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| IDEX CORP / Form 4 | | | | | | | | | | | |
|---|---|--------------------|---|--|--|----------|----------------------|---|--|---|--|
| if no longe subject to Section 16 Form 4 or Form 5 obligations may contin | RM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES STATEMENT OF CHANGES IN 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 | | | | | | | OMB Number: Expires: Estimated a burden hour response | • | | |
| (Print or Type Re | esponses) | | | | | | | | | | |
| 1. Name and Address of Reporting Person <u>*</u> SALLIOTTE DANIEL J | | | 2. Issuer Name and Ticker or Trading Symbol IDEX CORP /DE/ [IEX] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Last) (First) (Middle) 1925 WEST FIELD COURT, SUITE 200 | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/26/2015 | | | | | Director 10% Owner Officer (give title Other (specify below) below) SVP-Mergers/Acq & Treasury | | | |
| LAKE FORE | (Street) CST, IL 60045 | j | 4. If Amend Filed(Month | | Original | | | 6. Individual or Joi Applicable Line) _X_ Form filed by O Form filed by M | ne Reporting Pe | rson | |
| (City) | (State) | (Zip) | Table | I - Non-De | rivative So | ecurit | | Person ired, Disposed of, | or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction (Month/Day/Y | ear) Execut any | emed ion Date, if n/Day/Year) | 3. Transactic Code (Instr. 8) | 4. Securi on(A) or Di (Instr. 3, | ispose | d of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| COMMON | 02/26/2015 | | | Code V M | Amount 2,110 | (D) A | Price \$ | (Instr. 3 and 4) 27,871 | D | | |
| STOCK COMMON STOCK | 02/26/2015 | | | S | 2,110 | D | 31.77 \$ 78.08 | 25,761 | D | | |
| COMMON STOCK | 02/26/2015 | | | М | 2,000 | А | \$ 40.89 | 27,761 | D | | |
| COMMON STOCK | 02/26/2015 | | | S | 2,000 | D | \$ 78.08 | 25,761 | D | | |

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

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

| 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) | Secur Acqui (A) or | rivative ities ired r osed of . 3, 4, | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | |
|---|---|---|---|--|--------------------------|--|--|--------------------|---|--------------------------------------|
| | | | | Code V | (A) | (D) | Date Exercisable | Expiration Date | Title | Amoun or Numbe of Shares |
| OPTIONS (RIGHT TO BUY) | \$ 31.77 | 02/26/2015 | | М | | 2,110 | 03/02/2011 | 03/02/2020 | COMMON STOCK | 2,110 |
| OPTIONS (RIGHT TO BUY) | \$ 40.89 | 02/26/2015 | | М | | 2,000 | 02/22/2012 | 02/22/2021 | COMMON STOCK | 2,000 |

Reporting Owners

| Reporting Owner Name / Addres | s Relationships | | | | | | |
|---|-----------------|-----------|----------------------------|-------|--|--|--|
| 1 | Director | 10% Owner | Officer | Other | | | |
| SALLIOTTE DANIEL J 1925 WEST FIELD COURT SUITE 200 LAKE FOREST, IL 60045 | | | SVP-Mergers/Acq & Treasury | | | | |
| Signatures | | | | | | | |
| DANIEL J. SALLIOTTE | 03/02/2015 | 5 | | | | | |

**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.