Carlson David M Form 3 March 16, 2010							
FORM 3	UNITED STATES SECURITIES AND EXCHANGE COMMISSION				OMB APPROVAL		
		Washington, I	D.C. 20549	OMB Number:	3235-0104		
	INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF				January 31, 2005		
	SECURITIES						
S	Filed pursuant Section 17(a) of 30	burden hour response	rs per 0.5				
(Print or Type Respons	ses)						
1. Name and Address Person <u>*</u>	of Reporting	2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Syn IHS Inc. [IHS]	nbol			

Person <u>*</u> Carlson David M		Statement (Month/Day/Year)	IHS Inc. [IHS]						
	(Last)	(First)	(Middle)	03/12/2010	4. Relationship of Reporting Person(s) to Issuer		g	5. If Amendment, Date Original Filed(Month/Day/Year)	
	15 INVERN	ESS WAY	EAST						
		(Street)			(Check	all applicable)	6. Individual or Joint/Group	
	ENGLEWO	OD, CO	80112		÷		ow)	Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person	
	(City)	(State)	(Zip)	Table I - N	Non-Deriva	tive Securit	ies Be	neficially Owned	
	1.Title of Secu (Instr. 4)	rity		2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	*	
	Class A Cor	nmon Stoc	k	10,157		D	Â		
	Reminder: Rep owned directly	-		ach class of securities benefici	ially S	SEC 1473 (7-02	2)		
		Perso	ons who res	pond to the collection of					

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)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		Securities Underlying Derivative Security		4. Conversion or Exercise Price of	5. Ownership Form of	(Instr. 5)
			(Instr. 4)		Derivative	Derivative Security:	
	Date	Expiration	Title	Amount or	Security	Direct (D)	
	Exercisable I	Date		Number of	Ĩ	or Indirect	

Shares

(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Carlson David M 15 INVERNESS WAY EAST ENGLEWOOD, CO 80112	Â	Â	Sr. Vice President, CTO	Â			
Signatures							
/s/ M Sean 03/1 Radcliffe	6/2010						
<u>**</u> Signature of I 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).

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.