FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL | | | | | | | | | | | | |
|--------------|-----------|--|--|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | | | |
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0.5

Estimated average burden

hours per response:

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

| 1. Name and Address of Reporting Person* DOWNES JOSEPH D JR | | | | | | 2. Issuer Name and Ticker or Trading Symbol LEGGETT & PLATT INC [LEG] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Check (specify) | | | | | |
|--|---|-----|----------|---|---------|--|--------|---|---|--|------------------------|---|------------------------------|--|--|---|----|--|--|
| (Last) NO 1 LE | (F GGETT R | ŕ | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/17/2007 | | | | | | | | X Officer (give title Other (specify below) Senior Vice President | | | | | |
| (Street) CARTHA | CARTHAGE MO 64836 | | | | - 4. li | 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 Person | | | | | |
| | | Tab | le I - N | lon-Deriv | ative | Sec | uritie | s Ac | quire | d, D | isposed o | f, or B | enefic | ially | y Owne | ed | | | |
| Date | | | Date | . Transaction ate Month/Day/Year) | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an | | | 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 08/1 | | | 08/17/2 | 007 | 07 | | | A | | 82.9005 | A | \$16.9 | 66 | 63,76 | 3.5776 | D | | | |
| Common Stock | | | | | | | | | | | | | | 28,937 | 7.9152 ⁽¹⁾ | | I | Held in Trust under Issuer's Retirement Plan | |
| Common Stock | | | | | | | | | | | | | | | 16, | 488 | | I | Wife |
| | | Ta | able II | | | | | | | | oosed of, convertib | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversior or Exercise Price of Derivative Security | | if any | emed tion Date, n/Day/Year) | | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Expiration Date | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares | | De Se (Ir | Price of privative scurity services and services services and services services and | | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |

Explanation of Responses:

1. Balance has been updated to reflect the acquisition of 211.3903 shares under the Issuer's Restated Stock Bonus Plan during the 2nd quarter of 2007, in transactions exempt under Rule 16b-3(c).

Aileen A. Gronewold

08/20/2007

** Signature of Reporting Person

Date

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.