Instruction 1(b)

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
-------------	------	-------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

Name and Address of Reporting Person* Savi Lyce						2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Savi Luca					- 1									X Direct		r		10% Ov	vner
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)					$\overline{}$	X	Officer below)	(give title		Other (s below)	pecify		
C/O ITT INC. 1133 WESTCHESTER AVENUE					09	09/09/2021							President and CEO						
C/O 111 ING. 1133 WESTGILSTER IN ENGL																			
(Street)					_ 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
WHITE PLAINS NY 10604													X	X Form filed by One Reporting Person					
(City)	(S	tate)	(Zip)		-										Form filed by More than One Reporting Person				ting
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y				Execution Date,		3. Transaction Code (Instr. 8)					5. Amount of Securities Beneficially Owned Followin Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) or (D)	Price		Transac (Instr. 3	ction(s)			(Instr. 4)	
Common Stock 09/09/20			2021	21		M		13,295	A	\$22.8	114,		1,623		D				
Common	Common Stock 09/09/20			2021	21		S		8,630(1)	D	\$91.980	.9802 ⁽²⁾		105,993		D			
		7	Table I	II - Deriv	ative	Secu	ıritie	es Ac	quire	d, Dis	sposed of,	or Be	neficially	y O	wned				
				(e.g.,	puts,	calls	s, Wa	arrant	s, op	tions	, converti	ble sec	curities)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)		ransaction of ode (Instr. Derivative				6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and A of Securities Underlying Derivative St (Instr. 3 and				De Se	B. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
					Code	ode V (A) (D)				Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

\$22.8

1. Exercise of reporting person's stock options that would otherwise expire on March 8, 2022, of which shares were sold to pay the exercise price, to cover withholding taxes, and to pay broker fees and commissions, pursuant to a broker-assisted sell to cover, and hold net shares.

13,295

2. This price represents the approximate weighted average price per share of sales of common stock of ITT Inc. (the "Issuer"), which were executed at prices ranging from \$91.8735 to \$92.1333 per share. The reporting person undertakes to provide, upon request by the Securities and Exchange Commission staff, the Issuer or a security holder of the Issuer, full information regarding the number of shares sold at each price.

03/08/2015

Remarks:

Employee Stock

(Right to Buy)

> /s/ Mary Elizabeth Gustafsson, Secretary of ITT Inc., by Power 09/10/2021 of Attorney for Luca Savi

** Signature of Reporting Person Date

Commor

03/08/2022

13,295

\$0.00

0

D

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).

09/09/2021

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

M

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.