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).

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

OMB Nos. 1210-0110
1210-0089

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- [X] a single-employer plan
- [ ] a DFE (specify) _____

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

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

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

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ [ ]

Part II Basic Plan Information—enter all requested information

1a Name of plan
PENSION PLAN FOR EMPLOYEES OF AMPHENOL CORPORATION

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1987

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)
AMPHENOL CORPORATION & AFFILIATED COMPANIES

358 HALL AVENUE
WALLINGFORD, CT 06492

2b Employer Identification Number (EIN)
22-2785165

2c Plan Sponsor's telephone number
203-265-8900

2d Business code (see instructions)
334410

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.	09/29/2026	LILY MAO
	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

3a Plan administrator's name and address ☐ Same as Plan Sponsor

AMPHENOL CORPORATION & AFFILIATED COMPANIES

358 HALL AVENUE
WALLINGFORD, CT 06492

3b Administrator's EIN: 22-2785165

3c Administrator's telephone number: 203-265-8900

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

4b EIN

c Plan Name

4d PN

5	Total number of participants at the beginning of the plan year	**5**	3243
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)**	482
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	439
b	Retired or separated participants receiving benefits	**6b**	1828
c	Other retired or separated participants entitled to future benefits	**6c**	535
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	2802
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	334
f	Total. Add lines **6d** and **6e**.	**6f**	3136
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	0
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 Characteristic Codes in the instructions:

1A 3H

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic 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
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **A** (Insurance Information) – Number Attached 0
- (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 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

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

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

A Name of plan
PENSION PLAN FOR EMPLOYEES OF AMPHENOL CORPORATION

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
AMPHENOL CORPORATION & AFFILIATED COMPANIES

D Employer Identification Number (EIN)
22-2785165

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

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

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	336063615
b Actuarial value	**2b**	338930453

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	2263	238242976	238242976
b For terminated vested participants	641	28133303	28133303
c For active participants	482	45036102	45172761
d Total	3386	311412381	311549040

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

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	

5 Effective interest rate	**5**	5.34 %
6 Target normal cost		
a Present value of current plan year accruals	**6a**	1100443
b Expected plan-related expenses	**6b**	588758
c Target normal cost	**6c**	1689201

Statement by Enrolled Actuary

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

SIGN HERE

Signature of actuary

09/08/2026
Date

NORMAN E. YAMAMOTO
Type or print name of actuary

26-04754
Most recent enrollment number

USI CONSULTING GROUP
Firm name

860-521-8400
Telephone number (including area code)

95 GLASTONBURY BOULEVARD, SUITE 102
GLASTONBURY, CT 06033
Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	6040892
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	6040892
10	Interest on line 9 using prior year's actual return of 2.40 %	0	144981
11	Prior year's excess contributions to be added to prefunding balance:		
a	Present value of excess contributions (line 38a from prior year)		0
b(1)	Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.06 %		0
b(2)	Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c	Total available at beginning of current plan year to add to prefunding balance		0
d	Portion of (c) to be added to prefunding balance		
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	6185873

Part III Funding Percentages

14	Funding target attainment percentage	14	106.80 %
15	Adjusted funding target attainment percentage	15	108.35 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	115.95 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
			Totals ► 18(b)	0	18(c) 0

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

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:	1st segment: 5.07 %	2nd segment: 5.31 %	3rd segment: 5.50 %	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	64

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

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ☒ Yes ☐ No

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	1689201
b Excess assets, if applicable, but not greater than line 31a	**31b**	1689201

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

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

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

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

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

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

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☐ 2021

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
PENSION PLAN FOR EMPLOYEES OF AMPHENOL CORPORATION

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
AMPHENOL CORPORATION & AFFILIATED COMPANIES

D Employer Identification Number (EIN)
22-2785165

Part I **Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)**
(Complete as many entries as needed to report all interests in DFEs)

a Name of MTIA, CCT, PSA, or 103-12 IE: AMPHENOL CORPORATION MASTER TRUST

b Name of sponsor of entity listed in (a): AMPHENOL CORPORATION & AFFILIATED COMPANIES

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)
22-2785165-099	M	340974181

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):

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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, other than DCGs)**
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

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

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a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
PENSION PLAN FOR EMPLOYEES OF AMPHENOL CORPORATION

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
AMPHENOL CORPORATION & AFFILIATED COMPANIES

D Employer Identification Number (EIN)
22-2785165

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)	334657642	340974181
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	334657642	340974181
Liabilities			
1g Benefit claims payable	1g	-1227823	0
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j	0	0
1k Total liabilities (add all amounts in lines 1g through1j)	1k	-1227823	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	335885465	340974181

Part II Income and Expense Statement

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

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

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		31411603
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		31411603
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	24782347	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		24782347
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	46378	
(5) Investment advisory and investment management fees	2i(5)	949224	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)	201180	
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	343758	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		1540540
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		26322887
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		5088716
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) [X] 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) [X] 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: CLIFTONLARSONALLEN LLP **(2)** EIN: 41-0746749

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) [ ] This form is filed for a CCT, PSA, DCG 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. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**4a**		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**	X		10000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**		X	
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [X] 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.) ..... [X] Yes [ ] No [ ] Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year 578635.

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under 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).

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
PENSION PLAN FOR EMPLOYEES OF AMPHENOL CORPORATION

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
AMPHENOL CORPORATION & AFFILIATED COMPANIES

D Employer Identification Number (EIN)
22-2785165

Part I Distributions

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

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

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

EIN(s): 13-2614959

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** 2

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**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (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)	**14a**	
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)	**14b**	
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)	**14c**	

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

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

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

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

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

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) and (b):

a Enter the percentage of plan assets held as:
Public Equity: 15.0 % Private Equity: 0.0 % Investment-Grade Debt and Interest Rate Hedging Assets: 84.2 %
High-Yield Debt: 0.0 % Real Assets: 0.0 % Cash or Cash Equivalents: 0.0 % Other: 0.8 %

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
☐ 0-5 years ☒ 5-10 years ☐ 10-15 years ☐ 15 years or more

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._____

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☒ Yes ☐ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☐ Design-based safe harbor method

☐ "Prior year" ADP test

☐ "Current year" ADP test

☒ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter ___/___/_____ (MM/DD/YYYY) and the Opinion Letter serial number_____.

Structured Attachment	Schedule SB, line 26b	2025
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	**Schedule of Projection of Expected Benefit Payments**	This Form is Open to Public Inspection

Name of Plan	PENSION PLAN FOR EMPLOYEES OF AMPHENOL CORPORATION						
Plan Year Begin Date	01/01/2025	Plan Year End Date	12/31/2025	EIN	22-2785165	PN	001

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2025	487332	4889169	24032685	29409186
2026	1103101	802655	23372050	25277806
2027	1603859	995944	22685764	25285567
2028	2053177	1231441	21974873	25259491
2029	2432035	1331124	21236233	24999392
2030	2724117	1406110	20479007	24609234
2031	2963010	1528462	19697909	24189381
2032	3136527	1607158	18887437	23631122
2033	3259887	1678394	18057801	22996082
2034	3366105	1717792	17205450	22289347
2035	3466855	1785515	16342544	21594914
2036	3558498	1799595	15465622	20823715
2037	3616850	1821232	14576363	20014445
2038	3661616	1858570	13677775	19197961
2039	3692368	1896064	12773207	18361639
2040	3713799	1898773	11866368	17478940
2041	3709233	1871067	10961402	16541702
2042	3678097	1877118	10062930	15618145
2043	3658043	1865730	9175996	14699769
2044	3604386	1822978	8306042	13733406
2045	3553715	1781604	7458963	12794282
2046	3467541	1732072	6640942	11840555
2047	3389881	1677710	5858257	10925848
2048	3273366	1627585	5117133	10018084
2049	3129635	1554884	4423429	9107948

Name of Plan	PENSION PLAN FOR EMPLOYEES OF AMPHENOL CORPORATION						
Plan Year Begin Date	01/01/2025	**Plan Year End Date**	12/31/2025	**EIN**	22-2785165	**PN**	001

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants and Beneficiaries Receiving Payments	Total
2050	2985890	1475164	3782263	8243317
2051	2824194	1398010	3197657	7419861
2052	2659761	1313742	2672183	6645686
2053	2490592	1234534	2206854	5931980
2054	2322391	1154648	1801047	5278086
2055	2154503	1070600	1452615	4677718
2056	1992310	988169	1158132	4138611
2057	1834092	908062	913112	3655266
2058	1682241	830887	712408	3225536
2059	1539106	757129	550512	2846747
2060	1403740	687165	421848	2512753
2061	1276798	621256	321038	2219092
2062	1158079	559562	243087	1960728
2063	1047275	502148	183519	1732942
2064	944023	448988	138461	1531472
2065	847950	399985	104644	1352579
2066	758676	354989	79401	1193066
2067	675835	313825	60606	1050266
2068	599106	276290	46612	922008
2069	528196	242157	36168	806521
2070	462851	211209	28334	702394
2071	402834	183243	22414	608491
2072	347941	158069	17905	523915
2073	297993	135498	14440	447931
2074	252829	115353	11751	379933

COLLABORATORS | COACHES | ADVOCATES | MENTORS
FRIENDS | VOLUNTEERS | REGULARS | DINERS | VISITORS
CPAs | CONSULTANTS | WEALTH ADVISORS | *NEIGHBORS*
COLLABORATORS | COACHES | ADVOCATES | MENTORS |
CONNOISSEURS | CUSTOMERS | TEACHERS |
| VOLUNTEERS |

PENSION PLAN FOR EMPLOYEES OF AMPHENOL CORPORATION

FINANCIAL STATEMENTS

AS OF AND FOR THE YEARS ENDED DECEMBER 31, 2025 AND 2024

Right there with you

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PENSION PLAN FOR EMPLOYEES OF AMPHENOL CORPORATION

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Independent Auditors' Report

Plan Administrator
Pension Plan for Employees of Amphenol Corporation
Wallingford, Connecticut

Report on the Audit of the Financial Statements

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed audits of the financial statements of Pension Plan for Employees of Amphenol Corporation, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, 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, having determined it is permissible in the circumstances, has elected to have the audits of Pension Plan for Employees of Amphenol Corporation's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of and for the years ended December 31, 2025 and 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the Financial Statements section:

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

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- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Pension Plan for Employees of Amphenol Corporation and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for 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. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Pension Plan for Employees of Amphenol Corporation's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

Management is also responsible for maintaining a current Plan instrument, including all Plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditors' Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Pension Plan for Employees of Amphenol Corporation's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Pension Plan for Employees of Amphenol Corporation's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control related matters that we identified during the audit.

