FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
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OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* GLASSMAN KARL G					2. Issuer Name and Ticker or Trading Symbol LEGGETT & PLATT INC [LEG]								(Che	elationshi eck all app	olicable)	ing Person(s	s) to Is:		
(Last) NO 1 LE	(Fii GGETT RC	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/06/2017									_	er (give title w)	e (Other (pelow)	specify
(Street) CARTHA (City)		ate) (:	54836 Zip)			4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/			ion	on 2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)						5. Amount of Securities 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)				nstr. 4)
Common	Stock			02/06/2	017	s 79,772 D \$48.74 416,859.9375 D													
Common Stock													20,33	30.265	I	T U Is R	Ield In Trust Under ssuer's Letirement Ilan		
		Та	ble II -	Derivati (e.g., pu	ve Se	ecuri alls, v	ties <i>i</i> warra	Acqu ants,	ired, optio	Disp	osed of, convertib	or Ber le sec	neficia urities	lly (s)	Owned				
				Transad Code (I	Transaction Code (Instr. Code (Instr. Code (Instr. Code (Instr. Code (Instr. Code (Instruction (Ins		Number f Expiration (Month/Day cquired)) or isposed f (D) nstr. 3, 4 nd 5)			te Amount of Securities Underlying Derivative Security (Instant 4)		t of ies /ing ive y (Instr. :	Di Si (li	Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	(D) rect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Codo	v	(0)	(D)	Date	aabla	Expiration	Title	or Number of								

Explanation of Responses:

/s/ S. Scott Luton, by POA

02/07/2017

** 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).