Instruction 1(b).

FORM 4

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

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

| Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See | STATEMENT OF CHANGES IN BENEFICIAL | OWNERSHIP |
|---|------------------------------------|-----------|
| obligations may continue. See   |                                    |           |

**OMB APPROVAL** 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

| Name and Address of Reporting Person*     Douglas Scott S        |  |  |         |                                     | 2. Issuer Name and Ticker or Trading Symbol LEGGETT & PLATT INC [ LEG ] |   |  |      |  |                                    |                    |  |   | all app<br>Direc                               | tor   | ng Per  | 10% Ov  | vner   |  |
|--|--|--|---------|-------------------------------------|---|---|--|------|--|------------------------------------|--------------------|--|---|--|---|---|---|--|--|
| (Last)   | (Fii<br>EGGETT R   | ,  | Middle) |                                     | 3. Date of Earliest Transaction (Month/Day/Year) 11/03/2023             |   |  |      |  |                                    |                    |  | X   | below  | er (give title<br>v)<br>Gen. Coun   | ısel a  | Other (s<br>below)<br>nd Secreta                    |  |  |
| (Street)   |  |  |         |                                     | 4. If Amendment, Date of Original Filed (Month/Day/Year)                |   |  |      |  |                                    |                    |  | 6. Individual or Joint/Group Filing (Check Applicable Line) |  |   |   |   |  |  |
| CARTH  | AGE M  | 0 6  | 4836    |                                     |   |   |  |      |  |                                    |                    |  |   | X  | X Form filed by One Reporting Person  Form filed by More than One Reporting  Person |   |   |  |  |
| (City)   | (St  | ate) (Z                                    | Zip)    |                                     | Rule 10b5-1(c) Transaction Indication                                   |   |  |      |  |                                    |                    |  |   |  |   |   |   |  |  |
|  |  |  |         |                                     |   |   | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |      |  |                                    |                    |  |   |  |   |   |   |  |  |
|  |  | Table                                      | I - No  | on-Deriva                           | tive S  | Secui                                       | rities   | Acc  | quired                                       | l, Dis                             | posed of           | , or E   | Benefic   | ially  | Own   | ed  |   |  |  |
| 1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day) |  |  |         | /Year) Execu                        |   | Deemed<br>ution Date,<br>/<br>ith/Day/Year) |  |      |  | Acquired (A)<br>f (D) (Instr. 3, 4 |                    | and 5) Secur<br>Bene<br>Owne                                   |   | cially<br>l Following                          | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)                   |   | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |  |  |
|  |  |  |         |                                     |   |   |  | Code | v  | Amount                             | (A) or<br>(D) Pri  |  |   | Reported<br>Transaction(s)<br>(Instr. 3 and 4) |   |   |   | (Instr. 4)   |  |
| Common   | ommon Stock 11/0   |  |         | 11/03/20                            | .023  |   | A  |      | 44.6402                                      | A                                  | \$20.              | 264  | 75,375.9106   |  |   | D   |   |  |  |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |  |         |                                     |   |   |  |      |  |                                    |                    |  |   |  |   |   |   |  |  |
| 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) | if any  | eemed<br>ition Date,<br>h/Day/Year) | 4.<br>Transaction<br>Code (Instr.<br>8)                                 |   | 5. Number<br>of<br>Derivative<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3, 4<br>and 5)  |      | 6. Date Exer<br>Expiration Da<br>(Month/Day/ |                                    | ate                | 7. Title<br>Amou<br>Secur<br>Under<br>Deriva<br>Secur<br>3 and | nt of<br>ities<br>rlying<br>ative<br>ity (Instr.<br>4)      | Der<br>Sec<br>(Ins                             | Price of<br>rivative<br>curity<br>str. 5)   | 9. Number of<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>Beneficial<br>Ownership<br>(Instr. 4) |
|  |  |  |         |                                     | Code  | v   | (A)  | (D)  | Date<br>Exerci                               | isable                             | Expiration<br>Date | Title  | Amount<br>or<br>Number<br>of<br>Shares                      |  |   |   |   |  |  |

**Explanation of Responses:** 

Remarks:

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

fact

\*\* Signature of Reporting Person

11/06/2023

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).