

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

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

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 * | | | | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---|----------|-------------------|---|---------------------------------|---|----------------------------|-------------------|-------|---|--------------|---|---|---|------------------------------------|--|--|--|
| SMITH ALBE | CRT E | | | CUI | RTISS V | VRIGE | IT | COF | RP | [CV | V] | | | | | | | |
| (Last) (First) (Middle) | | | 3. Da | 3. Date of Earliest Transaction (MM/DD/YYYY) | | | | | | | | X Director 10% Owner | | | | | | |
| | | | | | | | | | | | | Officer (give | title below |) | Other (specif | y below) | | |
| 10 WATERVIEW BOULEVARD | | | | | 1/6/2014 | | | | | | | | | | | | | |
| | (Street) | | | 4. If A | Amendme | nt, Date | Or | riginal I | ilec | d (MM | /DD/Y | YYYY) 6. Individual o | r Joint/G | roup Filing | g (Check Ap | plicable | | |
| PARSIPPANY | . NJ 079 | 60 | | | | | | | | | | | | | | | | |
| (City) (State) (Zip) | | | | | | | | | | | | _ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| , ,,, | | | · | | | | | | | | | I offit fried by I | viore than o | nie Reporting | 1 CISON | | | |
| | | Ta | ble I - No | n-Deriva | tive Secu | rities Ac | qu | iired, I |)isp | osed | of, o | or Beneficially Own | ed | | | | | |
| 1.Title of Security (Instr. 3) | | | 2. Trans. Date | 2A. Deemed Execution Date, if any | 3. Trans. Code (Instr. 8) | e or Disposed of (D) (Instr. 8) (Instr. 3, 4 and 5) (Instr. 4) (Instr. 5) | | | | amount of Securities Beneficially Owned lowing Reported Transaction(s) tr. 3 and 4) | | | | | | | | |
| Common Stock | | | | 1/6/2014 | | A | T | 37 (1) | A | \$60.9 | 7 (2) | \$1595 | 0.01 | | D | | | |
| | Table II | - Deriva | tive Secu | rities Ben | eficially (| Owned (| e., | g. , put | s, ca | alls, v | varr | ants, options, conve | rtible se | curities) | | | | |
| 1. Title of Derivate Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | Date | Deemed | 4. Trans. Code (Instr. 8) | le Derivative | | and Expiration Date Securi | | | | Secu Deri | tle and Amount of rities Underlying vative Security r. 3 and 4) | (Instr. 5) | of derivative Securities Beneficially Owned | Ownership Form of Derivative | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | Code V | (A) | (D) | | ate xercisable | | iration e | Title | Amount or Number of Shares | | Reported Transaction (s) (Instr. 4) | (I) (Instr. 4) | | | |

Explanation of Responses:

- (1) Shares were acquired through the Corporation's 2005 Stock Plan for Non-employee Directors whereby non-employee directors may elect to defer their compensation and/or receive their annual retainer and meeting fees in the form of stock at a later date.
- (2) Price is based on the closing market price for the securities on the New York Stock Exchange as of January 2, 2014.

Reporting Owners

| Reporting Owners | | | | | | | | |
|--|---------------|-----|-------|---------|-------|--|--|--|
| Banastina Ovinas Nama / Address | Relationships | | | | | | | |
| Reporting Owner Name / Address | Director | 10% | Owner | Officer | Other | | | |
| SMITH ALBERT E 10 WATERVIEW BOULEVARD | X | | | | | | | |
| PARSIPPANY, NJ 07960 | | | | | | | | |

Signatures

/s/ Paul J. Ferdenzi by power of attorney

** 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 control number.