FORM 5

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

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ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burden								

_ ` `	Holdings Report																	
X Form 4	Transactions R	teported.	d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940															
	d Address of F	Reporting Person* W III	2. Issuer Name and Ticker or Trading Symbol LENNOX INTERNATIONAL INC [LII]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
(Last) 2140 LA	(Fir: KE PARK E	,		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2016)	Officer (give title Other (specify below) below)						
(Street)	DSON TX	4. If Amen	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting							
(City)	(Sta											Perso		ore tric	TOTIC TRO	Jording		
		Tabl	e I - Non-Deriv	ative Sec	uritie	s Ac	quire	ed, Di	sposed	of, o	r Ben	nefici	ially	Owne	d			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Yea	ate,	3. Transaction Code (Instr.	ction	4. Securities Acquir Of (D) (Instr. 3, 4 and		uired (A					6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				(Montalibay/Tear)		3,		Amour	nt	(A) or (D)	A) or Price		Issuer's Fiscal Year (Instr. 3 and 4)					iscal
Common Stock, Par Value \$0.01 Per Share			12/31/2016		J4		12	,225	D	\$0		0)	I		.w. Norris rust	
Common Stock, Par Value \$0.01 Per Share			12/31/2016			J4		12	,225	A	\$0			28,372		I		.W. Norris evocable rust
Common Stock, Par Value \$0.01 Per Share			12/31/2016			J4		12	,225	A	\$0			21,992		I F		V.H. Norris evocable rust
Common Stock, Par Value \$0.01 Per Share			12/31/2016			J4		12	,225	D	D \$0			0]		V.h. Norris rust
Common Stock, Par Value \$0.01 Per Share														16,838				atherine Ioulihan- pouse ⁽¹⁾
Common Share	Stock, Par V	Value \$0.01 Per											50,740		740	Ι)	
Common Stock, Par Value \$0.01 Per Share											\perp		11,301		301			. C. Norris rust
Common Stock, Par Value \$0.01 Per Share														1,000		I		ily ⁽¹⁾
Common Stock, Par Value \$0.01 Per Share													216,369		I		RAT	
Common Stock, Par Value \$0.01 Per Share														321,750		I I		ohn W. Iorris, Jr. rust A
		Та	ble II - Derivat (e.g., pı	ive Securi uts, calls,										wned				
1. Title of Derivative Security (Instr. 3)	ve Conversion Date or Exercise (Month/Day/Year		rsion Date Execution Date, if any (Month/Day/Year) tive		ransaction of Expi		Expir	te Exercisable and ation Date th/Day/Year)		Am Sec Und Der Sec	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Derivativ Security (Instr. 5)		curity Securities		10. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
		(A) (D)		(D)	Date Exerc	cisable	Expiration Date		Amoun or Numbe of Title Shares									

Explanation of Responses:

Remarks:

^{1.} The reporting person disclaims beneficial ownership of these securities, and this report shall not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

Attorney-in-fact pursuant to the power of attorney dated December 7, 2012.

/s/ James K. Markey, attorneyin-fact for Mr. John W. Norris Ш

02/14/2017

** 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.