CliftonLarsonAllen LLP

CliftonLarsonAllen LLP

West Hartford, Connecticut
September 9, 2026

PENSION PLAN FOR EMPLOYEES OF AMPHENOL CORPORATION

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2025 AND 2024

	2025	2024
ASSETS		
Interest in The Amphenol Corporation Master Trust	$ 340,974,181	$ 334,657,642
Refund Due From Insurance Company	-	1,227,823
Total Assets	340,974,181	335,885,465
LIABILITIES		
Accounts Payable and Accrued Expenses	-	-
Net Assets Available for Benefits	$ 340,974,181	$ 335,885,465
Plan's Interest in The Amphenol Corporation Master Trust	93.52%	93.49%

The accompanying notes are an integral part of the financial statements

PENSION PLAN FOR EMPLOYEES OF AMPHENOL CORPORATION

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEARS ENDED DECEMBER 31, 2025 AND 2024

	2025	2024
Additions to Net Assets Attributed to		
Plan interest in net appreciation of The Amphenol Corporation Master Trust	$ 31,411,603	$ 9,477,360
Deductions from Net Assets Attributed to		
Benefits paid to participants	24,782,347	26,649,688
Payment to insurance company for purchase of annuities, net	-	16,112,177
Administrative expenses	1,540,540	1,663,974
Total deductions	26,322,887	44,425,839
Net Increase (Decrease) in Net Assets	5,088,716	(34,948,479)
Net Assets Available for Benefits - Beginning of Year	335,885,465	370,833,944
Net Assets Available for Benefits - End of Year	$ 340,974,181	$ 335,885,465
Plan's Interest in The Amphenol Corporation Master Trust - Beginning of Year	93.49%	93.81%
Net Increase (Decrease) in Plan's Interest in The Amphenol Corporation Master Trust	0.03%	-0.32%
Plan's Interest in The Amphenol Corporation Master Trust - End of Year	93.52%	93.49%

The accompanying notes are an integral part of the financial statements

PENSION PLAN FOR EMPLOYEES OF AMPHENOL CORPORATION

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - DESCRIPTION OF THE PLAN

The following description of the Pension Plan for Employees of Amphenol Corporation (the Plan) is provided for general information purposes only. Participants should refer to the plan document for a more complete description of the Plan's provisions.

General
On December 31, 1997, the Hourly Employees' Pension Plan of Amphenol Corporation, the LPL Technologies Inc. Retirement Plan, the Pension Plan for Hourly Paid Employees of Chatham Cable Company, the Pension Plan for Salaried Employees of the Sidney Division of the Amphenol Corporation, the Pension Plan for Hourly Employees of the Sidney Division of the Amphenol Corporation, the Pyle-National Retirement Plan for Salaried Employees and the Pyle-National Retirement Plan for Hourly Employees were merged into the Salaried Employees' Pension Plan of Amphenol Corporation (collectively, the Merged Plans). The Salaried Employees' Pension Plan of Amphenol Corporation (the Predecessor Plan) was then amended and renamed the Pension Plan for Employees of Amphenol Corporation. The Plan is a defined benefit pension plan covering United States employees of Amphenol Corporation (the Company), except for employees of certain acquired businesses that retain their existing benefit programs. The terms and conditions of each of the Merged Plans and the Predecessor Plan in effect prior to the merger generally continue as such under the Plan. The Pension Committee of the Board of Directors of the Company controls and manages the operation and administration of the Plan. Northern Trust Company (Northern Trust) serves as trustee of the Plan. The trustees, together with several investment managers, manage the Plan's investments. The Plan's assets are held by the trustee under a Master Trust Agreement (Master Trust) for certain retirement plans sponsored by the Company.

The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Pension Benefits
The vesting and benefit provisions of the Merged Plans continue as such under the Plan. All employees covered under the Plan are fully vested after five years of continuous service, as defined by the Plan, and are entitled to monthly pension benefits upon retirement. Pension benefits are provided to participants under several types of retirement options based upon years of continuous service and age, based on the provisions of the Merged Plans. Retirement benefits are paid to pensioners and beneficiaries in various forms, and they may elect to receive their pension benefits in the form of a joint and survivor annuity; however, such election may result in reduced benefit payments. The Plan generally permits early retirement at a reduced benefit.

Effective July 1, 2017, the Plan was amended to cease accrual benefits as of June 30, 2017 for participants who are not covered by a collective bargaining agreement, as well as freeze eligibility as of July 1, 2017 for all otherwise eligible employees.

The Plan was amended effective December 31, 2018 to cease the accrual of future benefits for participants who were previously grandfathered from past plan freezes and who were highly compensated employees as of this date. For grandfathered participants who become highly compensated employees at a later date, their benefits will cease as of the date they become a highly compensated employee.

NOTES TO FINANCIAL STATEMENTS

Group Annuity Contract

The Company entered into contracts with Banner Life Insurance Company (Banner) and William Penn Life Insurance Company of New York (Penn) to purchase the annuities of certain Plan participants in order to satisfy the benefit obligations of 1,103 retirees and beneficiaries. Banner and Penn assumed the liabilities of these participants as of October 9, 2024 for annuity payments to participants to commence by the insurance companies effective January 1, 2025. The Plan made a payment to the insurance companies totaling $17,340,000 in order to satisfy these liabilities in October 2024, subject to a true-up which was completed in May 2025, resulting in a refund due back to the Plan totaling $1,227,823. This refund and the net payment made to the insurance companies totaling $16,112,177 are reflected on the accompanying statements of net assets available for benefits and changes in net assets available for benefits as of and for the year ended December 31, 2024, respectively.

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires plan management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein and the actuarial present value of accumulated plan benefits and changes therein. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

The assets of the Plan, along with the assets of other retirement plans sponsored by the Company, are invested in the Master Trust for the purpose of investment diversification. Each participating plan has a proportionate interest in the Master Trust. The Plan's interest in the Master Trust is recorded at fair value based on its proportionate interest in the underlying fair value of the Master Trust's net assets. The investments of the Master Trust 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 6 for financial information related to the Master Trust and the valuation methodologies used to measure the assets of the Master Trust at fair value.

The valuation methods described in Notes 5 and 6 may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan and the Master Trust believe their valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The Plan shares in the investment income, including appreciation or depreciation of the investments, and nonplan-specific expenses of the Master Trust based upon the Plan's investment in net assets in relation to the total investment in net assets held in the Master Trust, as calculated on a daily basis. The Plan's interest in the net assets of the Trust was 93.52% and 93.49% as of December 31, 2025 and 2024, respectively.

For financial reporting purposes, the Plan's interest in the Master Trust's investment income and the net appreciation or depreciation in the fair value of investments, which consists of realized gains or losses and the unrealized appreciation or depreciation of those investments, is reported in the Plan's financial statements as plan interest in net appreciation (depreciation) in the fair value of The Amphenol Corporation Master Trust.

NOTES TO FINANCIAL STATEMENTS

Payment of Benefits
Benefit payments to participants are recorded when paid.

Expenses
Administrative expenses specifically related to the Plan are charged directly against plan assets. Nonplan-specific expenses paid from the Master Trust are allocated to the Plan as described above. Administrative expenses include investment management, consulting, actuarial, audit, legal, and recordkeeping fees, as well as premiums paid to the Pension Benefit Guaranty Corporation (PBGC). The plan sponsor provides accounting and other administrative services to the Plan at no charge.

Risks and Uncertainties
Contributions to the Plan and the actuarial present value of accumulated plan benefits are determined based upon certain assumptions pertaining to interest rates, inflation rates, and employee compensation and demographics, all of which are subject to change. Due to uncertainties inherent in the estimation process, it is at least reasonably possible that changes in these estimates and assumptions in the near term could be material to the financial statements.

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

Subsequent Events
Subsequent events were evaluated through September 9, 2026, the date the financial statements were available to be issued.

NOTE 3 - CERTIFICATION BY THE INVESTMENT TRUSTEE

Information presented in the accompanying statements as of and for the years ended December 31, 2025 and 2024 for investments and investment income was derived from information certified to be complete and accurate by Northern Trust Company, the trustee, as permitted by the election made by the plan administrator under 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

NOTE 4 - ACTUARIAL PRESENT VALUE OF ACCUMULATED PLAN BENEFITS

Accumulated plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to service rendered by employees as of the valuation date. Accumulated plan benefits include benefits expected to be paid to 1) retired or terminated employees or their beneficiaries, 2) beneficiaries of employees who have died, and 3) present employees or their beneficiaries.

The actuarial present value of accumulated plan benefits is determined by an independent actuary and is the amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment. Calculations of the present value of accumulated plan benefits were performed as of January 1, 2025. Had the valuations been performed as of December 31, 2024, there would be no material differences

NOTES TO FINANCIAL STATEMENTS

The effect of plan amendments on accumulated plan benefits is recognized during the year in which such amendments become effective.

The actuarial present value of accumulated plan benefits as of December 31, 2024 is as follows:

Vested benefits:	
Participants or beneficiaries currently receiving payments	$ 233,182,162
Terminated participants	27,714,254
Active participants	44,671,750
	305,568,166
Nonvested benefits	139,355
Total Actuarial Present Value of Accumulated Plan Benefits	$ 305,707,521

The changes in the actuarial present value of the Plan's accumulated plan benefits for the year ended December 31, 2024 are as follows:

Actuarial present value of accumulated plan benefits - December 31, 2023	$ 329,862,548
Increase (decrease) during the year attributable to:	
Increase due to the decrease in the discount period	16,982,251
Benefits paid, including annuity purchase	(42,761,865)
Benefits accumulated, including actuarial (gains) and losses	1,624,587
Actuarial Present Value of Accumulated Plan Benefits - December 31, 2024	$ 305,707,521

The significant actuarial assumptions used in the December 31, 2024 valuation were as follows:

Mortality	Pri-2012 Total Dataset Amount-Weighted with Scale MP-2021
Retirement age	Probability of retirement rates for active participants from age 55 to 71 for salaried, Sidney hourly and other hourly groups (with 62 for Sidney hourly terminated vested and 65 for other terminated vested).
Investment rate of return	5.50% per annum

There were no changes in actuarial assumptions used from the prior valuation date.

