FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## **OMB APPROVAL** OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

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. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu			saction (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiratio Exercisable			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)  Amount or Numbor of Share:		nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		0. Ownership orm: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
		Tal	ole II								osed of, convertib				Owne	d				
Common Stock			11/04/20	022				A		238.5122	A	\$2	6.704	69,2	9,228.1177		D			
Common Stock 11/0					)22				A		35.3026	A	\$2	8.373	68,9	89.6055		D		
						Code	v	Amount	(A) or (D) Price		e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)			Acquired (A) of (D) (Instr. 3, 4				ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
		Table	I - No	on-Deriva	tive S	Secui	rities	Acc	quirec	d, Dis	sposed of	, or E	Benef	icially	/ Own	ed				
(City)	(St	ate) (Z	Zip)												Person					
CARTH	CARTHAGE MO 64836													X	Form filed by One Reporting Person Form filed by More than One Reporting					
(Street)					4. If A	Amend	ment,	Date (	of Origin	nal File	ed (Month/Da	y/Year	)	6. Indi Line)	vidual or	Joint/Grou	p Filing	(Check A	pplicable	
NO. 1 LEGGETT ROAD					11/0	11/04/2022									Ez	xecutive V	ice Pr	resident		
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)								X	Office below	er (give title /)		Other (s	specify	
1. Name and Address of Reporting Person HENDERSON STEVEN K					LEGGETT & PLATT INC [ LEG ]										k all app Direc	,	ig reis	10% Ov		

**Explanation of Responses:** 

Remarks:

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

fact \*\* Signature of Reporting Person Date

11/07/2022

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

- $^{\star}$  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.