they reach 70½. Participants may withdraw funds from their deferral account at any time after they reach 59½. Hardship withdrawals, as defined by the Internal Revenue Code (the "Code"), are available to participants only from their deferral-contributions account.

Forfeitures – Forfeited Plan Sponsor-matching contributions are used to reduce future Plan Sponsor contributions and administrative fees. Forfeitures amounted to \$204,184 and \$126,635 during the years ended December 31, 2020 and 2019, respectively. Forfeitures were used to reduce Plan Sponsor contributions during the years ended December 31, 2020 and 2019 by \$213,330 and \$28,545, respectively. Forfeitures were used to reduce administrative fees during the years ended December 31, 2020 and 2019 by \$68,807 and \$66,818, respectively. Unallocated forfeitures were \$22,590 and \$96,546 as of December 31, 2020 and 2019, respectively.

Tax Status – The Plan is a volume-submitter profit-sharing plan sponsored by Fidelity Management and Research Co. The IRS has determined and informed the Plan sponsor by a letter dated March 31, 2014, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (the "IRC"). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt.

Plan Termination – Although it has not expressed any intent to do so, the Plan Sponsor has the right to discontinue its contributions at any time and terminate the Plan, subject to the provisions of ERISA. In the event of Plan termination, participants would become fully vested in Plan Sponsor contributions and associated earnings thereon.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies

Basis of Accounting – The accompanying financial statements are prepared on the accrual basis of accounting.

Investment Valuation and Income Recognition – The Plan's investments in a money market fund, mutual funds, a self-directed brokerage fund and common collective trusts are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for a discussion of fair value measurements.

The Plan presents in the accompanying statements of changes in net assets available for benefits the net appreciation in the fair value of its investments, which includes both realized gains (losses) and unrealized net appreciation (depreciation) in the fair value of investments. Realized gains (losses) on disposition of investments were based upon actual costs and selling prices.

Purchases and sales of securities are recorded on a settlement-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

Notes Receivable from Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. In the event of death or termination of employment, the entire outstanding principal and accrued interest shall be due and payable within 90 days. Any unpaid balance will be deemed a taxable distribution from the Plan.

Payment of Benefits – Benefits are recorded when paid.

Administrative Expenses – Certain accounting and administrative expenses necessary to administer the Plan are paid for by the Plan Sponsor. Expenses relating to investment activity are paid by participants from their respective individual accounts. Certain administrative and investment activity expenses are paid by the Plan. Each year, Fidelity awards the Plan revenue credits payable to the Plan from Fidelity that either can be used for eligible Plan expenses or allocated to participant accounts. The Plan received credits as part of this program totaling \$1,744 and \$5,966 for the years ended December 31, 2020 and 2019, respectively. Administrative expenses in the accompanying statements of changes in net assets are reduced by these amounts.

Party-in-Interest Transactions – Certain Plan investments were held in Fidelity mutual funds, a self-directed brokerage fund, and a money-market fund. Fidelity is a trustee of the Plan and, as such, transactions involving these funds qualify as party-in-interest transactions.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

Risks and Uncertainties – Investments are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investments, it is at least reasonably possible that changes in risks in the values of investments will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the accompanying financial statements.

Use of Estimates – The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts of net assets available for benefits and changes therein, and disclosure of contingent assets and liabilities. Accordingly, actual results may differ from those estimates.

Coronavirus Aid, Relief, and Economic Security Act ("CARES Act") – The CARES Act was signed into law on March 27, 2020 in response to the impacts and anticipated impacts of the COVID-19 pandemic. Accordingly, all required minimum distributions for calendar year 2020 were waived, and the Plan Sponsor elected, under the CARES Act, to provide participants with penalty-free access to their balances up to \$100,000 subject to certain eligibility criteria if distributed before January 1, 2021 and to provide a temporary increase in participant loan limits to the lesser of \$100,000 or 100% of a participant's vested balance. Plan management offered these relief options to participants in 2020, and will formally amend the Plan to reflect these changes prior to the IRS deadline of December 31, 2022.

