FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIA	L OWNERSHIP

l	OMB APPRO	VAL
l	OMB Number:	3235-0287
l	Estimated average burde	en
l	hours per response:	0.5

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*  FOLEY DONALD E  (Last) (First) (Middle)  4 WEST RED OAK LANE					2. Issuer Name and Ticker or Trading Symbol  ITT CORP [ ITT ]  3. Date of Earliest Transaction (Month/Day/Year)  01/18/2007									Director Officer below)	cable) or (give title	-	on(s) to Issuer  10% Owner Other (specify below) sident	
(Street)	PLAINS N						endme	nt, Date o	of Original	Filed	(Month/Da	Lin	ndividual or Joint/Group Filing (Check Applicable e)  X Form filed by One Reporting Person Form filed by More than One Reporting Person					
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ear) i	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		of, or Beneficial ties Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amou Securitie Benefici Owned F	5. Amount of Securities Beneficially Owned Following		irect direct 4)	7. Nature of Indirect Beneficial Ownership		
									v	Amount	(A) o (D)	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Common Stock			01/1	8/200	7			М		36,00	0 A \$12		14 69	69,042				
Common Stock			01/1	18/2007				S		1,600	D	\$59.0	01 67	,442	D			
Common Stock			01/1	1/18/2007				S		8,000	D	\$59.0	3 59	,442	D			
Common Stock			01/1	18/2007				S		22,20	0 D	\$59	37	,242	D			
Common Stock			01/1	9/2007				S		4,200	D	\$59	33,0	33,042(1)				
Common Stock													2,530	2,530.2473			401K Plan <sup>(2)</sup>	
		-	Гable II -								osed of, convertil			Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/\)	d 4. Date, Transactio Code (Inst			5. Number of		6. Date Exercisa Expiration Date (Month/Day/Yea		9	of Securi	g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e Ov S Fo Di or (I)	vnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (Right to Buy)	\$12.44	01/18/2007			M			36,000	(3)		03/12/2007	Common Stock	36,000	\$0.00	0		D	

## **Explanation of Responses:**

- 1. Includes 18,197 shares acquired through the Direct, Purchase Sale and Dividend Reinvestment Plan reflecting accumulations through 1/18/2007. Mr. Foley also owns 14,845 shares of Restricted Stock awarded through the 1994 ITT Incentive Stock Plan or the ITT 2003 Equity Incentive Plan.
- 2. As of January 17, 2007
- 3. Options granted under the 1994 ITT Incentive Stock Plan. Options vested and exercisable upon the earlier of 25% appreciation in the option exercise price or in one-third cumulative annual installments after the first, second and third anniversaries of the date of grant. Options under this award became fully exercisable on 9/12/1997.

## Remarks:

/s/Kathleen S. Stolar, Secretary 01/19/2007 of ITT Corporation, by power of attorney for Donald E. Foley

\*\* 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.