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. If the Plan were to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated plan benefits.

NOTE 5 - FAIR VALUE MEASUREMENTS

Accounting principles generally accepted in the United States of America establish 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
Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2
Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability;
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3
Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's 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. Assets valued using the net asset value practical expedient are not required to be reported within the hierarchy. See Note 6 for information on the fair value hierarchy of the Master Trust's assets as of and for the years ended December 31, 2025 and 2024.

NOTES TO FINANCIAL STATEMENTS

NOTE 6 – INTEREST IN MASTER TRUST

The following presents the Plan's interest in the Master Trust as of and for the years ended December 31, 2025 and 2024:

Master Trust Statements of Net Assets

	December 31, 2025		December 31, 2024	
	Master Trust	Plan's Interest	Master Trust	Plan's Interest
Assets:				
Investments, at fair value:				
Mutual funds	$ 187,258,053	$ 175,130,797	$ 183,794,766	$ 171,834,675
Corporate bonds	77,964,264	72,915,122	88,035,645	82,306,895
Alternative investments	623,128	582,773	1,154,926	1,079,771
U.S. Government securities	89,418,236	83,627,309	79,748,352	74,558,881
Short-term investments	8,367,754	7,825,839	4,139,709	3,870,325
Total investments	363,631,435	340,081,840	356,873,398	333,650,547
Receivables:				
Accrued investment income	1,638,651	1,532,528	1,716,476	1,604,780
Total receivables	1,638,651	1,532,528	1,716,476	1,604,780
Total assets	365,270,086	341,614,368	358,589,874	335,255,327
Liabilities:				
Due to broker for securities purchased	495,831	463,720	450,052	420,766
Accrued administrative expenses	188,687	176,467	189,234	176,919
Total liabilities	684,518	640,187	639,286	597,685
Net Assets	$ 364,585,568	$ 340,974,181	$ 357,950,588	$ 334,657,642

NOTES TO FINANCIAL STATEMENTS

Master Trust Statements of Changes in Net Assets

	2025	2024
Interest and dividend income	$ 7,561,246	$ 7,646,031
Net appreciation in the fair value of investments	26,029,226	2,420,311
Net investment income	33,590,472	10,066,342
Administrative expenses	(1,758,750)	(1,884,701)
Transfers out	(25,196,742)	(45,543,892)
Increase (decrease) in net assets	6,634,980	(37,362,251)
Net assets - Beginning of Year	357,950,588	395,312,839
Net Assets - End of Year	$ 364,585,568	$ 357,950,588

The following is a description of the valuation methodology used for Master Trust assets measured at fair value.

Mutual Funds
Certain mutual funds are valued at the quoted price of shares held by the Master Trust at year end. Other mutual funds are stated at their net asset values. The net asset value, as reported by the investment manager of the fund, is used as a practical expedient to estimate fair value. The net asset value is based on the fair value of the underlying assets and liabilities at the measurement date.

Corporate Bonds
Corporate bonds are valued based on yields currently available on comparable securities of issuers with similar durations and credit ratings.

Alternative Investments
Alternative investments are valued at their net asset value based on the fair value of the underlying net assets owned by the funds. Alternative investments include investments in hedge funds including fund of fund products. The net asset value, as reported by the investment manager of the fund, is used as a practical expedient to estimate fair value.

U.S. Government Securities
U.S. Government securities are valued at the closing price reported in the active market in which the individual securities are traded.

Short-Term Investments
Short-term investments, which consist of collective trust funds, are stated at their net asset values as reported by the investment manager of the fund based on the fair value of the underlying assets and liabilities. The net asset value, as reported by the investment manager of the fund, is used as a practical expedient to estimate fair value.

There have been no changes in the methodologies used at December 31, 2025 and 2024.

NOTES TO FINANCIAL STATEMENTS

The Master Trust's purchases and sales of securities are recorded on a trade date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation (depreciation) includes the Trust's gains and losses on investments bought and sold as well as held during the year.

The following tables set forth by level, within the fair value hierarchy, the Master Trust's assets at fair value as of December 31, 2025 and 2024:

	2025				
	Level 1	Level 2	Level 3	Investments Measured at Net Asset Value (a)	Total
Mutual funds	$ 11,205,044	$ -	$ -	$ 176,053,009	$ 187,258,053
Corporate bonds	-	77,964,264	-	-	77,964,264
Alternative investments	-	-	-	623,128	623,128
Short-term investments	-	-	-	8,367,754	8,367,754
U.S. Government securities	89,418,236	-	-	-	89,418,236
Total Assets at Fair Value	$ 100,623,280	$ 77,964,264	$ -	$ 185,043,891	$ 363,631,435

	2024				
	Level 1	Level 2	Level 3	Investments Measured at Net Asset Value (a)	Total
Mutual funds	$ 10,271,138	$ -	$ -	$ 173,523,628	$ 183,794,766
Corporate bonds	-	88,035,645	-	-	88,035,645
Alternative investments	-	-	-	1,154,926	1,154,926
Short-term investments	-	-	-	4,139,709	4,139,709
U.S. Government securities	79,748,352	-	-	-	79,748,352
Total Assets at Fair Value	$ 90,019,490	$ 88,035,645	$ -	$ 178,818,263	$ 356,873,398

(a) Certain investments that are measured using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in these tables are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

There were no transfers between levels of investments during the years ended December 31, 2025 and 2024.

NOTES TO FINANCIAL STATEMENTS

Additional information regarding investments that report fair value based on net asset value per share as of December 31, 2025 and 2024 is as follows:

		Fair Value		Redemption Frequency	Redemption Notice Period	Liquidity or Other Restrictions
		2025	2024			
Mutual funds:						
FIAM Long Duration Comingled Pool	(a)	$ 96,030,700	$ 92,502,004	Daily	Daily	None
NTI Coll. S&P 500 Index	(b)	25,750,424	26,758,545	Daily	Daily	None
Loomis Sayles Small MidCap Core Trust	(c)	8,007,505	7,198,364	Daily	Daily	None
Mondrian All Countries World Ex-U.S. Equity	(d)	11,267,744	9,631,002	Monthly	15 days	None
IR&M Intermediate Corp. Coll. Fund	(e)	34,996,636	37,433,713	Daily	Daily	None
Short-term investments:						
Collective U.S. Government STIF 4	(f)	8,367,754	4,139,709	Daily	Daily	None
Alternative investments:						
PIMCO Tactical Opps. Offshore Fund	(g)	579,614	1,111,412	Semi-annual	90 days	18-month lockup*
Allblue Limited	(h)	43,514	43,514	Daily	Daily	None

* The lockup period for this fund has expired and, as such, there is no longer any liquidity or other restrictions other than the 90-day redemption notice.

(a) The fund invests primarily in a diversified portfolio of investment-grade securities, with a focus on long-duration issues.

(b) The fund invests in equities with the objective to approximate the risk and return characteristics of the S&P 500 Index.

(c) The fund invests mainly in a diversified portfolio of small and mid-cap stocks with the objective to seek total return and to outperform the Russell 2500 Index.

(d) The fund primarily invests in equity securities of non-U.S. issuers with the objective to achieve long-term total return.

(e) The fund invests in various intermediate-term corporate fixed income securities.

(f) The fund invests in various low-risk, short-term U.S. Government securities.

(g) The fund invests primarily in performing, stressed or distressed securities and loans of any type and with any sector across the global fixed income market.

(h) The fund invests in a diversified portfolio of underlying funds, with the objective to provide consistent, long-term growth.

NOTE 7 - FUNDING POLICY

Contributions to provide benefits under the Plan are made solely by the Company. The Company's funding policy is to make cash contributions to the Plan in amounts as determined by the Plan's independent actuary. The Company met the minimum funding requirements of ERISA for the years ended December 31, 2025 and 2024.

NOTE 8 - PARTY-IN-INTEREST TRANSACTIONS

Certain investments of the Master Trust are managed by Northern Trust. Northern Trust is a trustee as defined by the Plan, and, therefore, these transactions qualify as party-in-interest transactions. Other parties-in-interest include professional service firms who provide investment management, actuarial, and accounting services to the Plan. Certain employees of the Company who participate in the Plan perform administrative services to the Plan at no cost to the Plan.

NOTE 9 - INCOME TAX STATUS

The Plan obtained its latest determination letter on October 7, 2016, in which the Internal Revenue Service (IRS) stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code (the Code). The Plan has been amended since receiving the determination letter. However, the plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Code. Therefore, the plan administrator believes the Plan was qualified and the related trust was tax exempt as of the financial statement date.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 10 - PLAN TERMINATION

Although it has not expressed any intention to do so, the Company has the right under the Plan, in certain circumstances, to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. In the event that the Plan is terminated, the net assets of the Plan will be allocated for payment of plan benefits to the participants in an order of priority determined in accordance with ERISA, applicable regulations thereunder, and the plan document.

Certain benefits under the Plan are insured by the PBGC if the Plan terminates. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivors' pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefit protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan's termination, subject to a statutory ceiling on the amount of an individual's monthly benefit. Whether all participants receive their benefits should the Plan be terminated at some future time will depend on the sufficiency, at that time, of the Plan's net assets to provide those benefits, the priority of those benefits to be paid and the level and type of benefits guaranteed by the PBGC at that time. Some benefits may be fully or partially provided for by the then existing assets and the PBGC guaranty, while other benefits may not be provided for at all.