Subsequent Events – The Plan Administrator has evaluated the effects of all subsequent events, for recognition or disclosure, through October 15, 2021, the date the accompanying financial statements were available to be issued. See note 1.

3. Information Certified by the Trustee (Unaudited)

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor ("DOL") Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity has certified that the investments and notes receivable from participants included in the accompanying financial statements and supplementary information are complete and accurate at December 31, 2020 and 2019, respectively.

The Trustee also certified interest and dividend income totaling \$3,459,627 and \$2,871,771 and net appreciation in fair value of investments of \$11,887,974 and \$13,168,886 for the years ended December 31, 2020 and 2019, respectively.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan

Notes to Financial Statements (continued)

4. Fair Value Measurements

ASC 820, *Fair Value Measurements*, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described below:

- **Level 1** – Unadjusted quoted prices in active markets for identical, unrestricted assets or liabilities that are accessible at the measurement date.
- **Level 2** – Quoted prices for similar assets or liabilities in active markets or quoted prices for identical or similar assets or liabilities in markets that are not active. This level also includes inputs other than quoted prices that are observable, either directly or indirectly, for substantially the full term through corroboration with observable, independent market data. This includes investments valued at quoted prices adjusted for legal or contractual restrictions specific to the security.
- **Level 3** – Pricing inputs are unobservable for the asset or liability. That is, inputs that reflect the reporting entity's own assumptions about the assumptions that market participants would use in pricing the asset or liability. There were no assets of the Plan that were valued using Level 3 inputs at December 31, 2020 and 2019.

The asset or liability's fair value-measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The following is a description of the valuation methodologies used for assets measured at fair value, which remain unchanged from the prior year.

Money Market Fund: Shares of the money market fund are valued at amortized cost, which approximates fair value. The amortized cost of an instrument is determined by valuing it at its original cost and thereafter amortizing any discount or premium from its face value at a constant rate until maturity.

Self-Directed Brokerage Account: Account primarily consists of cash and common stocks that are valued on the basis of readily determined market prices.

Mutual Funds: Shares of mutual funds are valued at quoted market prices which represent the net asset value ("NAV") of shares held by the Plan at year end.

Common and Collective Trusts ("CCTs"): Fair value is determined by dividing the fair value of the CCT's net assets by the total number of units owned.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan
Notes to Financial Statements (continued)

4. Fair Value Measurements (continued)

The following table sets forth, by level within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2020 and 2019:

	<u>2020</u>	<u>2019</u>
Level 1		
Money market fund	\$ 26,036	\$ 246,563
Mutual funds	76,663,934	66,685,484
Self-directed brokerage	2,641,403	1,153,421
Level 2		
Common and collective trusts	<u>33,782,640</u>	<u>26,987,043</u>
	<u>\$ 113,114,013</u>	<u>\$ 95,072,511</u>

Supplemental Schedule

Cobham Mission Systems Davenport LLS, Inc. 401(k) Plan

Form 5500 - Schedule H, Line 4i

Schedule of Assets (Held at End of Year)

