#### Edgar Filing: DeSonier David M - Form 4

DeSonier D	avid M										
Form 4											
September (	04, 2018										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
	UNITE	D STATES	<b>SECURITIES</b> A	AND EXC	CHAN	NGE CO	OMMISSION	OMB	MB		
			Washington	, D.C. 205	549			Number:	3235-0287		
Check th								Expires:	January 31,		
if no lon subject t		EMENT O	F CHANGES IN	BENEFI	CIA	L OWN	ERSHIP OF		2005		
subject to Strate view of Charter				SECURITIES				Estimated average burden hours per			
Form 4								response	0.5		
Form 5	Filed	pursuant to S	Section 16(a) of the	he Securiti	ies Ey	change	Act of 1934,				
obligatio	ons Section	•	Public Utility Ho			•					
may con	lunue.		of the Investmen	•	- ·						
<i>See</i> Instr 1(b).	ruction	()		· · · · · · · · · · ·	,						
1(0).											
(Print or Type	Responses)										
1. Name and Address of Reporting Person <sup>*</sup> _ 2. Issuer Name and Ticker or Trading 5. Relationship of							5. Relationship of I	Reporting Pers	on(s) to		
DeSonier D	David M		Symbol					Issuer			
			LEGGETT & P	LATT INC	<b>TILE</b>	G					
		<b>AC11</b>			- [22	.0]	(Check	all applicable	)		
(Last)	(First)	(Middle)	3. Date of Earliest T	ransaction			Director	100	<u>_</u>		
			(Month/Day/Year)	-				10% title Othe	Owner r (specify		
NO. I LEG	GETT KUAD		08/31/2018			i	below)	below)	r(speeny		
							SVP - S	Strategy and IF	ł		
	(Street)		4. If Amendment, D	ate Original			6. Individual or Joi	nt/Group Filin	g(Check		
			Filed(Month/Day/Yea	ar)			Applicable Line)				
							_X_ Form filed by O				
CARTHAC	GE, MO 64836						Form filed by Mo Person	ore than One Rej	porting		
	(54-4-)	(7:)					<b>CISCH</b>				
(City)	(State)	(Zip)	Table I - Non-	Derivative S	Securi	ties Acqu	ired, Disposed of,	or Beneficial	y Owned		
1.Title of	2. Transaction D	ate 2A. Deem	ned 3.	4. Securitie	es Acq	uired (A)	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Yea	ar) Execution	· · · · ·				Securities Beneficially	Ownership	Indirect		
(Instr. 3)		any		Code (Instr. 3, 4 and 5)				Form:	Beneficial		
		(Month/D	ay/Year) (Instr. 8)				Owned Following	Direct (D) or Indirect	Ownership (Instr. 4)		
							Reported	(I)	(IIIsu: 4)		
					(A)		Transaction(s)	(Instr. 4)			
			Code V	Amount	or (D)	Drice	(Instr. 3 and 4)	. ,			
Common			Code V	Amount	· /	Price \$					
Stock	08/31/2018		А	2.7892	Δ		69,425.6296	D			
SLOCK						38.624					

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)

### **Reporting Owners**

#### Edgar Filing: DeSonier David M - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
1	Director	10% Owner	Officer	Other			
DeSonier David M NO. 1 LEGGETT ROAD CARTHAGE, MO 64836			SVP - Strategy and IR				
Signatures							
/s/ S. Scott Luton, attorney-in-fact	(	)9/04/2018					
**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).

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.