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MILZCIK GRE	EGORY F										
Form 4/A											
March 03, 2010)										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
Washington, D.C. 20549								OMMISSION	OMB Number:	3235-0287	
Check this b if no longer	Check this box								Expires:	January 31,	
subject to	STAT	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							Estimated a	2005 verage	
Section 16.		SECURITIES							burden hours per		
Form 4 or Form 5	F '1 1		0 100		· · ·	г	1	A (C1024	response	0.5	
obligations		-					-	e Act of 1934,			
may continu	le.		h) of the Inve	•	• •			1935 or Section	1		
See Instructi 1(b).	on	50(1	ii) of the live		ompany	Act	JI 194	0			
1(0).											
(Print or Type Res	ponses)										
1. Name and Address of Reporting Person [*] 2. Issuer Name and Ticker or Trading 5. Relationship							5. Relationship of	Reporting Pers	on(s) to		
MILZCIK GR	Symbol					Issuer					
			IDEX CO	RP /DE/	[IEX]			(Chec)	all applicable)	
(Last)	(First) (Middle)		3. Date of Earliest Transaction					(Check all applicable)			
			(Month/Day	/Year)				_X_ Director	10%	Owner	
			02/23/201	0				Officer (give below)	title Othe below)	er (specify	
	(Streat)		4 10 4 1		0			,	,	(61 1	
	(Street)		4. If Amend		Original			6. Individual or Jo	int/Group Filin	g(Check	
				Filed(Month/Day/Year) 02/25/2010				Applicable Line) _X_ Form filed by One Reporting Person			
			02/20/201	0				Form filed by M			
								Person			
(City)	(State)	(Zip)	Table I	- Non-Der	ivative Se	curiti	es Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transactio	on Date 2A.	Deemed	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day		cution Date, if	· · · ·				Securities	Form: Direct		
(Instr. 3)		any (Mo	CodeDisposed of (D)th/Day/Year)(Instr. 8)(Instr. 3, 4 and 5)				Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(MO	intil/Day/Tear)	(Insu. 0)	(111501. 5,	+ anu	5)	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s)			
				Code V		(D)	Price	(Instr. 3 and 4)			
COMMON	02/23/201	0		А	1,220	А	\$0	2,910 (1)	D		
STOCK	02/20/201	Č.			(1)		ψŪ	_,/ 10	-		

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)

1. Title of 3. Transaction Date 3A. Deemed 5. Number 6. Date Exercisable and 7. Title and Amount of 2. 4. Derivative Conversion (Month/Day/Year) Execution Date, if Transaction of Derivative Expiration Date **Underlying Securities** Security or Exercise any Code Securities (Month/Day/Year) (Instr. 3 and 4) (Instr. 3) Price of (Month/Day/Year) (Instr. 8) Acquired Derivative (A) or Security Disposed of (D) (Instr. 3, 4, and 5) Code V (A) (D) Date Expiration Title Amour Exercisable Date or Numbe of Shares **OPTIONS** 4.080 4,080 COMMON 02/23/2011 02/23/2020 (RIGHT \$ 30.82 02/23/2010 A (1) STOCK (1)TO BUY)

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Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
MILZCIK GREGORY F	Х					
Cianaturaa						

Signatures

GREGORY F. MILZCIK	03/03/2010			
<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).

This amendment is being filed to correct the number of securities and derivative securities acquired on February 23, 2010 as well as the amount of securities and derivative securities beneficially owned following the transactions on February 23, 2010, as originally reported

(1) another of securities and derivative securities beneficiarly owned following the transactions on February 25, 2010, as originally reported on such original filing remain unchanged.

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.