

AMPHENOL CORP /DE/
Form 3
June 04, 2014

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
Expires: January 31, 2005
Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

<p>1. Name and Address of Reporting Person *</p> <p>Â Silverman David M</p> <p>(Last) (First) (Middle)</p> <p>C/O AMPHENOL CORPORATION,Â 358 HALL AVENUE</p> <p>(Street)</p> <p>WALLINGFORD,Â CTÂ 06492</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>06/01/2014</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>AMPHENOL CORP /DE/ [APH]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p>___ Director ___ 10% Owner <input checked="" type="checkbox"/> Officer ___ Other (give title below) (specify below) Vice President, Human Resource</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person ___ Form filed by More than One Reporting Person</p>
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Table I - Non-Derivative Securities Beneficially Owned

<p>1. Title of Security (Instr. 4)</p>	<p>2. Amount of Securities Beneficially Owned (Instr. 4)</p>	<p>3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)</p>	<p>4. Nature of Indirect Beneficial Ownership (Instr. 5)</p>
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

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.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

<p>1. Title of Derivative Security (Instr. 4)</p>	<p>2. Date Exercisable and Expiration Date (Month/Day/Year)</p> <p>Date Exercisable Expiration Date</p>	<p>3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)</p> <p>Title Amount or Number of</p>	<p>4. Conversion or Exercise Price of Derivative Security</p>	<p>5. Ownership Form of Derivative Security: Direct (D)</p>	<p>6. Nature of Indirect Beneficial Ownership (Instr. 5)</p>
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				Shares		or Indirect (1) (Instr. 5)	
Stock Option	05/22/2009 ⁽¹⁾	05/22/2018	Class A Common Stock	2,000	\$ 45.95	D	Â
Stock Option	05/21/2010 ⁽¹⁾	05/21/2019	Class A Common Stock	5,000	\$ 32.01	D	Â
Stock Option	05/27/2011 ⁽¹⁾	05/27/2020	Class A Common Stock	8,000	\$ 42.99	D	Â
Stock Option	05/26/2012 ⁽¹⁾	05/26/2021	Class A Common Stock	7,500	\$ 53.48	D	Â
Stock Option	05/24/2013 ⁽¹⁾	05/24/2022	Class A Common Stock	9,000	\$ 53.26	D	Â
Stock Option	05/23/2014 ⁽¹⁾	05/23/2023	Class A Common Stock	8,000	\$ 78	D	Â
Stock Option	09/03/2014 ⁽¹⁾	09/03/2023	Class A Common Stock	11,850	\$ 73.35	D	Â
Stock Option	05/22/2015 ⁽¹⁾	05/22/2024	Class A Common Stock	30,000	\$ 95.43	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Silverman David M C/O AMPHENOL CORPORATION 358 HALL AVENUE WALLINGFORD, CT 06492	Â	Â	Â Vice President, Human Resource	Â

Signatures

Edward C.
Wetmore, POA 06/04/2014

**Signature of Reporting Person Date

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 5(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).

(1) Date Exercisable: 20% per year over a five year period commencing on the first anniversary of date of grant.

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

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