FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20349

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours por rosponso:	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*  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)  X Director 10% Owner					
				3. Date of Earliest Transaction (Month/Day/Year) 10/03/2014									X Offic below	er (give title w)			r (specify		
(Street) CARTHAGE MO 64836 (City) (State) (Zip)				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 Person					
(City)	(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2.1			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		tion	4. Securities Acquired (A) or			5. Amount of Securities Beneficially Owned Following		nt of s ally ollowing	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			10/03/201	.4			A			68.6805	A	\$29.74	415	1,187,1	42.3449	D		
Common	Stock			10/03/201	.4			A			790.0607	A	\$27.9	92	1,187,9	32.4056	D		
Common Stock															3,5	36.5	I		By ConDav Enterprises LP, a family limited partnership
Common Stock														23,32	24.388	I		Held In Trust Under Issuer's Retirement Plan	
		Та	ble								sposed of,				Owned				
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction 3A. Deemed Execution Date Execution Date, if any			4. Tran:	5. Number fransaction of code (Instr. Derivative			Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		3	8. Price of Derivative Security (Instr. 5) 3 3 4 6 7 8. Price of Derivative Securiti Securiti Securiti Owned Followir Reporte Transac (Instr. 4)		e Ownershi s Form: Direct (D) or Indirec g (I) (Instr. 4		Beneficial Ownership (Instr. 4)	
					Code	e V	(A) (I		ate xer	e rcisab	Expiration Date	Title	Amoun or Numbe of Shares	er					

**Explanation of Responses:** 

/s/ S. Scott Luton, by POA 1

10/07/2014

\*\* Signature of Reporting Person

Date

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).