FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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Check this box if no longer subject
o Section 16. Form 4 or Form 5
bligations may continue. See
netruction 1(h)

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

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

Name and Address of Reporting Person*     Caprais Emmanuel					2. Issuer Name <b>and</b> Ticker or Trading Symbol ITT INC. [ ITT ]									5. Relationship of Reporting (Check all applicable)  Director  Officer (give title				10% O\	wner	
(Last)	•	irst) (f	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 10/02/2023									X	below	<i>I</i> )	Other (specification) below) inancial Officer		·	
100 WASHINGTON BOULEVARD						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) STAMF(	ORD C	Γ 0	6902											X	Form filed by One Reporting Person  Form filed by More than One Reporting  Person					
(City)	(S	tate) (2	Zip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to								suant to							
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day				ion 2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)			ired (A)	5. Amount of Securities Beneficially Owned Follo		unt of ies cially Following	Forn (D) c	m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) o (D)	or Pric			ed ection(s) 3 and 4)			(Instr. 4)	
Common Stock 10/02/20					023			F		1,397(1)	D	\$9	7.12	20,589			D			
Common Stock														1,089.3302(2)			I	by 401(k) plan		
	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)  2. Conversion Date Date (Month/Day/Year)  (Month/Day/Year)  3. Transaction Date Execution Date, if any (Month/Day/Year)			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Sei (In:	erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amoun or Numbe of Shares	r						

## **Explanation of Responses:**

1. Reflects the withholding of shares of common stock to pay the tax liability incident to the vesting on October 2, 2023 of restricted stock units granted under the Plan. The number of shares withheld was determined on October 2, 2023 based on the average of the high/low price of the issuer's common stock on October 2, 2023.

2. As of October 2, 2023.

## Remarks:

s/ Tymour Okasha, Assistant Secretary for ITT Inc.; by Power of Attorney for

10/04/2023

**Emmanuel Caprais** 

\*\* Signature of Reporting Person

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.