December 31, 2020

EIN: #57-1169120

Plan: #001

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
	<i>American Century</i>		
	American Century Retirement Date 2020 Trust I	Common Collective Trust	\$ 0
	American Century Retirement Date 2025 Trust I	Common Collective Trust	4,488,935
	American Century Retirement Date 2030 Trust I	Common Collective Trust	2,940,050
	American Century Retirement Date 2035 Trust I	Common Collective Trust	1,476,588
	American Century Retirement Date 2040 Trust I	Common Collective Trust	1,647,663
	American Century Retirement Date 2045 Trust I	Common Collective Trust	1,628,002
	American Century Retirement Date 2050 Trust I	Common Collective Trust	1,725,145
	American Century Retirement Date 2055 Trust I	Common Collective Trust	2,357,268
	American Century Retirement Date 2060 Trust I	Common Collective Trust	1,265,651
	American Century In Retirement Trust I	Common Collective Trust	5,470,402
	<i>American Funds</i>		
	American Funds EuroPacific Growth Fund R6	Mutual Fund	10,372,878
	American Funds AMCAP Fund Class R6	Mutual Fund	9,682,836
	<i>Columbia Trust Balanced Fund I</i>	Common Collective Trust	1,455,869
*	<i>Fidelity</i>		
	Fidelity Contrafund	Mutual Fund	10,844,881
	Fidelity Low-Priced Stock Fund	Mutual Fund	5,023,676
	Fidelity 500 Index Institutional Class	Mutual Fund	4,689,685
	Fidelity Extended Market Index Fund	Mutual Fund	3,109,634
	Fidelity Brokerage Link	Self-Directed Brokerage	2,641,403
	Fidelity US Bond Index Fund	Mutual Fund	1,938,764
	Fidelity Growth Company Fund	Mutual Fund	4,850,568
	Fidelity Government Money Market Portfolio	Money Market Fund	26,036
	Fidelity International Index Fund	Mutual Fund	338,809
	Fidelity Government Income Fund	Mutual Fund	522,809
	<i>Franklin Small Cap Growth Fund Class R6</i>	Mutual Fund	834,147
	<i>Hartford International Opportunities Class R5</i>	Mutual Fund	493,012
	<i>Invesco Diversified Dividend Fund R5 Class</i>	Mutual Fund	6,864,276
	<i>PIMCO Stable Income Fund Class IV</i>	Common Collective Trust	9,327,067
	<i>Pioneer Bond Fund Class Y</i>	Mutual Fund	11,396,758
	<i>Undiscovered Managers Behavioral Value Fund Class L</i>	Mutual Fund	5,701,201
			113,114,013
	<i>Participant Loans</i>	3.25 - 6.50%	1,454,303
			\$ 114,568,316

* Party-in-interest

See independent auditors' report.

**Cobham Mission Systems
Davenport LSS, Inc.
401(k) Plan**

**Financial Statements and
Supplemental Schedule**

December 31, 2020 and 2019

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan
Financial Statements

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Independent Auditors' Report

To the Plan Sponsor and Participants of the
Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan
Davenport, Iowa

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, and the related statements of changes in net assets available for benefits for the years 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 accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' 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 of America ("GAAS"). 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 ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA"), the Plan Administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Fidelity Management Trust Company (the "Trustee"), except for comparing such information with the related information included in the financial statements. We have been informed by the Plan Administrator that the Trustee holds the Plan's investment assets and executes investment transactions. The Plan Administrator has obtained a certification from the Trustee as of and for the years ended December 31, 2020 and 2019, that the information provided to the Plan Administrator by the Trustee is complete and accurate.

Disclaimer of Opinion

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.

Other Matter

The supplemental schedule of assets (held at end of year) as of December 31, 2020 is required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule.

Report on Form and Content in Compliance with DOL Rules and Regulations

The form and content of the information included in the financial statements and supplementary schedule, other than that derived from the information certified by the Trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Tronconi Segura & Associates LLP

Williamsville, New York
October 15, 2021

Cobham Mission Systems Davenport LLS, Inc. 401(k) Plan

Statements of Net Assets Available for Benefits

December 31, 2020 and 2019

	<u>2020</u>	<u>2019</u>
<i>Investments</i>		
Investments, at fair value	\$ 113,114,013	\$ 95,072,511
<i>Receivables</i>		
Notes receivable from participants	1,454,303	1,447,771
Employee	104,843	0
Employer	<u>67,860</u>	<u>0</u>
Total receivables	<u>1,627,006</u>	<u>1,447,771</u>
Net assets available for benefits	<u>\$ 114,741,019</u>	<u>\$ 96,520,282</u>

See independent auditors' report and notes to financial statements.

