CIT GROUP INC Form 4

October 24, 2013

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB 3235-0287 Number:

OMB APPROVAL

Expires:

January 31, 2005

0.5

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response...

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person ** ROSENFELD GERALD | | | 2. Issuer Name and Ticker or Trading Symbol CIT GROUP INC [CIT] | | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
|---|---|---------|---|--------------------------------------|-----|---|---|------------|--|--|---------|--|
| | | | | | | | | | (Check all applicable) | | | |
| (Last) | (First) (I | Middle) | 3. Date of | Earliest 7 | Γra | insaction | | | | | | |
| | | | (Month/Day/Year) | | | | | | _X_ Director | | Owner | |
| C/O CIT GROUP INC., 1 CIT DRIVE, #3251-9 | | | 10/23/2013 | | | | | | Officer (give below) | r (specify | | |
| (Street) | | | 4. If Amendment, Date Original | | | | | | 6. Individual or Joint/Group Filing(Check | | | |
| | Filed(Month/Day/Year) | | | | | | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | | | |
| LIVINGST | ON, NJ 07039 | | | | | | | | Person | fore than One Rej | porting | |
| (City) | (State) | (Zip) | Table | e I - Non- | D | erivative Se | curitie | es Acqu | ired, Disposed of | , or Beneficiall | y Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | Date, if | 3. Transact Code (Instr. 8) | • | 4. Securities (A) or Disp (Instr. 3, 4 a) | osed o | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common Stock | 10/23/2013 | | | A(1) | | 612.245 | A | <u>(2)</u> | 8,348.688 | D | | |

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) | | ate | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|---|-------|---|---|
| | | | Code V | (Instr. 3, 4, and 5) (A) (D) | Date Exercisable | Expiration Date | or Title Nu of | umber | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|---------|-------|--|--|--|
| • 0 | Director | 10% Owner | Officer | Other | | | |
| ROSENFELD GERALD C/O CIT GROUP INC. 1 CIT DRIVE, #3251-9 LIVINGSTON, NJ 07039 | X | | | | | | |

Signatures

/s/ James P. Shanahan, attorney-in-fact for Mr. Rosenfeld

10/24/2013

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) Restricted stock is scheduled to vest 100% on the first anniversary of the date of grant.
- (2) Filer elected to receive restricted stock units in lieu of cash compensation.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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