FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| STATEMENT | OF CHANGE | S IN BENEFI | CIAL OWN | ERSHIP |
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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).

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

| 1. Name and Address of Reporting Person* <u>Humphrey John</u> | | | | 2. Issuer Name and Ticker or Trading Symbol ROPER INDUSTRIES INC [ROP] | | | | | | | | | Check | all app | licable) | | Owner | | |
|--|--|--------|---|--|--|---|--|--------|---|-----|--|--|---|--|---|---------------------------------------|---|---|--|
| (Last) (First) (Middle) C/O ROPER INDUSTRIES, INC. 6901 PROFESSIONAL PARKWAY EAST, SUITE | | ЛТЕ | 3. Date of Earliest Transaction (Month/Day/Year) 03/13/2014 | | | | | | | | | | X Officer (give title Other (specify below) EVP, Chief Financial Officer | | | | v) . | | |
| (Street) | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | |
| SARASC | OTA FL | . 3 | 34240 | | | | | | | | | Form filed by More than One Reporting Person | | | | | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | | | | | | | |
| | | Tabl | e I - Nor | n-Deriv | ative | Se | curitie | s Acc | quired, | Dis | posed o | f, or | r Bene | eficia | ally (| Owne | d | | |
| Date | | | Date | th/Day/Year) if a | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (| Transaction Disposed Code (Instr. 5) | | ties Acquired (A) d Of (D) (Instr. 3, 4 | | | 4 and Secur Bene Owne | | cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | v | Amount | | (A) or (D) | Price | . 1 | Reported Transaction(s) (Instr. 3 and 4) | | | (111511.4) | | |
| Common Stock | | | 03/13/2014 | | | | G | | 325 | | D | D \$0.00 | | 115,336 | | D | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | Derivative Conversion Date Execution or Exercise (Month/Day/Year) if any | | Date, Transaction Code (Instr. | | n of l | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | 8. Pri Deriv Secu (Instr | vative dirity S r. 5) B O Fi R | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | or Nun of | ount nber res | | | | | |

Explanation of Responses:

Remarks:

John Humphrey, by Paul J. Soni, his attorney-in-fact, pursuant to Power of Attorney dated April 25, 2006.

04/04/2014

Date

** Signature of Reporting Person

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

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).