FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, [D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response	0.5							

Instruc	etion 1(b).			Filed	pursuan or Sec	t to Stion 3	ection 16(a) of the In	of the Se vestmer	ecuritient Com	es Exchang npany Act o	je Ad of 19	ct of 19 940	34		Indus	perio	Соронос.	0.5
1. Name and Address of Reporting Person* <u>Christenson Carl R</u>					2. Issuer Name and Ticker or Trading Symbol IDEX CORP /DE/ [IEX]								(Ch	elationshi eck all app X Direc	olicable)	ng Pe	erson(s) to Is	
	ast) (First) (Middle) 100 SANDERS ROAD UITE 301						3. Date of Earliest Transaction (Month/Day/Year) 05/06/2022 4. If Amendment, Date of Original Filed (Month/Day/Year)							Officer (give title Other (sp below) 6. Individual or Joint/Group Filing (Check App				
(Street) NORTHBROOK IL 60062										Line	Form	Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(St	ate) (Z	Zip)															
		Table	I - Nor	n-Deriva	tive S	ecui	rities Acq	uired,	Disp	osed of	, oı	r Ben	eficia	lly Own	ed			
Date			2. Transa Date (Month/D	Execution Date,			3. Transaction Code (Instr. b) 8)					nnd Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) or (D)		Price	Transa	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
COMMC	N STOCK			05/06/	2022			A		825		A	\$0	3	3,341 D		D	
		Tal					ies Acqui varrants,							/ Owne	d			
1. Title of Derivative Security (Instr. 3)	of 2. 3. Transaction 3A. Deemed Execution Date, or Exercise (Month/Day/Year) if any		4. Transac Code (Ir 8)		of	Expiration Date (Month/Day/Ye lecturities			sable and 7. Title and Amount of			3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

Carl Christenson

Title

05/10/2022

** Signature of Reporting Person Date

Amount Number

of Shares

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

- * 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).

Code

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

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 Number.

(A) (D) Date Exercisable

Expiration Date