FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIA	L OWNERSHIP

OMB APPRO	VAL
OMB Number:	3235-0287
Estimated average burd	en
hours per response:	0.5

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

1. Name and Address of Reporting Person* CRUSA JACK D			2. Issuer Name and Ticker or Trading Symbol LEGGETT & PLATT INC [LEG]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
(Last)		(First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 12/16/2011								X Officer (give title Other (s below) Senior Vice President			
(Street) CARTHAGE MO 64836				4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(St		Zip)											Pers			
1. Title of Security (Instr. 3)		e I - 1	Non-Deriv 2. Transaction Date (Month/Day/Y	action 2A Ex Day/Year) if a		2A. Deemed Execution Date,		action (Instr.			5. Amou Securitie Benefici Owned I Reporte		int of es ially Following d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Indirect		
		_					Code	V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		and 4)			
Common S			\dashv	12/16/201	_			A		29.4123 174.2427	A	\$18.5 \$17.4			42.6231 16.8658	D D	
Common S				12/10/201						174.2427		Ψ17	110	4,000		I	By Spouse
Common S	Stock													33		I	Family Trust
Common S	Stock													1,	800	I	Spouse As Custodian For Children
Common Stock													3,105.78		I	Held In Trust Under Issuer's Retirement Plan	
		Та	ble I							sposed of, s, convertib				Owned			
L. Title of Derivative Security Instr. 3) 2. Conversion Date (Month/Day/Year) Or Exercise Price of Derivative Security Security 3. Transaction Date Execution Date, if any (Month/Day/Year)		ution Date,		ransaction of Code (Instr. Derivation		Expiration (Month/Day			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Derivativ Security (Instr. 5)	erivative ecurity	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owner: Form: Direct or Indii (I) (Inst	ect (Instr. 4)		
	of Respons				Code	v	(A) (D)	Date Exe	e rcisab	Expiration le Date	Title	Amoun or Numbe of Shares					

/s/ S. Scott Luton, by POA

12/20/2011

** 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.

 $^{^{\}star}$ 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).