FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|------------------|-------------------|---------------|------------------|

| OMB APPRO | DVAL |
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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* DARNIS GERAUD | | | | | 2. Issuer Name and Ticker or Trading Symbol ITT Corp [ITT] | | | | | | | (Check all a | | | Person(s) to Issuer 10% Owner | | | |
|--|---|-------------------------------|-----------------|-----------------|---|--|---------------|---------------------------------|--|--------------------|---|-------------------------|--|---|---|---|--|---------------|
| (Last) (First) (Middle) C/O ITT CORP. 1133 WESTCHESTER AVENUE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/02/2015 | | | | | | | | | Offic below | er (give title w) | Other below | (specify) |
| (Street) WHITE PLAINS NY 10604 (City) (State) (Zip) | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye | | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar | | | | nd 5) Secu Bene | | ficially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | Ī | Code | v | Amount | (A) or (D) | Price | | Trans | action(s) 3 and 4) | | (Instr. 4) | |
| Common Stock 11/02/201 | | | | | 015 | 5 | | P | | 9,000 | A | \$38.70 |)77 ⁽¹⁾ | | 10,646 | D | | |
| Common Stock 11/02/201 | | | | | 015 | 15 | | P | | 1,000 | A | \$39. | 923 | - | 11,646 | 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) | 2. Conversion or Exercise Price of Derivative Security | Date E (Month/Day/Year) if | Execu if any | | | action (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | ative rities ired osed | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | Deriv Secu (Inst | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | Code | v | (A) | (D) | Date Exerc | cisable | Expiration Date | Title | of Shares | | | | | | | |

Explanation of Responses:

1. This price represents the approximate weighted average price per share of purchases of common stock of ITT Corporation that were executed at prices ranging from \$38.685 to \$38.72 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.

Remarks:

/s/ Lori B. Marino, Secretary of ITT Corporation, by Power of 11/03/2015 Attorney for Geraud Darnis

** 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.