#### LEGGETT & PLATT INC

Form 4

December 01, 2014

#### **OMB APPROVAL** FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB 3235-0287 Washington, D.C. 20549 Number: Check this box January 31, Expires: if no longer 2005 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF subject to Estimated average **SECURITIES** Section 16. burden hours per Form 4 or 0.5 response... Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b).

2. Issuer Name <b>and</b> Ticker or Trading Symbol LEGGETT & PLATT INC [LEG]	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
3. Date of Earliest Transaction	(Circui un appricuere)			
(Month/Day/Year) 11/26/2014	Director 10% OwnerX Officer (give title Other (specify below)  SVP - Corporate Controller			
4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check			
Filed(Month/Day/Year)	Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
	Symbol LEGGETT & PLATT INC [LEG]  3. Date of Earliest Transaction (Month/Day/Year) 11/26/2014  4. If Amendment, Date Original			

	,					Pers	on		
(City)	(State)	(Zip) Ta	ble I - Non	-Derivative S	ecurit	ties Acquire	d, Disposed of, or I	Beneficially C	wned
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)	4. Securities of Disposed of (Instr. 3, 4 ar	(D)	ired (A) or	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 Stock	11/26/2014		A	12.3254	A	\$ 35.7425	126,723.1373	D	
Common Stock	11/26/2014		A	131.4828	A	\$ 33.64	126,854.6201	D	
Common Stock							1,724	I	Custodian- Daughter
Common Stock							12,832.894	I	Held In Trust Under Issuer's

Retirement

Plan

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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 1474

(9-02)

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	isable and	7. Title	and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	orNumber	Expiration Da	ate	Amoun	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Underl	ying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securit	ies	(Instr. 5)
	Derivative				Securities			(Instr. :	3 and 4)	
	Security				Acquired					
					(A) or					
					Disposed					
					of (D)					
					(Instr. 3,					
					4, and 5)					
									A	
									Amount	
						Date	Expiration		or Name la sur	
						Exercisable	Date		Number	
				C + V	(A) (D)				of	
				Code V	(A) (D)			,	Shares	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships
reporting owner rame, radicis	

Director 10% Owner Officer Other

WEIL WILLIAM S NO 1 LEGGETT ROAD CARTHAGE, MO 64836

SVP - Corporate Controller

### **Signatures**

/s/ S. Scott Luton, by POA 12/01/2014

\*\*Signature of Reporting Date
Person

# **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.

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