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Attachment to Schedule SB (2025 Form 5500)
Line 26a - Schedule of Active Participant Data

Pension Plan for Employees of Amphenol Corporation
EIN: 22-2785165 PN: 001

	Completed Years of Credited Service																					
	Under 1		1 to 4		5 to 9		10 to 14		15 to 19		20 to 24		25 to 29		30 to 34		35 to 39		40 and over	
Attained Age	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.	No.	Avg. Comp.
Under 25																				
25 to 29	1																			
30 to 34																				
35 to 39	5		2				2		2		6									
40 to 44	22				2		1		8		25									
45 to 49	14		1				5		7		17		11							
50 to 54	37		2				1		8		25		16							
55 to 59	28		2		3				9		22		9		8		6			
60 to 64	45		2				3		9		10		9		21		6		18	
65 to 69	18		2				2		4		6		1		7		2		18	
70 & over	2				1		1		1		2		1		1		2		4	

Description of Actuarial Methods

Asset Valuation Method

The Actuarial Value of assets used in the development of plan contributions phases in recognition of the difference between the actual return on Market Value and the expected return on Market Value over a three-year period at 33.33% per year. The Actuarial Value is adjusted, if necessary, to comply with the IRC Sec. 430 requirement that the Actuarial Value of assets be within the range of 90% to 110% of the Market Value of assets. This method is equivalent to the smoothed market value method without phase-in described in Approval 3.16 of Revenue Procedure 2000-40. This was first used for the 2009 valuation.

Actuarial Cost Method

Funding Target Liability: Unit Credit Actuarial Cost Method.

Maximum Liability: Projected Unit Credit Actuarial Cost Method. The allocation of projected benefits between past years and future years is in proportion to the applicable rates of benefit accrual under the Plan.

Description of Actuarial Assumptions

Changes in Actuarial Assumptions as of January 1, 2025

The valuation reflects changes in the actuarial assumptions listed below. (The assumptions used before and after these changes are more fully described in the next section.)

- None

With the exception of the valuation interest rate, the assumptions indicated were changed to represent the Enrolled Actuary's current best estimate of anticipated experience of the Plan.

Interest Rates

The American Rescue Plan Act of 2021 (ARPA) was signed into law on March 11, 2021. ARPA continues to use a 24-month bond averaging period methodology for determining the segmented interest rates used in the calculation of the Plan's target liability and a corridor based on a 25-year bond averaging period. However, now the corridor based on 25-year average segment rates and the applicable minimum and maximum percentages used for purposes of calculating the Plan's target liability to adjust the 24-month average segment rates has been extended. In addition, any 25-year average segment rate that is less than 5% is deemed to be 5%.

The Infrastructure Investment and Jobs Act was signed into law on November 15, 2021 that further extended funding stabilization. The corridors under the new laws are as follows:

Corridor After ARPA		Corridor after Infrastructure Investment and Jobs Act	
Years	**Corridor**	**Years**	**Corridor**
2020-2021	95% to 105% if not deferred	2020-2021	95% to 105% if not deferred
2022-2025	95%-105%	2022-2030	95%-105%
2026	90%-110%	2031	90%-110%
2027	85%-115%	2032	85%-115%
2028	80%-120%	2033	80%-120%
2029	75%-125%	2034	75%-125%
2030+	70%-130%	2035+	70%-130%

The corridor rates are used for purposes of the calculation of the Plan's minimum required contribution and the determination of the Plan's AFTAP certification, but cannot be reflected in the calculation of the Plan's maximum tax deductible contribution or the PBGC variable premium liability. This report reflects the rates under ARPA as allowed under current legislation.

Valuation: Segment rates for the 4th month preceding the Valuation Date (i.e., September). The rates are shown below.

	2025		2024	
Segment	Before Adjustment	After Adjustment	Before Adjustment	After Adjustment
1st	5.07%	5.07%	3.62%	4.75%
2nd	5.33%	5.31%	4.46%	4.87%
3rd	5.36%	5.50%	4.52%	5.59%

Interest Rates (cont.)

The rates before adjustment are the standard 24-month segment rates determined under any prior interest rate relief laws. They are used in the determination of the Plan's maximum tax deductible contribution.

The rates after adjustment reflect the application of the applicable corridor around the 25-year average rates. They are used in the determination of the Plan's minimum required contribution and AFTAP for benefit restriction purposes.

PBGC premium: PBGC spot segment rates for the month preceding the premium payment year. This method was last elected for the 2023 plan year. The rates are shown below.

	2025	2024
1st segment	4.65%	5.01%
2nd segment	5.28%	5.13%
3rd segment	5.63%	5.15%

Expected Return for Asset Smoothing

Year	Assumption	Not to Exceed
2025	5.50%	5.50%
2024	5.50%	5.59%
2023	5.50%	5.74%
2022	5.50%	5.92%

The expected long-term rate of return on assets is estimated using the Plan Sponsor's long-term target asset allocation and the long-term capital market assumption for each asset class in that allocation.

Mortality

Pri-2012 Mortality Table projected to valuation date with an adjusted version of Scale MP-2021.
Separate tables for annuitants and non-annuitants.

Mortality Improvement

Projected to date of decrement using an adjusted version of Scale MP-2021 (generational).

Inflation

2.40%.

This assumption is consistent with the Social Security Administration's current best estimate of the ultimate long-term (75-year horizon) annual percentage increase in CPI, as published in the 2024 OASDI Trustees Report.

Salary Scale (including inflation)

Age	Salaried Plans
30	8.0%
35	6.0%
40	5.0%
45	4.0%
50+	2.4%

The salary scale assumption is based on the results of an actuarial experience study for the period 2015 through 2019.

Increases in IRC Sec. 401(a)(17) compensation limit

As required by law, no increases are assumed.

Increases in IRC Sec. 415(b) limit on benefits

As required by law, no increases are assumed.

Social Security taxable wage base increases

2.40%.

Social Security cost of living increases

N/A.

The set of assumptions above is based on the inflation assumption since these amounts increase with inflation.

Social Security

Social Security Benefits are estimated based on the Social Security Act in effect on the valuation date, assuming payment at the later of age 65 or attained age.

For accrued benefit purposes, wage history is estimated assuming past increases to date proportional to increases in average earnings for Social Security purposes, and assuming level wages from the valuation date forward.

For projected benefits, future salaries are assumed to increase according to the valuation salary scale, the taxable wage base is assumed to increase at 2.4% per year, and Primary Insurance Amounts are assumed to increase with 2.4% cost of living from age 62 to 65.

Retirement

Probability of Retirement:

Age	Salaried Groups	Other Hourly Groups	Sidney Hourly
55	3.5%	6.0%	2.5%
56	3.5	6.0	2.5
57	3.5	6.0	2.5
58	5.5	6.0	2.5
59	5.5	6.0	2.5
60	5.5	6.0	5.5
61	10.0	6.0	12.5
62	20.0	6.0	12.5
63	15.0	6.0	12.5
64	25.0	15.0	12.5
65	35.0	20.0	25.0
66	40.0	35.0	25.0
67	42.0	40.0	25.0
68	40.0	50.0	25.0
69	20.0	60.0	30.0
70	50.0	75.0	30.0
71	100.0	100.0	100.0

Termination prior to retirement other than for disability

Sample rates:

Age	Salaried Groups	Other Hourly Groups	Sidney Hourly
25	15.0%	35.0%	8.0%
30	12.0	30.0	4.0
35	12.0	20.0	4.0
40	8.0	15.0	3.5
45	6.5	10.0	3.0
50	6.5	8.0	3.0
55	3.0	5.0	3.0
60	3.0	5.0	3.0
65	3.0	5.0	3.0
70	3.0	5.0	3.0
71	0.0	0.0	0.0

Disability

Sample rates:

Age	Salaried Groups	Other Hourly Groups	Sidney Hourly
20	0.02%	0.02%	0.02%
25	0.02	0.02	0.02
30	0.02	0.02	0.02
35	0.02	0.02	0.02
40	0.05	0.05	0.05
45	0.08	0.08	0.08
50	0.12	0.12	0.12
55	0.20	0.20	1.00
60	0.30	0.30	1.50
65	0.50	0.50	0.00
66	0.00	0.00	0.00

The actuarial assumptions in regards to rates of decrement shown above are based on the results of an actuarial experience study for the period 2015 through 2019.

Administrative expense

Estimated administrative expenses, including for the PBGC premium, have been added to the normal cost.

The estimate is based on actual expenses paid from the trust in the prior year with expectations for the upcoming year.

Percent of active employees married

85% of males and 85% of females.

Spouse's age

Males are assumed to be 3 years older than females

SCHEDULE SB (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Single-Employer Defined Benefit Plan Actuarial Information

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

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

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

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

A Name of plan
PENSION PLAN FOR EMPLOYEES OF AMPHENOL CORPORATION

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF
AMPHENOL CORPORATION & AFFILIATED COMPANIES

D Employer Identification Number (EIN)
22-2785165

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

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

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2025

2 Assets:

a Market value	**2a**	336,063,615
b Actuarial value	**2b**	338,930,453

3 Funding target/participant count breakdown

	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	2,263	238,242,976	238,242,976
b For terminated vested participants	641	28,133,303	28,133,303
c For active participants	482	45,036,102	45,172,761
d Total	3,386	311,412,381	311,549,040

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

a Funding target disregarding prescribed at-risk assumptions	**4a**	
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	**4b**	

5 Effective interest rate	**5**	5.34%
6 Target normal cost		
a Present value of current plan year accruals	**6a**	1,100,443
b Expected plan-related expenses	**6b**	588,758
c Target normal cost	**6c**	1,689,201

Statement by Enrolled Actuary

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

SIGN HERE

NEY

Signature of actuary

09/08/2026
Date

NORMAN E. YAMAMOTO
Type or print name of actuary

2604754
Most recent enrollment number

USI Consulting Group
Firm name

860-521-8400
Telephone number (including area code)

95 Glastonbury Boulevard, Suite 102

Glastonbury CT 06033
Address of the firm

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

Part II Beginning of Year Carryover and Prefunding Balances

		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	6,040,892
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	6,040,892
10	Interest on line 9 using prior year's actual return of 2.40 %	0	144,981
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of 5.06 %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	6,185,873

Part III Funding Percentages

14	Funding target attainment percentage	14	106.80 %
15	Adjusted funding target attainment percentage	15	108.35 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	115.95 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

