FORM 4

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

OMB APPROV	/AL					
OMB Number:	3235-0287					
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

(Print or Type Responses)

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

	d Address of FRANK (Reporting Person -		2. Issuer Name and Ticker or Trading Symbol ETHAN ALLEN INTERIORS INC [ETH]						Relationship of Reporting Person(s) to Issuer (Check all applicable) XDirector 10% Owner						
ETHAN A	ÁLLEN IN	(First) TERIORS INC.	TOTAL A S. T.	3. Date o 04/29/2			ansac	ction (Mont	h/Day	/Year)	_	Officer (give	title below)	Oth	er (specify belo	ow)
DANRIJI	RY, CT 06	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) X. Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acqui							es Acquire	d. Disposed	of, or Benef	ficially Own	ed	
1.Title of So (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)	Transaction e Execution Date, if onth/Day/Year) 2A. Deemed Execution Date, if Ocde (A) or Disposed of (D (Instr. 3, 4 and 5) (Month/Day/Year)		nired 5.	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
Common			04/29/2004				A	A	100	A	\$ 41.21	00			D	
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	4. Transac Code	in this form are not require a currently valid OMB core in the core in this form are not require a currently valid OMB core in this form are not require a currently valid OMB core in this form are not require a currently valid OMB core in this form are not require a currently valid OMB core in this form are not require a currently valid OMB core in this form are not require a currently valid OMB core in this form are not require a currently valid OMB core in this form are not require a currently valid OMB core in this form are not require a currently valid OMB core in this form are not require a currently valid OMB core in this form are not require a currently valid OMB core in this form are not required. Disposed of, or Beneficial e.g., puts, calls, warrants, options, convertible securities) 4.			equired to a control officially O	title and Amount inderlying urities Security (Instr. 5) In a and 4) 8. Price of Derivative Security Security Security Security Security Roll Rep			of 10. Owners Form o	Ownership (Instr. 4) D)			
				Code	v	(A)	(D)	Date Exercisabl		Expiration Date	Title	Amount or Number of Shares				
Ethan Allen Common Stock - Options	\$ 34.04	07/28/2004		A		1,500		07/28/20	005	07/29/2014	Ethai Aller Comm Stock Optio	n on - 1,500	\$ 0	9,500	D	
Ethan Allen Common Stock - Options	\$ 34.04	07/28/2004		A		1,500		07/28/20	006	07/29/2014	Ethai Aller Comm Stock Optio	on 1,500	\$ 0	11,000	D	

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
WISNER FRANK G ETHAN ALLEN INTERIORS INC. ETHAN ALLEN DRIVE DANBURY, CT 06811	X						

Signatures

Frank G. Wisner	07/29/2004
**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).

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.