Cobham Mission Systems Davenport LLS, Inc. 401(k) Plan

Statements of Changes in Net Assets Available for Benefits for the years ended December 31, 2020 and 2019

	<u>2020</u>	<u>2019</u>
<i>Additions to Net Assets Attributed to:</i>		
Net appreciation in fair value of investments	\$ 11,887,974	\$ 13,168,886
Interest and dividends	<u>3,459,627</u>	<u>2,871,771</u>
Net investment income	15,347,601	16,040,657
Contributions		
Employer		
Match	2,478,338	2,582,094
Service	847,149	864,288
Supplemental	304,812	316,278
Qualified discretionary	<u>0</u>	<u>3,736</u>
Total employer	3,630,299	3,766,396
Participant	<u>7,168,006</u>	<u>6,638,054</u>
Total contributions	<u>10,798,305</u>	<u>10,404,450</u>
Total additions	26,145,906	26,445,107
<i>Deductions from Net Assets Attributed to:</i>		
Benefits paid to participants	7,823,648	7,024,783
Administrative expenses (net of revenue credits)	<u>101,521</u>	<u>88,655</u>
Total deductions	<u>7,925,169</u>	<u>7,113,438</u>
Net increase	18,220,737	19,331,669
<i>Net Assets Available for Benefits</i>		
Beginning of year	<u>96,520,282</u>	<u>77,188,613</u>
End of year	<u><u>\$ 114,741,019</u></u>	<u><u>\$ 96,520,282</u></u>

See independent auditors' report and notes to financial statements.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan

Notes to Financial Statements

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General – The Plan is a defined contribution plan established on August 18, 2003 and sponsored by Cobham Mission Systems Davenport LSS, Inc. (the “Plan Sponsor”). The Plan covers substantially all employees of the Plan Sponsor, and is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

Effective November 1, 2016, the Plan was amended and restated as a volume-submitter defined contribution plan sponsored by Fidelity Management & Research Company (“Fidelity”). The Carleton Life Support System’s Retirement Plan was merged with the Plan as of the effective date. The Plan was amended effective November 1, 2019 to change the name of the Plan to the Cobham Mission Systems Davenport LSS Inc. 401(k) Plan to align with the change in the Plan Sponsor’s name.

The Plan Sponsor was acquired by Eaton in June 2021. The Plan’s management is in discussions with Eaton’s management to determine what action, if any, will be taken with respect to this Plan. As of the date the financial statements were available to be issued, no actions have been determined.

Contributions – Participants may elect to contribute to the Plan amounts equal to a full percentage between 1% and 90% of the participant’s eligible compensation as defined by the Plan, limited by the amount imposed by law. Any new employee on or after May 1, 2018 who fails to provide the Plan Sponsor an elective deferral agreement will automatically become a participant in the Plan and have 10% of his or her compensation withheld each pay period and contributed as a pre-tax employee elective deferral. Participants may make Roth contributions into the Plan which are accounted for in separate participant-level subaccounts. Roth contributions made to the Plan amounted to \$679,284 and \$616,795 during the years ended December 31, 2020 and 2019, respectively. Additionally, participants age 50 or older may elect to make a catch-up contribution limited to the amount imposed by law. Contributions received from participants for the years ended December 31, 2020 and 2019 include rollover contributions of \$757,283 and \$519,775, respectively.

The Plan Sponsor matches 50% of the first 10% of eligible compensation contributed to the Plan by the employee.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan

Notes to Financial Statements (continued)

1. Description of Plan (continued)

Effective November 1, 2016 and in accordance with the Plan document, the Plan Sponsor also makes service-weighted contributions based on the following criteria:

Completed Years of Service	Service-Weighted Contribution
0 – 4	.50% of eligible compensation
5 – 9	1.25% of eligible compensation
10 – 14	2.00% of eligible compensation
15 – 19	2.75% of eligible compensation
20 – 24	3.50% of eligible compensation
25 – 29	4.25% of eligible compensation
30+	5.00% of eligible compensation

Also, effective November 1, 2016, the Plan Sponsor makes a supplemental contribution for those eligible participants who commenced employment on or before August 18, 2003 (Acquisition Date of Life Support Division of Litton Systems, Inc.). Such participants who met The Rule of 100 on August 18, 2003, or who subsequently meet the Rule of 100 as of January 1st of a given Plan year, are eligible to receive the supplemental contribution. The Rule of 100 requires that the sum of 2½ times the participant's age as of his or her most recent birthday and the number of full years of benefit service completed by the participant as of the most recent anniversary of his or her most recent date of hire in a given Plan year is greater than 100.

