

IDEX CORP /DE/
Form 4
April 04, 2011

FORM 4

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

OMB APPROVAL

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

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

(Print or Type Responses)

1. Name and Address of Reporting Person \*
HERMANCE FRANK S

(Last) (First) (Middle) (Street) (City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
IDEX CORP /DE/ [IEX]

3. Date of Earliest Transaction
(Month/Day/Year)
04/01/2011

4. If Amendment, Date Original
Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

X Director 10% Owner
Officer (give title below) Other (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line)

X Form filed by One Reporting Person
Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Table with 7 columns: 1. Title of Security, 2. Transaction Date, 2A. Deemed Execution Date, if any, 3. Transaction Code, 4. Securities Acquired (A) or Disposed of (D), 5. Amount of Securities Beneficially Owned, 6. Ownership Form: Direct (D) or Indirect (I), 7. Nature of Beneficial Ownership.

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.

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(9-02)

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

Table with 7 columns: 1. Title of Derivative Security, 2. Conversion or Exercise Price of, 3. Transaction Date, 3A. Deemed Execution Date, if any, 4. Transaction Code, 5. Transaction Number or Derivative, 6. Date Exercisable and Expiration Date, 7. Title and Amount of Underlying Securities.

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| Derivative Security                 |            | Date       | Code | Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) |            | Date Exercisable | Expiration Date | Title        | Amount or Number of Shares |
|-------------------------------------|------------|------------|------|---|------------|------------------|-----------------|--------------|----------------------------|
|                                     |            |            |      | (A)   | (D)        |                  |                 |              |                            |
| DEFERRED COMPENSATION UNITS (DCU'S) | <u>(1)</u> | 04/01/2011 | A    | 40  | <u>(1)</u> | <u>(1)</u>       |                 | COMMON STOCK | 40                         |

### Reporting Owners

| Reporting Owner Name / Address | Relationships |           |         |       |
|--------------------------------|---------------|-----------|---------|-------|
|                                | Director      | 10% Owner | Officer | Other |
| HERMANCE FRANK S               |               |           | X       |       |

### Signatures

|                                 |            |
|---------------------------------|------------|
| FRANK S.<br>HERMANCE            | 04/04/2011 |
| **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).
- (1) CREDITS FOR DIVIDENDS ON DCU BALANCE AND DEFERRED CASH COMPENSATION UNDER THE SECOND AMENDED AND RESTATED IDEX CORPORATION DIRECTORS DEFERRED COMPENSATION PLAN AT A PRICE PER DCU OF \$39.66. EACH DCU IS EXCHANGEABLE FOR SHARES OF IDEX CORPORATION COMMON STOCK ON A ONE-FOR-ONE BASIS FIVE YEARS AFTER THE YEAR FOR WHICH COMPENSATION IS DEFERRED.

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.