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

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
			Totals ► 18(b)	0	18(c) 0

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

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? ☐ Yes ☒ No

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

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

Liquidity shortfall as of end of quarter of this plan year

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

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

21 Discount rate:

a Segment rates:

1st segment:	2nd segment:	3rd segment:	
5.07 %	5.31 %	5.50%	☐ N/A, full yield curve used

b Applicable month (enter code)	**21b**	4
22 Weighted average retirement age	**22**	64

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

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment. ☐ Yes ☒ No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment. ☒ Yes ☐ No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ☒ Yes ☐ No

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

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

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

Part VIII Minimum Required Contribution For Current Year

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

a Target normal cost (line 6c)	**31a**	1,689,201
b Excess assets, if applicable, but not greater than line 31a	**31b**	1,689,201

32 Amortization installments:

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

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

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

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

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

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

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. ☐ 2019 ☐ 2020 ☐ 2021

Attachment to 2025 Form 5500 Schedule SB
Line 22 --Weighted Average Retirement Age

Plan Name Pension Plan for Employees of Amphenol Corporation (Sidney Hourly)
Sponsor's EIN 22-2785165
Plan No. 001

Calculation of Weighted Average Retirement Age

(ignoring other sources of terminations)

Age	Rates of Retirement	Lives	(a) Retirements	(b) Retirements x Age
55	0.0250	1,000	25	1,375
56	0.0250	975	24	1,365
57	0.0250	951	24	1,355
58	0.0250	927	23	1,344
59	0.0250	904	23	1,333
60	0.0550	881	48	2,908
61	0.1250	833	104	6,349
62	0.1250	729	91	5,646
63	0.1250	637	80	5,020
64	0.1250	558	70	4,462
65	0.2500	488	122	7,931
66	0.2500	366	92	6,040
67	0.2500	275	69	4,599
68	0.2500	206	51	3,500
69	0.3000	154	46	3,197
70	0.3000	108	32	2,270
71	1.0000	76	76	5,373
Total			1,000	64,067

Weighted Average Retirement Age: (b) / (a) = **64**

Attachment to 2025 Form 5500 Schedule SB
Line 22 --Weighted Average Retirement Age

Plan Name Pension Plan for Employees of Amphenol Corporation (Other Hourly Groups)
Sponsor's EIN 22-2785165
Plan No. 001

Calculation of Weighted Average Retirement Age

(ignoring other sources of terminations)

Age	Rates of Retirement	Lives	(a) Retirements	(b) Retirements x Age
55	0.0600	1,000	60	3,300
56	0.0600	940	56	3,158
57	0.0600	884	53	3,022
58	0.0600	831	50	2,890
59	0.0600	781	47	2,764
60	0.0600	734	44	2,642
61	0.0600	690	41	2,525
62	0.0600	648	39	2,412
63	0.0600	610	37	2,304
64	0.1500	573	86	5,501
65	0.2000	487	97	6,332
66	0.3500	390	136	9,001
67	0.4000	253	101	6,787
68	0.5000	152	76	5,167
69	0.6000	76	46	3,146
70	0.7500	30	23	1,596
71	1.0000	8	8	539
Total			1,000	63,086

Weighted Average Retirement Age: (b) / (a) = **63**

Attachment to 2025 Form 5500 Schedule SB
Line 22 --Weighted Average Retirement Age

Plan Name Pension Plan for Employees of Amphenol Corporation (Salaried Groups)
Sponsor's EIN 22-2785165
Plan No. 001

Calculation of Weighted Average Retirement Age

(ignoring other sources of terminations)

Age	Rates of Retirement	Lives	(a) Retirements	(b) Retirements x Age
55	0.0350	1,000	35	1,925
56	0.0350	965	34	1,891
57	0.0350	931	33	1,858
58	0.0550	899	49	2,867
59	0.0550	849	47	2,756
60	0.0550	803	44	2,648
61	0.1000	758	76	4,626
62	0.2000	683	137	8,463
63	0.1500	546	82	5,160
64	0.2500	464	116	7,426
65	0.3500	348	122	7,919
66	0.4000	226	91	5,973
67	0.4000	136	54	3,638
68	0.4000	81	33	2,216
69	0.4000	49	20	1,349
70	0.5000	29	15	1,026
71	1.0000	15	15	1,041
Total			1,000	62,782

Weighted Average Retirement Age: (b) / (a) = **63**

Attachment to 2025 Form 5500 Schedule SB
Line 26b - Schedule of Projection of Expected Benefit Payments

Plan Name Pension Plan for Employees of Amphenol Corporation
Sponsor's EIN 22-2785165
Plan No. 1

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants & Beneficiaries Receiving Payment	Total
2025	487,332	4,889,169	24,032,685	29,409,186
2026	1,103,101	802,655	23,372,050	25,277,806
2027	1,603,859	995,944	22,685,764	25,285,567
2028	2,053,177	1,231,441	21,974,873	25,259,491
2029	2,432,035	1,331,124	21,236,233	24,999,392
2030	2,724,117	1,406,110	20,479,007	24,609,234
2031	2,963,010	1,528,462	19,697,909	24,189,381
2032	3,136,527	1,607,158	18,887,437	23,631,122
2033	3,259,887	1,678,394	18,057,801	22,996,082
2034	3,366,105	1,717,792	17,205,450	22,289,347
2035	3,466,855	1,785,515	16,342,544	21,594,914
2036	3,558,498	1,799,595	15,465,622	20,823,715
2037	3,616,850	1,821,232	14,576,363	20,014,445
2038	3,661,616	1,858,570	13,677,775	19,197,961
2039	3,692,368	1,896,064	12,773,207	18,361,639
2040	3,713,799	1,898,773	11,866,368	17,478,940
2041	3,709,233	1,871,067	10,961,402	16,541,702
2042	3,678,097	1,877,118	10,062,930	15,618,145
2043	3,658,043	1,865,730	9,175,996	14,699,769
2044	3,604,386	1,822,978	8,306,042	13,733,406
2045	3,553,715	1,781,604	7,458,963	12,794,282
2046	3,467,541	1,732,072	6,640,942	11,840,555
2047	3,389,881	1,677,710	5,858,257	10,925,848
2048	3,273,366	1,627,585	5,117,133	10,018,084
2049	3,129,635	1,554,884	4,423,429	9,107,948
2050	2,985,890	1,475,164	3,782,263	8,243,317
2051	2,824,194	1,398,010	3,197,657	7,419,861
2052	2,659,761	1,313,742	2,672,183	6,645,686
2053	2,490,592	1,234,534	2,206,854	5,931,980
2054	2,322,391	1,154,648	1,801,047	5,278,086
2055	2,154,503	1,070,600	1,452,615	4,677,718

Plan Year	Active Participants	Terminated Vested Participants	Retired Participants & Beneficiaries Receiving Payment	Total
2056	1,992,310	988,169	1,158,132	4,138,611
2057	1,834,092	908,062	913,112	3,655,266
2058	1,682,241	830,887	712,408	3,225,536
2059	1,539,106	757,129	550,512	2,846,747
2060	1,403,740	687,165	421,848	2,512,753
2061	1,276,798	621,256	321,038	2,219,092
2062	1,158,079	559,562	243,087	1,960,728
2063	1,047,275	502,148	183,519	1,732,942
2064	944,023	448,988	138,461	1,531,472
2065	847,950	399,985	104,644	1,352,579
2066	758,676	354,989	79,401	1,193,066
2067	675,835	313,825	60,606	1,050,266
2068	599,106	276,290	46,612	922,008
2069	528,196	242,157	36,168	806,521
2070	462,851	211,209	28,334	702,394
2071	402,834	183,243	22,414	608,491
2072	347,941	158,069	17,905	523,915
2073	297,993	135,498	14,440	447,931
2074	252,829	115,353	11,751	379,933

Summary of Plan Provisions

Amphenol Salaried

This exhibit summarizes the major provisions of the Plan. It is not intended to be, nor should it be interpreted as a complete statement of all plan provisions. To the extent that this summary does not accurately reflect the plan provisions, then the results of this valuation may not be accurate.

Eligible class

Salaried employees of participating divisions of Amphenol Corporation.

Participation date

First day of the month coinciding with or next following completion of 12 months of employment of at least 1,000 hours. *Participation in the plan is frozen as of December 31, 2006.*

Plan Amendment

HCEs accruing benefits as of December 31, 2018 had benefits frozen in this Plan, with additional benefits accruing in the SERP due to 12/31/2018 Plan Amendment for HCEs.

Employee contributions

None.

Vesting Service

Years of employment with the Corporation subject to break in service rules.

Accrual Service

Years and months (nearest) of employment in the Eligible Class.

Spectra Strip employees only: service prior to January 1, 1980 is not credited.

Compensation

Total excluding incentive bonuses. See Plan for specific inclusions and exclusions.

Average Monthly Compensation

Spectra Strip Employees: Average of highest 60 consecutive months of compensation out of final 120 months.

Non Spectra Strip Employees: Average of highest 5 consecutive calendar years of compensation out of final 10 years.

Accrued Benefit

Benefit is equal to the greater of (a) and (b):

Spectra Strip Employees

(a) *Basic Formula* - 1.9% of Average Monthly Compensation for each year of accrual service up to 15 years, plus 1.5% for each year in excess of 15, up to a maximum of 15 more years, less 1.67% of the employee's estimated Primary Social Security benefit for each year of accrual service up to 30 years;

(b) *Alternative Formula* - $6.00 multiplied by years of benefit service.

Non Spectra Strip Employees

(a) *Basic Formula* - 1.8% of Average Monthly Compensation for each year of accrual service up to 25 years, plus 1% for each year in excess of 25, less 2% of the employee's estimated Primary Social Security benefit for each year of benefit service up to 30 years;

(b) *Alternative Formula* - 1.1% of Average Monthly Compensation multiplied by all years of accrual service.

Benefits accrued through December 31, 1985 have been fully purchased and will be paid by MONY.

Partial plan freeze

Effective December 31, 2006, accrued benefits are frozen for participants who have not attained either age 50 and 15 Years of Vesting Service or 25 Years of Vesting Service.