Participant Accounts – Individual accounts are maintained for each Plan participant. Participant accounts are increased by participant contributions, Plan Sponsor contributions, and the participant's share of Plan earnings. Participant accounts are decreased by participant distributions and the participant's share of Plan expenses and losses. The allocation of earnings and losses to participant accounts is based on the value of an individual account in relation to the total assets of the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting – Participants are immediately vested in their salary deferral and rollover contribution accounts and the earnings thereon. Participants vest ratably in Plan Sponsor contributions at 25% for each year of service and become fully vested after four years.

Notes Receivable from Participants – In accordance with Plan provisions, participants are permitted to borrow a minimum of \$1,000 up to a maximum amount equal to the lesser of \$50,000, less the highest outstanding previous loan balance, if any, during the one-year period ending immediately before the date of any new loan, or 50% of their vested balance as of the date the loan is made. Participants may have only one loan outstanding at any time.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan

Notes to Financial Statements (continued)

1. Description of Plan (continued)

The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates determined by the Plan administrator. Repayment terms may not exceed five years, with the exception of a loan used to purchase a primary residence, in which case repayment terms may not exceed 10 years. Principal and interest is paid ratably through each payroll deduction. Delinquent notes receivable from participants are recorded as a distribution based upon the terms of the Plan document.

Payments of Benefits – Plan assets allocated to a participant's account will be distributed upon termination of employment, after reaching age 65, or death. Participants may withdraw funds from their rollover account at any time. Participants may withdraw funds from their matching contribution account at any time after they reach 70½. Participants may withdraw funds from their deferral account at any time after they reach 59½. Hardship withdrawals, as defined by the Internal Revenue Code (the "Code"), are available to participants only from their deferral-contributions account.

Forfeitures – Forfeited Plan Sponsor-matching contributions are used to reduce future Plan Sponsor contributions and administrative fees. Forfeitures amounted to \$204,184 and \$126,635 during the years ended December 31, 2020 and 2019, respectively. Forfeitures were used to reduce Plan Sponsor contributions during the years ended December 31, 2020 and 2019 by \$213,330 and \$28,545, respectively. Forfeitures were used to reduce administrative fees during the years ended December 31, 2020 and 2019 by \$68,807 and \$66,818, respectively. Unallocated forfeitures were \$22,590 and \$96,546 as of December 31, 2020 and 2019, respectively.

Tax Status – The Plan is a volume-submitter profit-sharing plan sponsored by Fidelity Management and Research Co. The IRS has determined and informed the Plan sponsor by a letter dated March 31, 2014, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (the "IRC"). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt.

Plan Termination – Although it has not expressed any intent to do so, the Plan Sponsor has the right to discontinue its contributions at any time and terminate the Plan, subject to the provisions of ERISA. In the event of Plan termination, participants would become fully vested in Plan Sponsor contributions and associated earnings thereon.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies

Basis of Accounting – The accompanying financial statements are prepared on the accrual basis of accounting.

Investment Valuation and Income Recognition – The Plan's investments in a money market fund, mutual funds, a self-directed brokerage fund and common collective trusts are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for a discussion of fair value measurements.

The Plan presents in the accompanying statements of changes in net assets available for benefits the net appreciation in the fair value of its investments, which includes both realized gains (losses) and unrealized net appreciation (depreciation) in the fair value of investments. Realized gains (losses) on disposition of investments were based upon actual costs and selling prices.

Purchases and sales of securities are recorded on a settlement-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

Notes Receivable from Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. In the event of death or termination of employment, the entire outstanding principal and accrued interest shall be due and payable within 90 days. Any unpaid balance will be deemed a taxable distribution from the Plan.

