SEC Form 4

FORM 4

UNITED STATES S	ECURITIES AND	EXCHANGE	COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

1. Name and Address of Reporting Person [*] Bluedorn Todd M			2. Issuer Name and Ticker or Trading Symbol LENNOX INTERNATIONAL INC [LII]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
				X	Director	10% Owner			
(Last) (First) (Middle) 2140 LAKE PARK BLVD.		(Middle)	3. Date of Earliest Transaction (Month/Day/Year)	x	Officer (give title below)	Other (specify below)			
			10/27/2014	Chairman and CEO					
(Street)		,	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	idual or Joint/Group Filin	ng (Check Applicable			
RICHARDSON TX 7508		75080		X	, , ,				
(City)	(State)	(Zip)			Form filed by More that Person	an One Reporting			

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	nt (A) or (D) Price		Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock, Par Value \$0.01 Per Share	10/27/2014		M ⁽¹⁾		20,467	Α	\$ <mark>0</mark>	274,246	D	
Common Stock, Par Value \$0.01 Per Share	10/28/2014		S		20,467	D	\$88.63 ⁽²⁾	253,779	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 Date, if any (Month/Day/Year)	4. Transa Code (8)		of Deri Seci Acq (A) (Disp of (E	umber vative irities uired or osed 5) (Instr. and 5)		Expiration Date (Month/Day/Year)		ate Amount of		Derivative Security (Instr. 5) Security		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares						
Non- qualified Stock Appreciation Right	\$28.24	10/27/2014		M ⁽¹⁾			51,988	12/11/2009	12/11/2015	Common Stock, Par Value \$0.01 Per Share	0	\$0	51,988	D			

Explanation of Responses:

1. This exercise was affected pursuant to a Rule 10b5-1 trading plan.

2. Reflects a weighted average sale price of \$88.63 at prices ranging from \$88.24 to \$89.23 per share. The Reporting Person will provide, upon request by the staff of the Securities and Exchange Commission, the Issuer, or a security holder of the Issuer, full information regarding the number of shares sold at each separate price.

Remarks:

Attorney-in-fact pursuant to Power of Attorney dated December 7, 2012.

/S/ James K. Markey, attorney-	10/20/2014
in-fact for Todd M. Bluedorn	10/29/2014

** 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.