FORM 4

☐ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person * | | | | 2. I | 2. Issuer Name and Ticker or Trading Symbol | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---|---------------------------------------|---|---------------------------------|---|---|----------------------------------|-------------------------------------|--------|---------------------|--|---|--|---|---|---|--|
| Singh Prahla | ıd R. | | | AN | MPI | HENO | L COR | P/D | E/ | [APH] |] | | | | | | |
| (Last) (First) (Middle) | | | | 3. I | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | | | | X_ Director10% Owner Officer (give title below) Other (specify below) | | | | |
| C/O AMPHENOL CORPORATION, 358 HALL AVENUE | | | | | 8/3/2023 | | | | | | | | omeer (g.) | | , <u> </u> | ier (speerly c | , (10 11) |
| | | | | 4. I | 4. If Amendment, Date Original Filed (MM/DD/YYYY) | | | | | | |) 6. | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| WALLINGFORD, CT 06492 (City) (State) (Zip) | | | | | | | | | | | _3 | X _ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (0 |) (511 | · · · · · · · · · · · · · · · · · · · | | Non-Der | ivati | ive Secu | rities Ac | quire | d, D | isposed o | of, or Be | enefi | cially Owne | d | | | |
| 1. Title of Security (Instr. 3) 2. Trans. I | | | | | | (Instr. 8) | | or Disposed of (D) | | Follo | ollowing Reported Transaction(s) nstr. 3 and 4) | | | 6. Ownership Form: Direct (D) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | Code | V | Amo | (A) o unt (D) | r Price | | | | | or Indirect (I) (Instr. 4) | (Instr. 4) |
| | Tab | le II - Deri | ivative Sec | curities l | Bene | eficially | Owned (| e.g., _] | puts, | calls, wa | arrants, | opt | ions, conver | tible secu | ırities) | | |
| Security (Instr. 3) | Conversion or Exercise Price of Derivative | 3. Trans. Date | 3A. Deemed Execution Date, if any | 4. Trans. Code (Instr. 8) | | 5. Number Derivative Acquired Disposed (Instr. 3, 4 | e Securities (A) or of (D) | Securities and Ex A) or f (D) | | rcisable on Date | 7. Title and A Securities Un Derivative So (Instr. 3 and | | erlying | 8. Price of Derivative Security (Instr. 5) | Securities Beneficially Owned | Ownership Form of Derivative Security: | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | Security | | | Code | de V | (A) | (D) | Date Exerc | isable | Expiration Date | Title | | Amount or Number of Shares | | Following Reported Transaction(s) (Instr. 4) | Direct (D) or Indirect (I) (Instr. 4) | |
| Phantom Stock | \$0 (<u>1</u>) | 8/3/2023 | | A | | 768 | 3 | Ω | 1) | Ω | Class Comm Stock | on | 768 | \$88.48 | 3,143 | D | |

Explanation of Responses:

(1) Each share of phantom stock is the economic equivalent of one share of common stock of the Issuer and will be settled in cash, or at the election of the Reporting Person, in shares of common stock of the Issuer on the first to occur of (i) May 19, 2024, or (ii) the day immediately prior to the date of the 2024 regular annual meeting of the Issuer's stockholders.

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--------------------------------|---------------|-----------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| Singh Prahlad R. | | | | | | | |
| C/O AMPHENOL CORPORATION | X | | | | | | |
| 358 HALL AVENUE | Λ | | | | | | |
| WALLINGFORD, CT 06492 | | | | | | | |

Signatures

/s/ Lance E. D'Amico, POA

8/3/2023

^{**}Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.