Payment of Benefits – Benefits are recorded when paid.

Administrative Expenses – Certain accounting and administrative expenses necessary to administer the Plan are paid for by the Plan Sponsor. Expenses relating to investment activity are paid by participants from their respective individual accounts. Certain administrative and investment activity expenses are paid by the Plan. Each year, Fidelity awards the Plan revenue credits payable to the Plan from Fidelity that either can be used for eligible Plan expenses or allocated to participant accounts. The Plan received credits as part of this program totaling \$1,744 and \$5,966 for the years ended December 31, 2020 and 2019, respectively. Administrative expenses in the accompanying statements of changes in net assets are reduced by these amounts.

Party-in-Interest Transactions – Certain Plan investments were held in Fidelity mutual funds, a self-directed brokerage fund, and a money-market fund. Fidelity is a trustee of the Plan and, as such, transactions involving these funds qualify as party-in-interest transactions.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

Risks and Uncertainties – Investments are exposed to various risks, such as interest rate, market, and credit risks. Due to the level of risk associated with certain investments, it is at least reasonably possible that changes in risks in the values of investments will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the accompanying financial statements.

Use of Estimates – The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts of net assets available for benefits and changes therein, and disclosure of contingent assets and liabilities. Accordingly, actual results may differ from those estimates.

Coronavirus Aid, Relief, and Economic Security Act ("CARES Act") – The CARES Act was signed into law on March 27, 2020 in response to the impacts and anticipated impacts of the COVID-19 pandemic. Accordingly, all required minimum distributions for calendar year 2020 were waived, and the Plan Sponsor elected, under the CARES Act, to provide participants with penalty-free access to their balances up to \$100,000 subject to certain eligibility criteria if distributed before January 1, 2021 and to provide a temporary increase in participant loan limits to the lesser of \$100,000 or 100% of a participant's vested balance. Plan management offered these relief options to participants in 2020, and will formally amend the Plan to reflect these changes prior to the IRS deadline of December 31, 2022.

Subsequent Events – The Plan Administrator has evaluated the effects of all subsequent events, for recognition or disclosure, through October 15, 2021, the date the accompanying financial statements were available to be issued. See note 1.

3. Information Certified by the Trustee (Unaudited)

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor ("DOL") Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity has certified that the investments and notes receivable from participants included in the accompanying financial statements and supplementary information are complete and accurate at December 31, 2020 and 2019, respectively.

The Trustee also certified interest and dividend income totaling \$3,459,627 and \$2,871,771 and net appreciation in fair value of investments of \$11,887,974 and \$13,168,886 for the years ended December 31, 2020 and 2019, respectively.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan

Notes to Financial Statements (continued)

4. Fair Value Measurements

ASC 820, *Fair Value Measurements*, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy are described below:

- **Level 1** – Unadjusted quoted prices in active markets for identical, unrestricted assets or liabilities that are accessible at the measurement date.
- **Level 2** – Quoted prices for similar assets or liabilities in active markets or quoted prices for identical or similar assets or liabilities in markets that are not active. This level also includes inputs other than quoted prices that are observable, either directly or indirectly, for substantially the full term through corroboration with observable, independent market data. This includes investments valued at quoted prices adjusted for legal or contractual restrictions specific to the security.
- **Level 3** – Pricing inputs are unobservable for the asset or liability. That is, inputs that reflect the reporting entity's own assumptions about the assumptions that market participants would use in pricing the asset or liability. There were no assets of the Plan that were valued using Level 3 inputs at December 31, 2020 and 2019.

The asset or liability's fair value-measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The following is a description of the valuation methodologies used for assets measured at fair value, which remain unchanged from the prior year.

Money Market Fund: Shares of the money market fund are valued at amortized cost, which approximates fair value. The amortized cost of an instrument is determined by valuing it at its original cost and thereafter amortizing any discount or premium from its face value at a constant rate until maturity.

