| SEC Form 4 | |
|------------|--|
|------------|--|

П

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| OMB APPROVAL | | | | | |
|------------------------|-----------|--|--|--|--|
| OMB Number: | 3235-0287 | | | | |
| Estimated average burd | len | | | | |
| hours per response. | 0.5 | | | | |

| 1. Nume and Address of Reporting reison | | n* | 2. Issuer Name and Ticker or Trading Symbol <u>LEGGETT & PLATT INC</u> [LEG] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
|---|---------|----------|---|--|---|---------------------------------------|--|
| , | | | 3. Date of Earliest Transaction (Month/Day/Year) | X | Director Officer (give title below) | 10% Owner Other (specify below) | |
| (Last) (First) (Middle) I | | (Middle) | 01/10/2014 | | Senior Vice President | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | idual or Joint/Group Filing | (Check Applicable | |
| CARTHAGE | MO | 64836 | | X | Form filed by One Repor | rting Person | |
| × | | | | | Form filed by More than Person | One Reporting | |
| (City) | (State) | (Zip) | | | | | |

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transa Code (8) | | | | Beneficially Owned Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
|--|--|---|------------------------------|---|---------|---------------|---------------------------------|---|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 01/10/2014 | | A | | 22.8761 | A | \$25.823 | 32,959.8822 | D | |
| Common Stock | | | | | | | | 480 | I | By Adult Son as Custodian for Minor Son |
| Common Stock | | | | | | | | 480 | I | By Daughter |
| Common Stock | | | | | | | | 15,376.065 | I | By Perry E. Davis Revocable Trust |
| Common Stock | | | | | | | | 480 | I | By Son |
| Common Stock | | | | | | | | 7,183 | I | By Wife's Revocable Trust |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | |

1. Title of 6. Date Exercisable and 8. Price of 9. Number of 11. Nature 3. Transaction 3A. Deemed 5. Number 7. Title and 10 Derivative Security (Instr. 3) Conversion Date (Month/Day/Year) Expiration Date (Month/Day/Year) Amount of Securities derivative Securities of Indirect Beneficial Execution Date Transaction of Derivative Ownership Security (Instr. 5) Derivative or Exercise if any Code (Instr. Form: Direct (D) or Indirect (I) (Instr. 4) Price of Derivative (Month/Day/Year) Underlying Derivative 8) Securities Beneficially Ownership Acquired (A) or Disposed of (D) Owned (Instr. 4) Security (Instr. 3 Following Security and 4) Reported Transaction(s) (Instr. 3, 4 (Instr. 4) and 5) Amount Number Expiration Date Date Exercisable of Shares v Code (A) (D) Title

Explanation of Responses:

/s/ S. Scott Luton, by POA

<u>01/14/2014</u>

Date

** Signature of Reporting Person

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

* 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.

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.