FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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 APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

		or Section 30(n) of the Investment Company Act of 1940					
s of Reporting Perso	n*	2. Issuer Name and Ticker or Trading Symbol LENNOX INTERNATIONAL INC [I.II]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
HENRY C L			X	Director	10% Owner		
(First) K BLVD.	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 10/16/2006		Officer (give title below)	Other (specify below)		
		4. If Amendment, Date of Original Filed (Month/Day/Year)		idual or Joint/Group Filing (Check Applicable			
тх	75080		X	Form filed by One Rep	porting Person		
	/ 3000			Form filed by More than One Reporting Person			
(State)	(Zip)						
	(First) K BLVD. TX	K BLVD. TX 75080	Softwoorning resolution LENNOX INTERNATIONAL INC [LII] (First) (Middle) K BLVD. 3. Date of Earliest Transaction (Month/Day/Year) TX 75080	s of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol 5. Relation (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 5. Relation K BLVD. 10/16/2006 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Indiv TX 75080 X	s of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 5. Relationship of Reporting Person (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 5. Relationship of Reporting Person TX 75080 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filin TX 75080 Form filed by One Reporting Person		

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. Transaction Code (Instr. 8)				3, 4 and	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	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock, par value \$0.01 per share	10/16/2006		A ⁽¹⁾		865	Α	\$23.11	17,582	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)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed . 3, 4	6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	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				

Explanation of Responses:

1. Directors' Quarterly Stock Compensation

Remarks:

Attorney-in-fact pursuant to the Power of Attorney dated 4/23/04.

William F. Stoll, Jr. for C.L. <u>Henry</u>

10/16/2006

** 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.