Edgar Filing: IDEX CORP /DE/ - Form 4

IDEX CORP	/DE/										
Form 4											
October 27, 2											
FORM	4 _{UNITE}	ED STATES	SECUR	ITIES AI	ND EX(HAP	NGE CO	MMISSION		PROVAL	
	UNIII			hington,					OMB Number:	3235-0287	
Check this				8,					Expires:	January 31,	
subject to STATEMENT OF CHA				ANGES IN BENEFICIAL OWNE				ERSHIP OF	Estimated average 200		
Section 16		SECUR				JRITIES				burden hours per	
Form 4 or Form 5			n 17		a			61024	response	0.5	
obligation	0	pursuant to $\frac{17}{2}$					•	Act of 1934, 935 or Section			
may conti	nue.		of the Inv	•	•	- ·					
See Instru- 1(b).	ction	50(11)	of the my	estinent (compun	y 1100	01 1740				
-(-).											
(Print or Type R	esponses)										
1 Nama and A	1.1	:					5	Deletionship of l	D		
ASHLEMAN ERIC D Symbol				Inc.				5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	(Month/Da		insaction			Director	10%	Owner	
1925 WEST	FIELD COU	RT, SUITE		-				XOfficer (give	title Othe	r (specify	
200							be	elow) Chief O	below) perating Office	er	
	(Street)		4 If Amer	idment Dat	e Original		6				
				-				. Individual or Joint/Group Filing(Check			
				•			_2	K_Form filed by O			
LAKE FORI	EST, IL 6004	5					Pe	Form filed by Me erson	ore than One Rej	porting	
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	Securi	ties Acquir	ed, Disposed of,	or Beneficiall	y Owned	
1.Title of		Date 2A. Dee		3.			cquired (A)		6.	7. Nature of	
Security	(Month/Day/Y	(ear) Executi	on Date, if Transactionor Disposed of (D) Code (Instr. 3, 4 and 5) /Day/Year) (Instr. 8)					Securities Beneficially	Ownership Form:	Indirect Beneficial	
(Instr. 3)		any (Month					3)	Owned	Direct (D)	Ownership	
			-					Following	or Indirect	(Instr. 4)	
						(A)		Reported Transaction(s)	(I) (Instr. 4)		
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
COMMON							\$				
STOCK	10/26/2015			S	6,200	D	76.8705	25,667	D		

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

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 Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
ASHLEMAN ERIC D 1925 WEST FIELD COURT SUITE 200 LAKE FOREST, IL 60045			Chief Operating Officer				
Signatures							
ERIC D. ASHLEMAN 10)/27/2015						
<u>**</u> Signature of Reporting Person	Date						

Explanation of Responses:

* 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. 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.