FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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

1. Name and Address of Reporting Person* FOLEY DONALD E						2. Issuer Name and Ticker or Trading Symbol ITT INDUSTRIES INC [ITT]								neck all appli Direct	cable) or	10% O		ner
(Last) 4 WEST	Last) (First) (Middle) WEST RED OAK LANE					3. Date of Earliest Transaction (Month/Day/Year) 03/06/2006								^ below	'	Other (specify below) ce President		ресіту
(Street) WHITE PLAINS NY 10604 (City) (State) (Zip)					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - Nor	n-Deri	vativ	e Se	curities	s Ac	quired,	Dis	oosed o	of, or Be	neficia	ly Owned	ŀ			
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date						ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction D Code (Instr. 5		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			Benefic	es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) o (D)	r Price	Transac (Instr. 3	tion(s)		[Instr. 4)
Common Stock ⁽¹⁾ 03/06/						2006			A		2,845	5 A \$		0 32,79	2,793.48 ⁽²⁾		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	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	4. Transa Code (8)		of		6. Date Exercisal Expiration Date (Month/Day/Year		of Securities		ties ig e Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (Right to	\$52.68	03/06/2006			A		10,033		03/06/200	9 0	3/06/2013	Common Stock	10,033	\$0.00	10,03	3	D	

Explanation of Responses:

- 1. All securities beneficially owned prior to February 21, 2006, the distribution date for the 2-for-1 common stock split, are adjusted and reflect the post split amount.
- 2. Includes 17,948.48 shares acquired through the Direct Purchase Sale and Dividend Reinvestment Plan reflecting accumulations through 2/28/06 and 14,845 shares of restricted stock, of which 2,845 shares were awarded on March 6, 2006 under the ITT Industries, Inc. 2003 Equity Incentive Plan. The 2,845 shares awarded on March 6, 2006 are subject to a three-year restriction. The reporting person also owns 2626.6217 shares acquired under the ITT Investment and Savings Plan reflecting accumulations through 2/28/06. These shares are held indirectly in a trust.
- 3. Options awarded under the ITT Industries, Inc. 2003 Equity Incentive Plan.

Remarks:

/s/Kathleen S. Stolar, Secretary of ITT Industries, Inc. by 03/08/2006 power of attorney for Donald E <u>Foley</u>

** 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.