FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANG	ES IN BENEI	FICIAL OW	NERSHIP

l	OMB APPRO	VAL				
	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).

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

Name and Address of Reporting Person* HAFFNER DAVID S			2. Issuer Name and Ticker or Trading Symbol LEGGETT & PLATT INC [LEG]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
(Last) (First) (Middle)				Date of Earliest Transaction (Month/Day/Year)							X Director X Officer (give titl below)			9		Owner r (specify v)			
NO 1 LEGGETT ROAD			07	07/15/2014 Chief Executive Officer															
(Street) CARTHAGE MO 64836			4.	4. If Amendment, Date of 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						
(City)	(St	ate) (Zip)												Pers		iore triair	One ive	porting
		Tabl	eI-	Non-Deriv	ativ	e Sec	urities	Acqı	uire	ed, E	Disposed o	f, or B	enefic	cial	ly Own	ed			
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Cod	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5)	Securitie Beneficia	eneficially Wned Following		irect direct 4)	7. Nature of Indirect Beneficial Ownership	
							Cod	e \	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Stock			07/15/201	.4			A			505.8719	A	\$32.9	96	1,114,2	234.8386	D		
Common	Stock			07/15/201	.4			A			1,514.2115	A	\$28.0	16	1,115,7	49.0501	D		
Common	Stock			07/15/201	.4			A			911.804	A	\$26.3	868	1,116,6	660.8541	D		
Common Stock													3,5	36.5	I		By ConDav Enterprises LP, a family limited partnership		
Common Stock													23,112.166		I		Held In Trust Under Issuer's Retirement Plan		
		Та	ble								sposed of, on convertib				Owned				
1. Title of 2. 3. Transaction Date Execution Date, Security or Exercise (Month/Day/Year) if any			ransaction of Code (Instr. Derivativ		ve (Mes d	xpira	ation	ercisable and Date y/Year)	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		S (I		9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly Ov Fo Dii or (I)		11. Nature of Indirect Beneficial Ownership (Instr. 4)			
Samlar di	of Respons				Code	v	(A) (I		ate xerc	isabl	Expiration e Date	Title	Amount or Number of Shares						

/s/ S. Scott Luton, by POA

07/17/2014

** Signature of Reporting Person

Date

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

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

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 Number.

^{*} 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).