Self-Directed Brokerage Account: Account primarily consists of cash and common stocks that are valued on the basis of readily determined market prices.

Mutual Funds: Shares of mutual funds are valued at quoted market prices which represent the net asset value ("NAV") of shares held by the Plan at year end.

Common and Collective Trusts ("CCTs"): Fair value is determined by dividing the fair value of the CCT's net assets by the total number of units owned.

Cobham Mission Systems Davenport LSS, Inc. 401(k) Plan
Notes to Financial Statements (continued)

4. Fair Value Measurements (continued)

The following table sets forth, by level within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2020 and 2019:

	<u>2020</u>	<u>2019</u>
Level 1		
Money market fund	\$ 26,036	\$ 246,563
Mutual funds	76,663,934	66,685,484
Self-directed brokerage	2,641,403	1,153,421
Level 2		
Common and collective trusts	<u>33,782,640</u>	<u>26,987,043</u>
	<u>\$ 113,114,013</u>	<u>\$ 95,072,511</u>

Supplemental Schedule

Cobham Mission Systems Davenport LLS, Inc. 401(k) Plan

Form 5500 - Schedule H, Line 4i

Schedule of Assets (Held at End of Year)

December 31, 2020

EIN: #57-1169120

Plan: #001

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
	<i>American Century</i>		
	American Century Retirement Date 2020 Trust I	Common Collective Trust	\$ 0
	American Century Retirement Date 2025 Trust I	Common Collective Trust	4,488,935
	American Century Retirement Date 2030 Trust I	Common Collective Trust	2,940,050
	American Century Retirement Date 2035 Trust I	Common Collective Trust	1,476,588
	American Century Retirement Date 2040 Trust I	Common Collective Trust	1,647,663
	American Century Retirement Date 2045 Trust I	Common Collective Trust	1,628,002
	American Century Retirement Date 2050 Trust I	Common Collective Trust	1,725,145
	American Century Retirement Date 2055 Trust I	Common Collective Trust	2,357,268
	American Century Retirement Date 2060 Trust I	Common Collective Trust	1,265,651
	American Century In Retirement Trust I	Common Collective Trust	5,470,402
	<i>American Funds</i>		
	American Funds EuroPacific Growth Fund R6	Mutual Fund	10,372,878
	American Funds AMCAP Fund Class R6	Mutual Fund	9,682,836
	<i>Columbia Trust Balanced Fund I</i>	Common Collective Trust	1,455,869
*	<i>Fidelity</i>		
	Fidelity Contrafund	Mutual Fund	10,844,881
	Fidelity Low-Priced Stock Fund	Mutual Fund	5,023,676
	Fidelity 500 Index Institutional Class	Mutual Fund	4,689,685
	Fidelity Extended Market Index Fund	Mutual Fund	3,109,634
	Fidelity Brokerage Link	Self-Directed Brokerage	2,641,403
	Fidelity US Bond Index Fund	Mutual Fund	1,938,764
	Fidelity Growth Company Fund	Mutual Fund	4,850,568
	Fidelity Government Money Market Portfolio	Money Market Fund	26,036
	Fidelity International Index Fund	Mutual Fund	338,809
	Fidelity Government Income Fund	Mutual Fund	522,809
	<i>Franklin Small Cap Growth Fund Class R6</i>	Mutual Fund	834,147
	<i>Hartford International Opportunities Class R5</i>	Mutual Fund	493,012
	<i>Invesco Diversified Dividend Fund R5 Class</i>	Mutual Fund	6,864,276
	<i>PIMCO Stable Income Fund Class IV</i>	Common Collective Trust	9,327,067
	<i>Pioneer Bond Fund Class Y</i>	Mutual Fund	11,396,758
	<i>Undiscovered Managers Behavioral Value Fund Class L</i>	Mutual Fund	5,701,201
			113,114,013
	<i>Participant Loans</i>	3.25 - 6.50%	1,454,303
			\$ 114,568,316

* Party-in-interest

See independent auditors' report.