Normal Retirement

Eligibility: The first day of the month coincident with or next following age 65.

Benefit: Accrued benefit as of Normal Retirement Date

Early Retirement

Eligibility: *Spectra Strip Employees*: Later of age 55 and 5 years of service.

Non Spectra Strip Employees: Later of age 55 and 10 years of service

Benefit: Accrued benefit as of Early Retirement Date

Reduction factors: For Spectra Strip Post-TRA Benefit and Non Spectra Strip Benefits: 1/180 for each of the first 60 months early retirement precedes normal retirement, plus 1/360 for each of the next 60 months early retirement precedes normal retirement.

For Spectra Strip Grandfathered Benefit: 0.5% for each complete month prior to age 62.

Late retirement benefit

Accrued benefit as of actual retirement date.

Termination prior to retirement

Vesting schedule: 100% after completion of 5 years of vesting service.

Benefit: Vested portion of accrued benefit as of date of termination, first payable upon normal retirement eligibility. Earlier benefit commencement may be elected, subject to early retirement eligibility and reduction factors.

Death prior to retirement

Eligibility: 5 years of vesting service. Must be married for at least 12 months prior to death.

Benefit: The surviving spouse of an active participant receives a benefit payable immediately that is 50% of the participant's accrued benefit, reduced if the difference in ages exceeds 5 years.

The surviving spouse of a terminated vested participant receives a benefit that is 50% of the benefit that would have been payable to the participant if the participant had elected to retire at earliest retirement eligibility, or date of death if later, and elected a 50% joint and survivor annuity, i.e., reduced for both early retirement and joint and survivor form of annuity.

The surviving spouse's benefit is first payable on the date that would have been the participant's earliest retirement date, or immediately if the participant had already satisfied early retirement eligibility.

Disability retirement

Eligibility: 10 years of service and deemed to be permanently disabled with such condition for at least 6 consecutive months

Benefit: The accrued benefit payable at NRD for grandfathered participants (i.e., those whose accrued benefits were not frozen December 31, 2006) includes imputed service and compensation while the participant is disabled and receiving LTD.

Spectra Strip employees only: the benefit described above is not reduced for early retirement.

Form of benefit

Normal form: Life annuity. For married participants, payable as an actuarially equivalent 50% joint and survivor annuity.

Optional forms: Life annuity, 100%, 75% or 50% joint and survivor annuity or life annuity guaranteed for 5 or 10 years.

Participants in the Bunker Ramo Profit Sharing Retirement Plan prior to 1/1/76 may receive the portion of their accrued benefit funded by their account balance in a lump sum from MONY.

Current: Automatic lump sum: Payable immediately, without participant or spousal consent, if the present value is $7,000 or less.

Prior: Payable immediately, without participant or spousal consent, if the present value is $5,000 or less.

Amphenol Hourly

This exhibit summarizes the major provisions of the Plan. It is not intended to be, nor should it be interpreted as a complete statement of all plan provisions. To the extent that this summary does not accurately reflect the plan provisions, then the results of this valuation may not be accurate.

Eligible Class

Hourly employees of participating divisions of Amphenol Corporation.

Participation Date

Date of hire.

Participation in the plan is frozen as of November 10, 2015 for CNP-Danbury.

Participation in the plan is frozen as of July 1, 2017 for union employees of Spectra Strip and Endicott (including ACD: subdivision of Endicott).

Employee contributions

None.

Vesting Service

Years of employment with the Corporation subject to break in service rules.

Accrual Service

Years and months (nearest) of employment in the Eligible Class.

Spectra Strip employees only: service prior to January 1, 1980 is not credited.

Accrual Service in the plan is frozen as of July 1, 2017 for union employees of Spectra Strip and Endicott (including ACD: subdivision of Endicott).

Accrued Benefit

Monthly benefits at each location are determined by multiplying accrual service by a flat amount according to the following chart.

Current Year

Pay Code	Location	Service Dates	Current Plan Amount
G95-1	CNP – Danbury	prior to 1/1/01	14.00
		1/1/01 and later	43.00
G59-1	AICP – Endicott	prior to 1/1/99	9.00
		1/1/99 and later	12.00
J26-1	Fiber Optics – Lisle	all	12.50
G46-1	Spectra Strip – Hamden	all	22.00

Accrued Benefit (cont.)

Prior Year

Pay Code	Location	Service Dates	Current Plan Amount
G95-1	CNP – Danbury	prior to 1/1/01	14.00
		1/1/01 and later	40.00
G59-1	AICP – Endicott	prior to 1/1/99	9.00
		1/1/99 and later	12.00
J26-1	Fiber Optics – Lisle	all	12.50
G46-1	Spectra Strip – Hamden	all	22.00

Normal Retirement

Eligibility: The first day of the month coincident with or next following age 65.

Benefit: Accrued benefit as of Normal Retirement Date

Early Retirement

Eligibility: Later of age 55 and 10 years of vesting service.

Benefit: Accrued benefit as of Early Retirement Date

Reduction factors for non-Spectra Strip employees: 1/180 for each of the first 60 months early retirement precedes normal retirement, plus 1/360 for each of the next 60 months early retirement precedes normal retirement.

Reduction factors for Spectra Strip employees: Benefit reduced 0.6% for each month early retirement precedes normal retirement.

Late retirement benefit

Accrued benefit as of actual retirement date.

Termination prior to retirement

Vesting schedule: 100% after completion of 5 years of vesting service.

Benefit: Vested portion of accrued benefit as of date of termination, first payable upon normal retirement eligibility. Earlier benefit commencement may be elected, subject to early retirement eligibility and reduction factors.

Death prior to retirement

Eligibility: 5 years of vesting service. Must be married for at least 12 months prior to death.

Benefit: Surviving spouse's benefit is 50% of the benefit that would have been payable to the participant if the participant had (1) terminated immediately before death, (2) elected to retire at earliest retirement eligibility, or date of death if later, and (3) elected a 50% joint and survivor annuity.

The surviving spouse's benefit is first payable on the date that would have been the participant's earliest retirement date. If the participant had already satisfied early retirement eligibility, the surviving spouse's benefit is payable immediately.

For other than Spectra Strip employees only: the benefit described above is not reduced for the joint and survivor form of annuity if the employee meets the eligibility for early retirement at date of death.

Disability retirement

Eligibility: 10 years of service.

Spectra Strip employees only: participant must have been disabled with such condition for at least 6 consecutive months.

Benefit: Accrued benefit with payment at normal retirement, or commencing at earliest date participant could have retired, reduced as for early retirement.

Spectra Strip employees only: the benefit described above is not reduced early retirement.

Form of benefit

Normal form: Life annuity. For married participants, payable as an actuarially equivalent 50% joint and survivor annuity.

Optional forms: Life annuity, 100%, 75% or 50% joint and survivor annuity or life annuity guaranteed for 5 or 10 years.

Participants in the Bunker Ramo Profit Sharing Retirement Plan prior to 1/1/76 may receive the portion of their accrued benefit funded by their account balance in a lump sum.

Automatic lump sum

Current: Payable immediately, without participant or spousal consent, if the present value is $7,000 or less.

Prior: Payable immediately, without participant or spousal consent, if the present value is $5,000 or less.

Sidney Salaried

This exhibit summarizes the major provisions of the Plan. It is not intended to be, nor should it be interpreted as a complete statement of all plan provisions. To the extent that this summary does not accurately reflect the plan provisions, then the results of this valuation may not be accurate.

Eligible class

Salaried employees of the Amphenol Aerospace Division (Sidney), Amphenol Corporation

Participation date

Date of hire. *Participation in the plan is frozen as of December 31, 2006.*

Plan Amendment

HCEs accruing benefits as of December 31, 2018 had benefits frozen in this Plan, with additional benefits accruing in the SERP due to 12/31/2018 Plan Amendment for HCEs.

Employee contributions

None.

Vesting Service

Years of employment with the Corporation on an elapsed time basis.

Accrual Service

Years of employment in the Eligible Class calculated to the day in decimal fractions.

Compensation

Total.

Average Monthly Compensation

Average of highest 60 consecutive months compensation out of final 120 months

Accrued Benefit

Benefit is equal to the greater of (a) and (b):

(a) *Basic Formula* - 2% of Average Monthly Compensation for each year of accrual service up to 25 years, plus 1/2% for each year in excess of 25, less 2% of the employee's estimated Primary Social Security benefit for each year of accrual service up to 25 years;
(b) *Alternative Formula* - 3/4 of 1% of Average Monthly Compensation plus $8.00 multiplied by years of accrual service up to a maximum of 30 years.

Partial plan freeze

Effective December 31, 2006, accrued benefits are frozen for participants who have not attained either age 50 and 15 Years of Vesting Service or 25 Years of Vesting Service.

Normal Retirement

Eligibility: The first day of the month coincident with or next following age 65.

Benefit: Accrued benefit as of Normal Retirement Date.

Early Retirement

Eligibility: Earlier of (a) and (b):

(a) Later of age 55 and 5 years of vesting service; and

(b) *If hired prior to April 1, 1990*, the point at which age plus service total at least 80.

Benefit: Accrued benefit as of Early Retirement Date

Reduction factors: 1/180 for each of the first 60 months early retirement precedes normal retirement, plus 1/360 for each of the next 60 months early retirement precedes normal retirement and further reduced by 1/360 for each month prior to 120 months (under the rule of eighty).

Late retirement benefit

Accrued benefit as of actual retirement date.

Termination prior to retirement

Vesting schedule: 100% after completion of 5 years of vesting service.

Benefit: Vested portion of accrued benefit as of date of termination, first payable upon normal retirement eligibility. Earlier benefit commencement may be elected, subject to early retirement eligibility and reduction factors.

Death prior to retirement

Eligibility: 5 years of vesting service. Must be married for at least 12 months prior to death.

Benefit: The surviving spouse of an active participant receives a benefit payable immediately that is 50% of the participant's accrued benefit, reduced if the difference in ages exceeds 5 years.

The surviving spouse of a terminated vested participant receives a benefit that is 50% of the benefit that would have been payable to the participant if the participant had elected to retire at earliest retirement eligibility, or date of death if later, and elected a 50% joint and survivor annuity, i.e., reduced for both early retirement and joint and survivor form of annuity.

