## FORM 4

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

wasnington,	D.C. 205	4

washington, D.C. 20049	OMB APPROVAL		
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0	
STATEMENT OF STIANGES IN BEITE FOIAE OWNERSTIII	Estimated average burden		

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 burden									
hours per response: 0.									

1. Name and Address of Reporting Person*  Moore John G.						2. Issuer Name <b>and</b> Ticker or Trading Symbol LEGGETT & PLATT INC [ LEG ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner					
(Last) (First) (Middle)  NO. 1 LEGGETT ROAD						3. Date of Earliest Transaction (Month/Day/Year) 03/26/2010									Office	er (give title w)	Ot be	Other (specify below)  Affairs & HR	
(Street) CARTHAGE MO 64836 (City) (State) (Zip)					4. If	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					
			Tabl	e I - N	on-Deriv	ative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or B	enefici	ally (	Owne	ed		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/N					Execution Date,		3. Transaction Code (Instr. 8)  4. Securities of Disposed Of (					nd 5) Secur Benef Owne		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect ct Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price			action(s) 3 and 4)		(Instr. 4)	
Common Stock 03/26/20					010	010		A		58.8241	A	A \$18.3685		685 42,999.0909		D			
			Та	ble II								osed of, convertib				vned			
1. Title of Derivative Security (Instr. 3)	2. Conversi or Exerci Price of Derivativ Security	on Date se (Mont	nsaction h/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transa Code ( 8)	(Instr.	5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed . 3, 4	6. Date	tion D.	Expiration	7. Title Amoun Securit Underly Derivat Securit and 4)	t of ies /ing			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Beneficial Ownership ct (Instr. 4)

**Explanation of Responses:** 

/s/ Aileen Gronewold, by POA 03/29/2010

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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).

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.