FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT OF CHANGES IN BENEFICIAL OWNERSH | IP |
|--|----|

| OMB APPROVAL | | | | | | | | | |
|---------------------|----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-028 | | | | | | | | |
| Estimated average b | ourden | | | | | | | | |

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

hours per response: 0.5

| | | | | | or S | Section | on 30(h) | of the I | nvestmer | it Con | npany Act | of 194 | 0 | | | | | | | | |
|--|--|--------|------------------|---|---------|---|---------------------------|-----------------------|---|----------|--|--|-------------|---|---|---|---|--|--|------------|--|
| 1. Name and Address of Reporting Person* FORT JOHN F III | | | | | | 2. Issuer Name and Ticker or Trading Symbol ROPER INDUSTRIES INC [ROP] | | | | | | | | | heck al | | o of Reportin licable) tor | ng Perso | on(s) to Is | | |
| (Last) (First) (Middle) C/O ROPER INDUSTRIES, INC. 6901 PROFESSIONAL PARKWAY EAST, SUITE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/04/2009 | | | | | | | | | | Office below | er (give title v) | | Other below) | (specify | |
| 200 | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) SARASC | OTA FL | . 3 | 34240 | | | | | | | | | | | | | | n filed by One n filed by Mo on | | • | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Nor | -Deriv | ative | Se | curitie | s Ac | quired, | Dis | osed o | f, or | Bene | eficia | lly O | wne | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | Executi | | | Transaction Dis | | Disposed | . Securities Acquired (A) Disposed Of (D) (Instr. 3,) | | | id Se Be | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | | A) or D) | Price | Tr | Transaction(s) (Instr. 3 and 4) | | | | (11311. 4) | |
| Common | ommon Stock ⁽¹⁾ 06/04 | | | | 1/2009 | 2009 | | A | | 4,000 A | | \$ <mark>0</mark> . | 00 | 35,200 | | | D | | | | |
| Common | Common Stock | | | | | | | | | | | | | | 2,700 | | | I | By Spouse ⁽²⁾ | | |
| | | Та | ble II - D | | | | | | | | sed of, onvertib | | | | / Owr | ned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | ative Conversion Date Execution Date ity or Exercise (Month/Day/Year) if any | | Date, y/Year) | 4. Transaction Code (Instr. 8) | | of Deriv Secu Acqu (A) o Disp | r osed) r. 3, 4 | Expiratio (Month/D | Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amount or Numbe of Title Shares | | 8. Price Derivat Securit (Instr. 5 | tive | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ow Fo Dir or (I) | vnership rm: ect (D) Indirect (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

1. The securities reported are restricted stock units granted to the reporting person, pursuant to the Director Compensation Plan, and each restricted stock unit represents a contingent right to receive one share of Roper Industries, Inc. common stock. The restricted stock units vest 50% on the 6-month anniversary of the grant date and 50% on the day prior to the 2010 Annual Meeting of Shareholders.

2. Reporting person disclaims beneficial ownership of all such shares.

Remarks:

John F. Fort III by Paul J. Soni, his attorney-in-fact, pursuant to 06/08/2009 Power of Attorney dated August 11, 2004.

** Signature of Reporting Person Date

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).

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.