The surviving spouse's benefit is first payable on the date that would have been the participant's earliest retirement date, or immediately if the participant had already satisfied early retirement eligibility.

Disability retirement

Eligibility: Deemed to be permanently disabled with such condition for at least 5 consecutive months

Benefit: The accrued benefit payable at NRD for grandfathered participants (i.e., those whose accrued benefits were not frozen December 31, 2006) includes imputed service and compensation while the participant is disabled and receiving LTD.

A frozen disability benefit determined under the terms of the plan prior to January 1, 2007 is payable from date of disability to NRD while the participant is disabled and receiving LTD.

Special Age 65 Benefit

Any normal, early or disabled retired member or spouse age 65 or older (excluding deferred vested retirements) who commenced retirement benefits prior to January 1, 2007 is eligible to receive an additional benefit of $8.20 per month as a reimbursement to cover Medicare Part B premiums.

Form of benefit

Normal form: Life annuity. For married participants, payable as an actuarially equivalent 50% joint and survivor annuity.

Optional forms: Life annuity, 100%, 75%, 66-2/3% or 50% joint and survivor annuity.

Current: Automatic lump sum: Payable immediately, without participant or spousal consent, if the present value is $7,000 or less.

Prior: Payable immediately, without participant or spousal consent, if the present value is $5,000 or less.

Sidney Hourly

This exhibit summarizes the major provisions of the Plan. It is not intended to be, nor should it be interpreted as a complete statement of all plan provisions. To the extent that this summary does not accurately reflect the plan provisions, then the results of this valuation may not be accurate.

Eligible class

Hourly employees of the Amphenol Aerospace Division (Sidney), Amphenol Corporation

Participation Date

Date of hire. Participation in the Plan is frozen as of October 28, 2013.

Employee contributions

None.

Vesting Service

One year of service for each plan year with 1,000 Hours of Service or more. In the event that Vesting Service based on 1,000 Hours of Service is less than Accrual Service, Vesting Service is set equal to Accrual Service.

Accrual Service

One year of service for each plan year in the Eligible Class in which at least 1,700 hours are worked. Partial credit is given for completed 12ths based on the actual number of hours worked divided by 141.67.

Accrued Benefit

For Termination On or After	Benefit Level per Year of Accrual Service
11/01/93	$19.00/month
1/01/97	20.00/month
1/01/98	20.50/month
1/01/99	23.50/month
1/01/02	26.50/month
1/01/05	30.00/month
1/01/08	34.00/month
12/01/10	37.00/month
1/01/14	40.00/month
1/01/17	42.50/month
1/01/20	45.00/month
1/01/23	48.00/month

Normal Retirement

Eligibility: The first day of the month coincident with or next following age 65.

Benefit: Accrued benefit as of Normal Retirement Date

Early Retirement

Eligibility: Earlier of (a) and (b):

(a) Later of age 60 and 5 years of service; and

(b) Later of age 55 and 30 years of service.

Benefit: Accrued benefit as of Early Retirement Date

Reduction factors: 5/9% for each of the first 60 months early retirement precedes age 62, and 5/18% for each additional month over 60 months. No reduction if after age 62.

For participants who retire prior to age 62, an additional benefit of $300 per months reduced by 5/9% for each of the first 60 months early retirement precedes age 62 plus 5/18% for each additional month in excess of 60 is payable until age 62.

Late retirement benefit

Accrued benefit as of actual retirement date.

Termination prior to retirement

Vesting schedule: 100% after completion of 5 years of vesting service.

Benefit: Vested portion of accrued benefit as of date of termination, first payable upon normal retirement eligibility. Earlier benefit commencement may be elected, subject to early retirement eligibility and reduction factors.

Death prior to retirement

Eligibility: 5 years of vesting service. Must be married for at least 12 months prior to death.

Benefit: Surviving spouse's benefit is 55% of the benefit that would have been payable to the participant if the participant had (1) terminated immediately before death, (2) elected to retire at earliest retirement eligibility, or date of death if later, and (3) elected a 55% joint and survivor annuity.

The surviving spouse's benefit is first payable on the date that would have been the participant's earliest retirement date. If the participant had already satisfied early retirement eligibility, the surviving spouse's benefit is payable immediately.

For terminated vested participants who terminated prior to 1/1/99: death benefit coverage may be waived with spousal consent. If not waived, accrued benefit is reduced .025% for each month of coverage.

Disability retirement

Eligibility: 5 years of service and deemed to be permanently disabled and who have had such condition for at least 26 weeks.

Benefit: Vested portion of accrued benefit as of date of termination, first payable upon normal retirement eligibility. Earlier benefit commencement may be elected, subject to early retirement eligibility and reduction factors.

Special Age 65 Benefit

Any normal, early or disabled retired member or spouse age 65 or older (excluding deferred vested retirements) is eligible to receive an additional benefit of $10.70 per month as a reimbursement to cover Medicare Part B premiums. This benefit is also available if the retiree is under age 65 and enrolled in voluntary "Medicare" coverage.

Form of benefit

Normal form: Life annuity. For married participants, payable as an actuarially equivalent 55% joint and survivor annuity.

Optional forms: Life annuity, 100%, 75%, 662/3% or 50% joint and survivor annuity.

Current: Automatic lump sum: Payable immediately, without participant or spousal consent, if the present value is $7,000 or less.

Prior: Payable immediately, without participant or spousal consent, if the present value is $5,000 or less.

Pyle Salaried

This exhibit summarizes the major provisions of the Plan. It is not intended to be, nor should it be interpreted as a complete statement of all plan provisions. To the extent that this summary does not accurately reflect the plan provisions, then the results of this valuation may not be accurate.

Eligible class

Salaried employees of Pyle-National who were participants on the date of the merger with the Sine Companies (July 1, 1997). All other salaried employees of Sine Systems * Pyle Connectors are ineligible.

Participation date

January 1 or July 1 following age 21 and completion of 12 months of employment.

Employee contributions

None.

Vesting Service

Years of employment with the Corporation during which an employee is credited with 1,000 hours of service.

Accrual Service

Years of employment in the Eligible Class.

Compensation

Pay including shift differentials but excluding bonuses, commissions, incentive compensation and other forms of compensation.

Average Monthly Compensation

Average of highest 60 consecutive months compensation out of final 120 months.

Accrued Benefit

Benefit is equal to the greater of (a) and (b):

(a) *Basic Formula* - 1% of Average Monthly Compensation for each year of accrual service up to 35 years;

(b) *Alternative Formula* - 1.6% of Average Monthly Compensation less 1.4% of the employee's estimated Primary Social Security benefit for each year of accrual service up to 35 years.

Normal Retirement

Eligibility: The first day of the month coincident with or next following age 65.

Benefit: Accrued benefit as of Normal Retirement Date.

Early Retirement

Eligibility: Later of age 55 and 10 years of service.

Reduction factors: 1/180 for each of the first 60 months early retirement precedes normal retirement, plus 1/360 for each of the next 60 months early retirement.

Late retirement benefit

Accrued benefit as of actual retirement date.

Termination prior to retirement

Vesting schedule: 100% after completion of 5 years of vesting service.

Benefit: Vested portion of accrued benefit as of date of termination, first payable upon normal retirement eligibility. Earlier benefit commencement may be elected, subject to early retirement eligibility and reduction factors.

Death prior to retirement

Eligibility: 5 years of vesting service.

Benefit: *For married participants:* The surviving spouse will receive a benefit which is equal to 50% of the benefit that would have been payable to the participant if the participant had terminated immediately before death, elected early retirement, and elected a 50% joint and survivor annuity.

For unmarried participants who are vested: A designated beneficiary will receive a monthly benefit for 5 years which is calculated as if the participant had:

(1) terminated immediately before death,
(2) elected early retirement, and
(3) elected a 5 year certain and life option.

The death benefits are first payable on the date that would have been the participant's earliest retirement date. If the participant had already satisfied early retirement eligibility, the benefit is payable immediately.

Disability retirement

Eligibility: Qualify for Social Security disability benefits.

Benefit: Additional accrual service and imputed compensation are earned during period of disability. Benefit is payable at Normal Retirement Date

Form of benefit

Normal form: Life annuity. For married participants, payable as an actuarially equivalent 50% joint and survivor annuity.

Optional forms: Life annuity, 100%, 75% or 50% joint and survivor annuity or life annuity guaranteed for 5 or 10 years.

Current: Automatic lump sum: Payable immediately, without participant or spousal consent, if the present value is $7,000 or less.

Prior: Payable immediately, without participant or spousal consent, if the present value is $5,000 or less.

Pyle Hourly

This exhibit summarizes the major provisions of the Plan. It is not intended to be, nor should it be interpreted as a complete statement of all plan provisions. To the extent that this summary does not accurately reflect the plan provisions, then the results of this valuation may not be accurate.

NOTE: The Pyle-National plant was closed in 1997. There are no active employees.

Eligible class

Hourly-paid employees of Pyle National who are represented by the General Service Union, Local No. 73.

Participation date

First day of the calendar quarter following age 21 and completion of one year of employment during which 1,000 hours were worked, and election to make the required contributions.

Employee contributions

3% of monthly compensation up to $500 and 5% thereafter.

Vesting Service

Years of employment with the Corporation during which an employee is credited with 1,000 hours of service subject to age requirements, contribution requirements, and vesting service rules prior to December 31, 1984.

Accrual service

Years of active participation in the plan calculated in decimal fractions.

Compensation

Basic earnings divided by number of hours worked during the year and multiplied by 2,080.

Average Monthly Compensation

Average of highest 5 consecutive years of compensation out of the final 10 years of employment.

Accrued Benefit

1.175% of Average Monthly Compensation for each year of accrual service. Accrued benefit is reduced 0.5% for each full and partial year that the spouse is covered under the pre-retirement survivor annuity death benefit.

Normal Retirement

Eligibility: The first day of the month coincident with or next following age 65.

Benefit: Accrued benefit as of Normal Retirement Date.

Early Retirement

Eligibility: Later of age 55 and 10 years of vesting service.

