FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	DС	20549	
vasiliigton,	D.C.	20049	

STATEMENT	OF C	HANGES	IN BENEF	ICIAL	OWNERSH	ΗP

OMB APPROVAL										
OMB Number: 3235-028										
Estimated average burden										
hours per response	e: 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* Buck Sherry				2. Issuer Name and Ticker or Trading Symbol LENNOX INTERNATIONAL INC [LII]							(Ch	Relationship eck all app X Direct	' '		on(s) to Is					
(Last)	(F	rst) (f	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/16/2024									Office below	er (give title		Other (s below)	specify	
2140 LA	KE PARK	BLVD.			4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														X Form filed by One Reporting Person						
RICHAR	RDSON T	X 7	5080												Form Perso	filed by Mo on	re than (One Repo	orting	
(City)	(S	tate) (Z	Zip)		Rul	Rule 10b5-1(c) Transaction Indication								,						
Check this box to indicate that a transaction was made pursuant to a contra satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction										uction or writt	en plan t	hat is inter	nded to							
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Disp	posed of	, or E	3ene	eficia	lly Own	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)			Execution Date,		3. Transaction Code (Instr. 8) 4. Securitie Disposed C 5)		ies Acquired (A) o Of (D) (Instr. 3, 4 a		(A) or 3, 4 an	Benefic	ies cially Following	6. Owner Form: I (D) or II (I) (Inst	Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
							Code	v	Amount	(A) (D)	or	Price	Transactio				(IIIsti. 4)			
Common	Stock, Par	Value \$0.01 Per	Share	05/16/	2024				A		305	A	4	\$ <mark>0</mark>	2	,693	D			
		Tal									osed of, o				y Owned	t				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	4. Transa Code (8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		te	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		; i	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amo or Nun of Sha	.						

Explanation of Responses:

/s/ Monica Brown, attorneyin-fact for Sherry Buck

05/20/2024

** Signature of Reporting Person

Date

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

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.

^{*} 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).