Instruction 1(b).

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
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL							
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

Derivative Security (Instr. 3)	ative Conversion Date Execution Date, if any		Transa	saction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Expiration Date			Amount of Securities Underlying Derivative Security (Ins 3 and 4)  Amount of Security (Ins 5 and 4)		Dei See (Ins	rivative curity str. 5)	ative derivative ity Securities		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)				
1. Title of	2.	Tal	ole II	(e.g., pı			warra		optic	ons,	cisable and		curiti	es)	Owned	9. Number	of 1	10.	11. Nature	_
Common Stock				02/10/2	2023				A		87.6963	A	\$2	7.104 65,2		65,282.7405		D		L
Common Stock 02				02/10/2	023				A		39.1576	A	\$2	3.798	65,1	95.0442		D		
								Code	v	Amount	(A) o	Pric	е		ported insaction(s) str. 3 and 4)			(Instr. 4)		
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired ( Disposed Of (D) (Instr. 3			4 and 5) Sec Ben Owr		. Amount of ecurities eneficially wned Following		r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
		Table	I - No	on-Deriva	tive S	Secui	rities	Acc	quired	l, Dis	sposed of	, or E	Benefi	cially	/ Own	ed				
(City)	(St	ate) (Z	Zip)												Perso		ro triai	Tone rep	orung	
CARTH	AGE M	0 6	4836												Form filed by One Reporting Person Form filed by More than One Reporting					
(Street)					4. If /	Amend	ment,	Date o	of Origin	nal File	ed (Month/Da	y/Year	)	6. Indi Line)	vidual or	Joint/Grou	p Filino	g (Check A	pplicable	
NO 1 LEGGETT ROAD					02/1	02/10/2023									Execu	itive Vice	Presi	dent - CF	FO	
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)								X	Officer (give title below)			Other (s	` ′	
1. Name and Address of Reporting Person Tate Jeffrey L.					LEGGETT & PLATT INC [ LEG ]										k all app Direc	,	ig Per	10% O		

**Explanation of Responses:** 

Remarks:

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

02/13/2023

fact

\*\* Signature of Reporting Person Date

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.