FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	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* Blatz Michael							2. Issuer Name and Ticker or Trading Symbol LENNOX INTERNATIONAL INC [LII]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>Didiz Michael</u>															Dire	ector		10% O	wner		
(Lost) (First) (Middle)					3. D	Date of Earliest Transaction (Month/Day/Year)										Officer (give title below)		Other (specify below)			
(Last) (First) (Middle)						11/01/2012									EV	P. Pres, COO) Ser	vice Expe	erts		
2140 LAKE PARK BLVD																					
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
RICHARDSON TX			75080													,	orm filed by One Reporting Person				
RICHARDSON IA /5000													, , ,								
(City) (State) (Zip)														Form filed by More than One Reporting Person				orting			
(City)		State)		<u> </u>																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of S	ecurity (In	str. 3)			2. Transa	action	Execution Date,						ities Acquired (A)						wnership	7. Nature	
		-			Date	/Va							3, 4 a				orm: Direct D) or Indirect	of Indirect Beneficial			
					(Month/E	ayi te		f any Month/D	any Month/Day/Year)		Code (Instr. 5)					Beneficially Owned Following		(I) (Instr. 4)	Ownership		
						- [`	, , , , , , , , , , , , , , , , , , , ,		` ` 				1		Repo		```	^ /	(Instr. 4)		
									Code	v	Amount		(A) or (D)	Price		action(s) 3 and 4)					
Common Stock, Par Value \$0.01 Per Share 11/0					11/01	/2012				S ⁽¹⁾		8,317	7 D		\$5	52	20,166		D		
			Ta	ble II - D	erivati	ve S	ecu	rities	Acqu	ired, Di	spo	sed of,	or B	enefi	ciall	y Owned	i				
				(6	e.g., pu	ıts, c	alls	, warr	ants,	options	s, co	nvertib	le se	ecurit	ies)						
1. Title of	2.	3. Trans	3. Transaction	3A. Deeme	ed 4	4.		5. Numbe		6. Date Ex	Date Exercisable and 7			7. Title and		8. Price of	9. Number of		10.	11. Nature	
Derivative	Conversio	n Date	Date (Month/Day/Year)	Execution	Date,	Transa		n of		Expiration Date Amount of					Derivative			Ownership	of Indirect		
Security	or Exercis	e (Month/		if any		Code (Instr							Securities			Security	Securities		Form:	Beneficial	
(Instr. 3)	Price of Derivative			(Month/Da	y/Year)	8)		Securities Acquired		Underlyin Derivative						(Instr. 5)	Beneficially Owned		Direct (D) or Indirect	Ownership (Instr. 4)	
Securi								(A) or		Security (In:				str. 3		Following		(i) (instr. 4)	(111301. 4)		
						Disposed		and 4)						Reported		·					
				1		of (D)							Transaction()						
							(Instr. 3, 4 and 5)									(Instr. 4)					
					F			+						1							
								1						or	ount						
								1						Nun	nber						
						Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	of Sha	rec						
						Code	_ v	(A)	(P)	Exercisal	ne L	Jaie	Title	Sna	162						

Explanation of Responses:

1. This sale was effected pursuant to a Rule 10b5-1 trading plan.

Remarks:

Attorney-in-fact pursuant to Power of Attorney dated May 12, 2010.

/s/ John D. Torres, attorney-infact for Michael Blatz 11/02/2012

** 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.