

# FORM 5

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

|  |           |
|--|-----------|
| OMB APPROVAL                                   |           |
| OMB Number:                                    | 3235-0362 |
| Estimated average burden hours per response... | 1.0       |

**ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

- Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
- Form 3 Holdings Reported
- Form 4 Transactions Reported

| 1. Name and Address of Reporting Person*<br><b>FARFAGLIA CHARLES J</b> |   |   | 2. Issuer Name and Ticker or Trading Symbol<br><b>ETHAN ALLEN INTERIORS INC [ETH]</b>   |  |            | 5. Relationship of Reporting Person(s) to Issuer<br>(Check all applicable)<br>Director _____ 10% Owner _____<br><input checked="" type="checkbox"/> Officer (give title below) _____ Other (specify below) _____<br><div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 2px auto;">VP Human Resources</div> |   |   |  |
|--|---|---|---|--|------------|--|---|---|--|
| (Last) (First) (Middle)  |   |   | 3. Statement for Issuer's Fiscal Year Ended<br>(Month/Day/Year)                         |  |            |  |   |   |  |
| ETHAN ALLEN INTERIORS INC., ETHAN ALLEN DRIVE                          |   |   | 06/30/2006  |  |            |  |   |   |  |
| (Street)   |   |   | 4. If Amendment, Date Original Filed(Month/Day/Year)                                    |  |            | 6. Individual or Joint/Group Reporting<br>(check applicable line)  |   |   |  |
| DANBURY, CT 06811  |   |   |   |  |            | <input checked="" type="checkbox"/> Form Filed by One Reporting Person<br><input type="checkbox"/> Form Filed by More than One Reporting Person  |   |   |  |
| (City) (State) (Zip)   |   |   | <b>Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned</b> |  |            |  |   |   |  |
| 1. Title of Security<br>(Instr. 3)                                     | 2. Transaction Date<br>(Month/Day/Year) | 2A. Deemed Execution Date, if any<br>(Month/Day/Year) | 3. Transaction Code<br>(Instr. 8)   | 4. Securities Acquired (A) or Disposed of (D)<br>(Instr. 3, 4 and 5) |            |  | 5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year<br>(Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I)<br>(Instr. 4) | 7. Nature of Indirect Beneficial Ownership<br>(Instr. 4) |
|  |   |   |   | Amount   | (A) or (D) | Price  |   |   |  |
| Ethan Allen Stock Acquired in 401(k)                                   | 06/30/2006                              |   | J   | 6  | A          | \$ (1) 344   | I   | 401(k) account  |  |

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

**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 control number.** SEC 2270 (9-02)

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

| 1. Title of Derivative Security<br>(Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed Execution Date, if any<br>(Month/Day/Year) | 4. Transaction Code<br>(Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D)<br>(Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date<br>(Month/Day/Year) |                 | 7. Title and Amount of Underlying Securities<br>(Instr. 3 and 4) | 8. Price of Derivative Security<br>(Instr. 5) | 9. Number of Derivative Securities Beneficially Owned at End of Issuer's Fiscal Year<br>(Instr. 4) | 10. Ownership Form of Derivative Security: Direct (D) or Indirect (I)<br>(Instr. 4) | 11. Nature of Indirect Beneficial Ownership<br>(Instr. 4) |
|---|--|---|---|-----------------------------------|--|---|-----------------|--|---|--|---|---|
|   |  |   |   |                                   |  | Date Exercisable  | Expiration Date |  |   |  |   |   |
|   |  |   |   |                                   | (A) (D)  |   |                 |  |   |  |   |   |

## Reporting Owners

| Reporting Owner Name / Address  | Relationships |           |                    |       |
|---|---------------|-----------|--------------------|-------|
|   | Director      | 10% Owner | Officer            | Other |
| FARFAGLIA CHARLES J<br>ETHAN ALLEN INTERIORS INC.<br>ETHAN ALLEN DRIVE<br>DANBURY, CT 06811 |               |           | VP Human Resources |       |

## Signatures

|                                 |            |
|---------------------------------|------------|
| Charles Farfaglia               | 08/02/2006 |
| **Signature of Reporting Person | Date       |

## Explanation of Responses:

- \* 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).
- (1) Acquired through fiscal year in 401(k)

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.