FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

OMB APPROVAL									
OMB Number:	3235-0287								

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

intended to satisfy the affirmative

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB AP	PROVAL
OMB Number:	3235-0287
Estimated average	ge burden
hours per respon	ise: 0.5

	e conditions of ee Instruction																
Name and Address of Reporting Person* Conley Jason			2. Issuer Name and Ticker or Trading Symbol ROPER TECHNOLOGIES INC [ROP]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify below) EVP, Chief Financial Officer							
(Last) (First) (Middle) C/O ROPER TECHNOLOGIES, INC. 6496 UNIVERSITY PARKWAY				3. Date of Earliest Transaction (Month/Day/Year) 11/04/2024													
(Street) SARASOTA FL 34240 (City) (State) (Zip)				4. If	Amendi	ment, Date	e of Orig	ginal F	iled (Month/D	ay/Year			n filed by 0	one Re	ng (Check porting Pe an One Re	rson	
		Table	I - N	Ion-Deriva	ative	Secur	rities Ac	quire	ed, D	isposed o	f, or E	Benefic	ially Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)				Benefici Owned F	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3	ion(s)			(Instr. 4)
Common	Stock			11/04/20	24			F		2,163	D	\$540.9	31,	522		D	
Common Stock											1	73			401(k) Ownersh		
		Та	ble I							posed of, , converti				d			
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security		ersion Date (Month/Day/Year) Exec of (Month/Day/Year) (Mor				ransaction of ode (Instr. Derivative		Expi (Moi	Expiration Date (Month/Day/Year)			e and unt of rities rlying ative rity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securiti Benefici Owned Followir Reporte Transac (Instr. 4)	ve es ially ng d tion(s)	10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Benefi Owner t (Instr.
ı						\Box						Amount					

Explanation of Responses:

/s/ John K. Stipancich, Attorney-in-fact

or Number

11/06/2024

** Signature of Reporting Person Date

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

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.

 $^{^{\}star}$ 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).