Edgar Filing: GLASSMAN KARL G - Form 4

GLASSMA	AN KARL G											
Form 4												
April 29, 2	019											
FOR	M_{4}	STATES	SECU	DITIES	AND EV(• T T A N		OMMESION	OMB AP	PROVAL		
Washington, D.C. 20549									OMB Number:	3235-0287		
Check this box if no longer which the STATEMENT OF CHANGES IN BENEFICIAL OWNERSHI							Expires:	January 31, 2005				
subject Section Form 4	Г СНА		N BENEFI IRITIES	CIAI	LOWN	ERSHIP OF	Estimated av burden hours response	verage				
Form 5 obligat may co <i>See</i> Ins 1(b).	ions Section 17	(a) of the l	Public 1	Utility Ho		pany	Act of	Act of 1934, 1935 or Section)	l			
(Print or Type	e Responses)											
1. Name and Address of Reporting Person <u>*</u> GLASSMAN KARL G			2. Issuer Name and Ticker or Trading Symbol LEGGETT & PLATT INC [LEG]					5. Relationship of Reporting Person(s) to Issuer				
(Last)	3. Date of Earliest Transaction					(Check all applicable)						
(Last) (First) (Middle) NO 1 LEGGETT ROAD			(Month/Day/Year) 04/26/2019					X Director 10% Owner X Officer (give title Other (specify below) President and CEO				
	(Street)		4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check				
CADTUA	CE NO (492)			Ionth/Day/Ye	-			Applicable Line) _X_ Form filed by O Form filed by Mo	ne Reporting Pers	son		
CARTHA	GE, MO 64836							Person	1	U		
(City)	(State)	(Zip)	Та	ble I - Non	-Derivative S	Securi	ties Acqu	iired, Disposed of,	or Beneficially	v Owned		
1.Title of Security (Instr. 3)	urity (Month/Day/Year) Execution D			Code	4. Securities onDisposed of (Instr. 3, 4 a	(D)	ired (A) o	Securities Beneficially Owned Following Reported Transaction(s	 7. Nature of p Indirect Beneficial) Ownership t (Instr. 4) 			
				Code V	Amount	(D)	Price	(Instr. 3 and 4	.)			
Common Stock	04/26/2019			А	64.3676	А	\$ 35.70	406,012.51	83 D			
Common Stock	04/26/2019			А	915.5329	А	\$ 33.6	08 406,928.05	12 D			
Common Stock								21,759.631	<u>(1)</u> I	Held In Trust Under Issuer's Retirement		

Plan

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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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	onNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Owne
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	*	of	Number		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address					
	Director	10% Owner	Officer	Other	
GLASSMAN KARL G NO 1 LEGGETT ROAD CARTHAGE, MO 64836	Х		President and CEO		
Signatures					
/s/ S. Scott Luton, attorney-in-fact	()4/29/2019			
**Signature of Reporting Person		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).
- (1) Balance has been updated to reflect the acquisition of 208.921 shares under the Issuer's 401(k) Plan in transactions exempt under Rule 16b-3(c). The information in this report is based on a plan statement dated as of 03/31/2019.

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.