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Form 4 January 05 FORI Check if no lo subject Section Form 4 Form 5 obligat may co <i>See</i> Ins 1(b).	VI 4 this box nger to a 16. or ions ntinue. truction STATE STATE STATE Section 17	MENT OF Irrsuant to S	W F CHA Section Public V	ashingto NGES I SECU 16(a) of Utility H	on, D.C. N BENE JRITIES the Secu	2054 EFIC S urities ompa	9 IAL OV Exchar any Act	COMMISSION VNERSHIP OF age Act of 1934, of 1935 or Section 940	OMB Number: Expires: Estimated burden hou response	urs per		
(Print or Type	e Kesponses)											
HAFFNER DAVID S Symbo			uer Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer					
(Last)					Transactio	-	1	(Check all applicable)				
				nth/Day/Year) 2/2015				X Director 10% Owner X Officer (give title Other (specify below) below) Chief Executive Officer				
				nendment, Date Original Ionth/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)	Та	ble I - No	n-Derivati	ve Sec	urities A	cquired, Disposed of,	or Beneficia	lly Owned		
1.Title of Security (Instr. 3)		nsaction Date 2A. Deemed h/Day/Year) Execution Date, if any (Month/Day/Year)			4. Securion (A) or D (Instr. 3,	ities A ispose 4 and (A) or	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	OwnershipIndireForm:BenefDirect (D)Owner	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	01/02/2015			F	3,235	D	\$ 42.16	1,192,266.9194	D			
Common Stock								3,536.5	I	By ConDav Enterprises LP, a family limited partnership		
Common Stock								23,535.813	I	Held In Trust Under Issuer's		

									Retin Plan	rement	
Reminder: F	leport on a sep		ss of securities benef ative Securities Acq puts, calls, warrants	Person inform require displa numbe uired, Disp	ns who re nation con ed to resp ys a curre er. posed of, or	spond to the tained in thi ond unless ently valid O Beneficially	is form are the form MB control	not	SEC 14 (9-(
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		4. Transactic Code (Instr. 8)	5. or/Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amor Unde Secur	le and unt of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
HAFFNER DAVID S NO 1 LEGGETT ROAD CARTHAGE, MO 64836	Х		Chief Executive Officer					
Cianaturaa								

Signatures

/s/ S. Scott Luton, 01/05/2015 by POA

**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.

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