FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, D. | C. 20549 |
|----------------|----------|
|----------------|----------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

|  | tion 1(b).  | nuc. See                                   |   | Filed     | pursua<br>or Se   | ant to S<br>ection 3   | Section<br>30(h) o                      | 16(a)<br>of the I | of the nvestm | Securi<br>ent Co | ities Exchang<br>ompany Act o | e Act of<br>f 1940 | 1934  |  |  | nours                        | per re   | esponse:   | 0.5                             |  |
|--|---|--|---|-----------|---|--|---|-------------------|---------------|------------------|-------------------------------|--------------------|---|--|--|------------------------------|--|--|---------------------------------|--|
| 1. Name and Address of Reporting Person*  Douglas Scott S        |   |  |   |           | 2. Issuer Name and Ticker or Trading Symbol     LEGGETT & PLATT INC [ LEG ]      3. Date of Earliest Transaction (Month/Day/Year) |  |   |                   |               |                  |                               |                    |   | 5. Relationship of R (Check all applicabl Director X Officer (giv below)   |  |                              | ıble)  |  | 10% Owner Other (specify below) |  |
| (Last) (First) (Middle)  NO. 1 LEGGETT ROAD                      |   |  |   |           | 10/09/2020  |  |   |                   |               |                  |                               |                    | SVP-Gen. Counsel and Secretary  |  |  |                              |  |  |                                 |  |
| (Street) CARTHA  |   |  | 4836<br>Zip)                              |           | 4. If <i>i</i>  | 4. If Amendment, Date of Original Filed (Month/Day/Year)                               |   |                   |               |                  |                               |                    |   | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |  |                              |  |  |                                 |  |
|  |   | Table                                      | I - No                                    | on-Deriva | tive \$   | Secui  | rities                                  | Acc               | quirec        | l, Dis           | sposed of                     | , or B             | enefic  | ially (  | Own  | ed                           |  |  |                                 |  |
| 1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/ |   |  |   |           | Execution Date,   |  | 3.<br>Transaction<br>Code (Instr.<br>8) |                   |               |                  |                               | d 5)   S           | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported |  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)  |                              | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4)        |  |                                 |  |
|  |   |  |   |           |   |  |   |                   | Code          | v                | Amount                        | (A) or<br>(D)      | Price   | 1  | ransa  | nsaction(s)<br>str. 3 and 4) |  |  | (                               |  |
| Common Stock 1   |   |  |   | 10/09/20  | 2020  |  |   |                   | A             |                  | 21.1875                       | A                  | \$38.   | .199 49,0  |  | 044.8624                     |  | D  |                                 |  |
| Common Stock 10/09   |   |  |   | 10/09/20  | 020   |  |   | A                 |               | 20.6036          | A                             | \$35.              | 35.952  |  | 49,065.466   |                              | D  |  |                                 |  |
|  |   | Tal  | ble II                                    |           |   |  |   |                   |               |                  | osed of, convertib            |                    |   |  | wned   | t                            |  |  |                                 |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)              | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | Execution Date, if any (Month/Day/Year) 8 |           |   | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) |   | Expiration Date   |               |                  | Amount of Securities S        |                    | Derivative Security (Instr. 5) Benefi Ownec Follow Report                 |  | 9. Number<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction<br>(Instr. 4) | у                            | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficia<br>Ownershi<br>(Instr. 4) |                                 |  |

**Explanation of Responses:** 

/s/ S. Scott Luton, attorney-in-10/13/2020

\*\* 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.