FORM	4
------	---

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

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

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

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

(Thit of Type Responses)										
1. Name and Address of Reporting Person STOUT CRAIG	2. Issuer Name and ETHAN ALLEN			0,		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director10% Owner				
(Last) (First) ETHAN ALLEN DRIVE		3. Date of Earliest T 01/31/2014	ransaction (I	Mont	h/Day/Yea	ar)	Officer (give title below) _X_Other (specify below) VP, Prd. Dev. Case Goods & Uph			
(Street) DANBURY, CT 06811		4. If Amendment, Da	ate Original	Filed	(Month/Day/	'Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person			
(City) (State)	(Zip)	,	Fable I - No	on-De	erivative S	Securitie	s Acqu	ired, Disposed of, or Beneficially Own	ned	
1.Title of Security	2. Transaction	2A. Deemed	3. Transact	ion	4. Securi	ties Acqu	uired	5. Amount of Securities Beneficially	6.	7. Nature
(Instr. 3)	Date	Execution Date, if	Code				Owned Following Reported	Ownership	of Indirect	
	(Month/Day/Year)) any (Instr. 8)			(Instr. 3,	4 and 5)		Transaction(s)	Form:	Beneficial
		(Month/Day/Year)					1	(Instr. 3 and 4)		Ownership
									or Indirect	(Instr. 4)
						(A) or			(I)	
			Code	V	Amount	(D)	Price		(Instr. 4)	

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 SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Num	ber	6. Date Exercis	sable and	7. Title and	Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	tion	on of J		Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Derivat	ive	(Month/Day/Y	ear)	Securities		Security	Securities	Form of	Beneficial
· /	Price of		(Month/Day/Year)	(Instr. 8))	Securiti				(Instr. 3 and	4)	· /		Derivative	-
	Derivative					Acquire	ed							2	(Instr. 4)
	Security					(A) or							0	Direct (D)	
						Dispose	ed							or Indirect	
						of (D) (Instr. 3	2 4						Transaction(s) (Instr. 4)	(1) (Instr. 4)	
						and 5)	, т ,						(111501. 4)	(11150.4)	
						unu 5)	-								
											Amount				
								Date	Expiration		or Number				
								Exercisable	Date		of				
				Code	v	(A)	(D)				Shares				
				coue	•	(11)	(D)				Shares				
Stock															
Options	\$ 25.24	01/31/2014		•		3,000		02/01/2017	01/21/2024	Common	3,000	\$ 0	3,000	D	
(right to	\$ 23.24	01/31/2014		А		<u>(1)</u>		02/01/2017	01/31/2024	Stock	3,000	\$0	3,000	D	
buy)															
,))															

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
STOUT CRAIG ETHAN ALLEN DRIVE DANBURY, CT 06811				VP, Prd. Dev. Case Goods & Uph				

Signatures

 Craig Stout
 02/04/2014

 **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) Options will performance vest ratably over fiscal years 2014, 2015 and 2016 pursuant to Stock Option Agreement. Performance Vested stock options shall then fully vest ratably in 3rd, 4th and 5th anniversary of Grant Date.

Note: File three copies of this Form, one of which must be manually signed. If space 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.