Edgar Filing: LEGGETT & PLATT INC - Form 4

LEGGETT &	& PLATT INC									
Form 4										
August 06, 2	2013									
FORM	1 4							OMB AF	PROVAL	
	UNITED S	STATES SECU Wa	RITIES A ashington,			NGE C	COMMISSION	OMB Number:	3235-0287	
Check th								Expires:	January 31,	
if no long subject to		IENT OF CHA	NGES IN	GES IN BENEFICIAL OWNER					2005	
Section 1		SECUR	ITIES				Estimated average burden hours per			
Form 4 o								response 0		
Form 5 obligatio	no -	suant to Section				•				
may cont		a) of the Public U	•	•	· ·	•		1		
See Instruction 1(b).	uction	30(h) of the I	nvestment	Compar	іу Ас	t of 194	Ю			
(Print or Type I	Responses)									
1. Name and A Moore John	er Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer					
	ETT & PLATT INC [LEG]				(Check all applicable)					
(Last)	(First) (M	Aiddle) 3. Date	of Earliest Ti	ansaction			,			
· · · · · · · · · · · · · · · · · · ·			Day/Year)			Director 10% Owner X Officer (give title Other (specify				
NU. I LEG	GETT ROAD	08/02/	2013				below)	below) Legal & HR C		
	(Street)	4. If An	endment, Da	ate Origina	1		6. Individual or Joi	int/Group Filin	g(Check	
			nth/Day/Year)				Applicable Line)			
CARTHAG	E, MO 64836						_X_ Form filed by O Form filed by M Person			
(City)	(State)	(Zip) Tal	ole I - Non-E	Derivative	Secur	ities Acq	uired, Disposed of,	, or Beneficiall	y Owned	
1.Title of	2. Transaction Date		3.	4. Securi			5. Amount of	6.	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any	n Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Beneficially	Ownership Form: Direct	Indirect Beneficial	
(1130.5)		(Month/Day/Year)					Owned	(D) or	Ownership	
							Following	Indirect (I)	(Instr. 4)	
					(A)		Reported Transaction(s)	(Instr. 4)		
			Code V	A	or	D.:!-	(Instr. 3 and 4)			
Common			Code V		(D)	Price \$				
Stock	08/02/2013		S	3,938	D	ф 31.85	27,912.2163	D		

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	(Month/Day/Year) ve es d		Amou Under Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Moore John G. NO. 1 LEGGETT ROAD CARTHAGE, MO 64836			SVP - Chief Legal & HR Officer				
Signatures							
/s/ S. Scott Luton, by POA	08/06/20	013					
<u>**</u> Signature of Reporting	Date						

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number. I misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).(1)Shares earned for the fourth quarter of 2005 for services as a Director of the Company in accordance with

the Directors Deferred Fee and Stock Plan approved by the Shareholders. Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.