FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | |
|--------------------------|--|--|--|--|--|--|--|
| OMB Number: 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | |
| hours per response: | | | | | | | |

| | Check this box if no longer subject |
|---------------|-------------------------------------|
| $\overline{}$ | to Section 16. Form 4 or Form 5 |
| \cup | obligations may continue. See |
| | Instruction 1(b). |

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|--------|---|-----------------|---|-------|--|-----|
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| Name and Address of Reporting Person* DOLLOFF J MITCHELL | | | | | 2. Issuer Name and Ticker or Trading Symbol LEGGETT & PLATT INC [LEG] | | | | | | | | ationship k all app Direc | , | ng Per | rson(s) to Is | | | |
|--|---|-------|------------------------------|----------|---|--|--------|--|--------|---|-----------------------|-----------------------------------|---|--|--|--|--|----|-------------|
| (Last) (First) (Middle) NO 1 LEGGETT ROAD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/03/2023 | | | | | | | X | X Officer (give title below) President and CEO | | | | | | |
| (Street) CARTHA | | | 64836 (Zip) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Indi Line) X | , | | | | on | |
| | | Table | e I - No | n-Deriva | tive S | Secu | rities | Acq | uired, | , Dis | posed of | , or B | enef | icially | y Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Execution Date, | | | | | es Acquired (A) Of (D) (Instr. 3, 4 | | 4 and Securit Benefic Owned | | ies ially Following | Form (D) o | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Code | v | Amount | (A) o | Pri | ce | Reported Transaction(s) (Instr. 3 and 4) | | | | (111511. 4) |
| Common Stock 01/ | | | 01/03/2 | 2023 | | F | | 2,045 | D \$3 | | 32.63 | 63 300,600.8841 | | | D | | | | |
| | | Ta | able II - | | | | | | | | osed of, convertib | | | - | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | Derivative Conversion Date Security or Exercise (Month/Day/Year) if any | | 4. Transa Code (8) | (Instr. | nstr. 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 Date | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of Title Share | | unt ber | | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |

Explanation of Responses:

Remarks:

/s/ S. Scott Luton, attorney-in-

fact

01/04/2023

** 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.