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
bligations may continue. See
nstruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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* SCHJERVEN ROBERT E						2. Issuer Name and Ticker or Trading Symbol LENNOX INTERNATIONAL INC [LII]									(Chec	k all applica Director	•		on(s) to Issu 10% Ow Other (s	ner
(Last) (First) (Middle) 2140 LAKE PARK BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 02/26/2007									X	below) `	ief Exec	utive	below)	poony
(Street) RICHARDSON TX 75080					_ 4. _										6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(5	State)	(Zip)												<u> </u>					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)					nsactio	on	2A. Deemed Execution Date, if any (Month/Day/Year)			II red, 3. Transac Code (II 8)	ction	4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			or 5. Amour Securities Beneficia Owned Fo		s lly ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									9	Code	v	Amount	(A) or (D)	P	rice	Reported Transaction (Instr. 3 and	on(s)			(Instr. 4)
Common Stock, par value \$0.01 per share					02/26/2007							117,870	76 A \$8		8.1875	978,011			D	
Common Stock, par value \$0.01 per share 0.					26/20	07				S		92,576	'6 D \$		\$35.5	885,435			D	
Common Stock, par value \$0.01 per share 02/2					26/20	07				S		13,500	D \$3		35.51	871,935		D		
Common Stock, par value \$0.01 per share 02/26/					26/20	07				S		200	D	\$	35.519	871,735		D		
Common Stock, par value \$0.01 per share 02/26/					26/20	07				S		800	D	\$	\$35.53	870,	,935		D	
Common Stock, par value \$0.01 per share 02/26/					26/20	07				S		10,800 D		1	35.52	860,135		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. Deemed Execution Da if any (Month/Day/	_	4. Transa Code (8)		Deri Seci Acq or D of (E	umber of vative urities uired (A) isposed D) (Instr. and 5)	Exp	Date Expiration onth/Da	Date		of Securi Underlyii Derivativ	7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	le V	(A)	(D)	Date Exe	te ercisabl		Expiration Date	Title	or Nu	ount mber Shares	(Instr. 4		(J)		
Non- Qualified Stock Option	\$8.1875	02/26/2007			M			117,876	12/1	13/2001	L(1)	12/13/2007	Common Stock, par value \$0.01 per		7,876	\$0	102,3	89	D	

Explanation of Responses:

1. The option becomes exercisable in three equal installments, commencing one year after the date of grant.

Remarks:

Attorney-in-fact pursuant to the power of attorney dated April 23, 2004.

William F. Stoll, Jr. for Robert E. Schjerven

02/27/2007

** 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.