Reduction factors: 1/240 for each 60 month early retirement precedes the earlier of normal retirement or the later of the date he would attain age 62 or have completed 30 years of service if he had continued in employment.

Late retirement benefit

Accrued benefit at normal retirement reduced for pre-retirement survivor annuity coverage and increased by a late retirement factor which is based on the number of months late retirement follows normal retirement.

Termination prior to retirement

Vesting schedule: 100% after completion of 5 years of vesting service.

Benefit: Vested portion of accrued benefit as of date of termination, first payable upon normal retirement eligibility. Earlier benefit commencement may be elected, subject to early retirement eligibility and reduction factors.

Death prior to retirement

Eligibility: 5 years of vesting service, married for at least 12 months prior to death, and did not waive pre-retirement survivor annuity coverage.

Benefit: Surviving spouse's benefit is 50% of the benefit that would have been payable to the participant if the participant had (1) terminated immediately before death, (2) elected to retire at earliest retirement eligibility, or date of death if later, and (3) elected a 50% joint and survivor annuity.

Return of contributions: The beneficiaries of participants who are not eligible for the pre-retirement survivor annuity will receive single sum death benefit which will be equal to the sum of the participant's accumulated employee contributions with interest and the participant's transfer value.

Form of benefit

Normal form: Life annuity with 10 years guaranteed. For married participants, payable as an actuarially equivalent 50% joint and survivor annuity.

Optional forms: Life annuity, 100%, 75%, 662/3% or 50% joint and survivor annuity or life annuity guaranteed for 5, 10, or 15 years.

Current: Automatic lump sum: Payable immediately, without participant or spousal consent, if the present value is $7,000 or less.

Prior: Payable immediately, without participant or spousal consent, if the present value is $5,000 or less.

LPL Technologies

This exhibit summarizes the major provisions of the Plan. It is not intended to be, nor should it be interpreted as a complete statement of all plan provisions. To the extent that this summary does not accurately reflect the plan provisions, then the results of this valuation may not be accurate.

Eligible class

Salaried employees of Times Fiber Communication, and Amphenol Corporation Headquarters, excluding any Amphenol Operations employee hired prior to June 1, 1987.

Participation date

Effective January 1, 2002: First of the month coincident with or next following later of age 21 and completion of a year of service. Participation in the plan is frozen as of December 31, 2006.

Effective January 1, 2000: Later of January 1, 2000 and the first of the month coincident with or next following date of hire.

Prior to January 1, 2000: First of the month coincident with or next following later of age 21, completion of a year of service, and agreement to make member contributions.

Plan Amendment

HCEs accruing benefits as of December 31, 2018 had benefits frozen in this Plan, with additional benefits accruing in the SERP due to 12/31/2018 Plan Amendment for HCEs.

Employee contributions

None. (*Prior to January 1, 2000:* 2% of regular compensation in excess of $15,000 per year.)

Vesting Service

Years of employment with the Corporation subject to the Plan's break in service rules.

Accrual service

Years of participation, to the nearest twelfth of a year.

Compensation

For salesmen on straight commission, two-thirds of gross commission. For all others, total compensation.

Average Monthly Compensation

Greater of average of compensation during 60 consecutive months or average of five consecutive calendar years during final 10 years of employment during which compensation was highest.

Accrued benefit

[(a) - (b)] x (c) where:
(a) 2% of Average Monthly Compensation.
(b) 2% of social security benefit.
(c) years of accrual service, up to 25 years.

Average Monthly Compensation (cont.)

Minimum benefit effective 1/1/97: (a) x (b)

(a) 1.5% of Average Monthly Compensation.
(b) years of accrual service up to 15 years.

Benefits for some participants are partially funded under Aetna contract GA-0255 (the Insilco plan) and under Aetna contract GA-7646.

Partial plan freeze

Effective December 31, 2006, accrued benefits are frozen for participants who have not attained either age 50 and 15 Years of Vesting Service or 25 Years of Vesting Service.

Normal Retirement

Eligibility: The first day of the month coincident with or next following age 65.

Benefit: Accrued benefit as of Normal Retirement Date.

Early Retirement

Eligibility: Later of age 55 and 10 years of service.

Benefit: Accrued benefit as of early retirement date.

Reduction factors: 1/180 for each of the first 60 months early retirement precedes normal retirement, plus 1/360 for each of the next 60 months early retirement precedes normal retirement.

Late retirement

Accrued benefit as of late retirement date.

Termination prior to retirement

Employee-provided portion of accrued benefit: A participant is always 100% vested in the portion of the accrued benefit derived from his/her own member contributions.

Employer-provided portion of accrued benefit: 100% after completion of 5 years of vesting service or attainment of age 65.

Benefit: Vested portion of accrued benefit as of date of termination, first payable upon normal retirement eligibility. Earlier benefit commencement may be elected, subject to early retirement eligibility and reduction factors.

Death prior to retirement

Eligibility: 5 years of vesting service, must be married for at least 12 months prior to death.

Benefit: The surviving spouse of an active participant receives a benefit payable immediately that is 50% of the participant's accrued benefit, reduced if the difference in ages exceeds 5 years.

The surviving spouse of a terminated vested participant receives a benefit that is 50% of the benefit that would have been payable to the participant if the participant had elected to retire at earliest retirement eligibility, or date of death if later, and elected a 50% joint and survivor annuity, i.e., reduced for both early retirement and joint and survivor form of annuity.

Death prior to retirement

The surviving spouse's benefit is first payable on the date that would have been the participant's earliest retirement date, or immediately if the participant had already satisfied early retirement eligibility.

Return of contributions: The beneficiaries of participants who are not eligible for the pre-retirement survivor annuity will receive single sum death benefit equal to the sum of the participant's accumulated employee contributions with interest.

Disability

Eligibility: Entitled to a Social Security disability benefit and payments from the Corporation's LTD plan.

Benefit: The accrued benefit payable at NRD for grandfathered participants (i.e., those whose accrued benefits were not frozen December 31, 2006) includes imputed service and compensation while the participant is disabled and receiving LTD.

Form of benefit

Normal form: Life annuity with 5 years guaranteed. For married participants, payable as an actuarially equivalent 50% joint and survivor annuity with 5 years guaranteed.

Optional forms: Life annuity, 50%, 75% or 100% joint and survivor annuity with or without 5 or 10 years guaranteed.

Current: Automatic lump sum: Payable immediately, without participant or spousal consent, if the present value is $7,000 or less.

Prior: Payable immediately, without participant or spousal consent, if the present value is $5,000 or less.

TFC Hourly - Chatham

This exhibit summarizes the major provisions of the Plan. It is not intended to be, nor should it be interpreted as a complete statement of all plan provisions. To the extent that this summary does not accurately reflect the plan provisions, then the results of this valuation may not be accurate

Eligible class

Hourly-paid employees of Times Fiber Corporation

Participation Date

Date of hire. Participation in the Plan is frozen as of September 1, 2013.

Employee contributions

None.

Vesting Service

Years of employment with the Corporation on an elapsed time basis. Whole years of 365 days on this basis are counted while periods less than 365 days are disregarded.

Accrual Service

Years of employment in the Eligible Class, calculated to the day in decimal fractions, maximum 30 years.

Accrued Benefit

Location	Termination Date	Benefit Level per Year of Accrual Service
Chatham	Prior to 1/1/97	$12.00
	1/1/97 – 12/31/98	13.00
	1/1/99 – 12/31/99	14.25
	1/1/00 – 12/31/00	15.25
	1/1/01 – 12/31/01	16.25
	1/1/02 – 12/31/02	17.25
	1/1/03 – 12/31/04	18.25
	1/1/05 – 12/31/10	20.00
	1/1/11 – 12/31/13	21.00
	1/1/14 – 12/31/16	23.00
	1/1/17 – 12/31/19	24.00
	1/1/20 – 12/31/22	25.00
	1/1/23 and later	27.00
Liberty, NC	Prior to 1/1/2005	18.00
	1/1/2005 and later	20.00

Normal Retirement

Eligibility: The first day of the month coincident with or next following age 65.

Benefit: Accrued benefit as of Normal Retirement Date

Early Retirement

Eligibility: Later of age 60 and 10 years of vesting service.

Benefit: Accrued benefit as of Early Retirement Date.

Reduction factors: .5% for each month early retirement precedes normal retirement.

Late retirement benefit

Accrued benefit as of actual retirement date.

Termination prior to retirement

Vesting schedule: 100% after completion of 5 years of vesting service.

Benefit: Vested portion of accrued benefit as of date of termination, first payable upon normal retirement eligibility. Earlier benefit commencement may be elected, subject to early retirement eligibility and reduction factors.

Death prior to retirement

Eligibility: 5 years of vesting service. Must be married for at least 12 months prior to death.

Benefit: Surviving spouse's benefit is 50% of the benefit that would have been payable to the participant if the participant had (1) terminated immediately before death, (2) elected to retire at earliest retirement eligibility, or date of death if later, and (3) elected a 50% joint and survivor annuity.

The surviving spouse's benefit is first payable on the date that would have been the participant's earliest retirement date. If the participant had already satisfied early retirement eligibility, the surviving spouse's benefit is payable immediately.

Disability retirement

Eligibility: Deemed to be disabled after 3 months of employment

Benefit: Additional accrual service is earned during period of disability, beginning 6 months after disability commences. Benefit payable at Normal Retirement Date is determined using benefit level in effect on date of termination of active employment.

Form of benefit

Normal form: Life annuity. For married participants, payable as an actuarially equivalent 50% joint and survivor annuity.

Optional forms: Life annuity, 100%, 75% or 50% joint and survivor annuity or life annuity guaranteed for 10 years.

Current: Automatic lump sum: Payable immediately, without participant or spousal consent, if the present value is $7,000 or less.

Prior: Payable immediately, without participant or spousal consent, if the present value is $5,000 or less.

Schedule SB, line 32 – Schedule of Amortizations Bases				
Date Established	**Type of Base**	**Amortization Installment**	**Years Remaining**	**Present Value of Remaining Installments as of 1/1/2025**
1/1/2025	Shortfall	0	15	0
Total		0		0