FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	OMB APPROVAL								
l	OMB Number:	3235-0287								
	Estimated average burde	en								
	hours per response:	0.5								

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*  ASHENHURST HARRY J						2. Issuer Name and Ticker or Trading Symbol LENNOX INTERNATIONAL INC [ LII ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
ASHE	MILONS	I HARRI J													Director			10% Ow	
					-						- ""			X		(give title		Other (s	pecify
(Last)		First)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year)									below)			below)	
21/0 T A	KE DARK	BOULEVARD			111	11/29/2004									Chie	f Adminis	strati	ve Officer	
2140 L/1	IXL IIIXI	DOOLL VIIID																	
(Street)		- 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)							
RICHARDSON TX 75080														X					
MCHAI	(D3OI)	IA	73000											21	Form filed by More than One Reporting				
					-										Person		e unan	One Repon	iriy
(City)	(	State)	(Zip)											1 0.00.1					
		Ta	able I - No	n-Deri	ivativ	e Se	curi	ties Ac	auired	Dis	posed of	f. or Ber	nefici	ially	Owned				
				_					<del>-</del>		·	-						[.	
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						ay/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. ) 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			5. Amour Securitie Beneficia Owned F	s ally	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price	e	Reported Transact (Instr. 3 a	ion(s)			Instr. 4)
Common	Stock, pa	r value \$0.01 pe	9/200	2004		М		20,000	A	\$8.3	1875	268	,495		D				
Common Stock, par value \$0.01 per share 11/29/							2004		S		19,200	D	\$	18	249	249,295		D	
Common Stock, par value \$0.01 per share 11/29/							2004		S		800 D		\$18	8.07	248,495			D	
			Table II								osed of,				wned				
				(e.g.,	puts,	, cal	s, w	arrants	, optio	ns, c	convertib	le secu	rities	s)					
1. Title of	2.	3. Transaction	3A. Deeme	hd	4.		5. N	umber	6. Date Ex	ercis	able and	7. Title an	d Amoi	unt 8	. Price of	9. Number	r of	10.	11. Nature
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date	Execution	Date,	Transaction Code (Instr. 8)		n of		Expiration Date (Month/Day/Yea		•	of Securities Underlying Derivative Sec (Instr. 3 and 4)		5	Derivative Security (Instr. 5)	derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)
													Amou	unt					
													or Numb	ber					
						l	l	l l	Date		Expiration		of						
					Code	٧	(A)	(D)	Exercisal	пе	Date	Title	Share	es					
Non- Qualified Stock Option (right to buy)	\$8.1875	11/29/2004			M			20,000	12/13/200	0 <sup>(1)</sup>	12/13/2007	Common Stock	20,0	000	\$8.1875	40,773	3	D	

## **Explanation of Responses:**

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

## Remarks

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

/s/ William F. Stoll, Jr.,
Attorney-in-fact for Harry J.
Ashenhurst

\*\* Signature of Reporting Person Date

12/01/2004

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

- $^{\star}$  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.