## FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|
|           |            |               |           |

OMB APPROVAL OMB Number:

Estimated average burden hours per response: 0.5

| Filed pursuant to Section 16(a) of the Securities Exchange Act of 1 | 193 |
|---|-----|
| or Section 30(h) of the Investment Company Act of 1940              |     |

| 1. Name and Address of Reporting Person* <u>DAVIS PERRY E</u>                                |       |                  |               |   | 2. Issuer Name and Ticker or Trading Symbol LEGGETT & PLATT INC [ LEG ] |   |                               |                  |   |       |   |                    |  |   | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner |  |  |                            |   |            |  |
|--|-------|------------------|---------------|---|---|---|-------------------------------|------------------|---|-------|---|--------------------|--|---|---|--|--|----------------------------|---|------------|--|
| (Last) (First) (Middle) NO. 1 LEGGETT ROAD   |       |                  |               |   |   | 3. Date of Earliest Transaction (Month/Day/Year) 12/10/2019 |                               |                  |   |       |   |                    |  |   |   | belov  | •  |                            | Other (specify below)                               |            |  |
| (Street) CARTHA  |       |                  | 54836<br>Zip) |   | 4. If   | 4. If Amendment, Date of Original Filed (Month/Day/Year)    |                               |                  |   |       |   |                    |  |   | Line)   | Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person |  |                            |   |            |  |
| 1. Title of Security (Instr. 3)  |       |                  |               | 2. Transa<br>Date   | 2. Transaction  |   | 2A. Deemed<br>Execution Date, |                  | 3. 4. Transaction Di  |       | posed of, or Benefi<br>4. Securities Acquired (A)<br>Disposed Of (D) (Instr. 3, 4<br>5) |                    | d (A) o  | 5. Amou<br>Securiti<br>Benefici<br>Owned I  |   | int of<br>es<br>ally<br>Following  | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)  | Direct<br>ndirect<br>r. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership |            |  |
|  |       |                  |               |   |   |   |                               |                  | Code  | v     | Amount  | (A) or<br>(D) Prid |  | Price   | e   | Reporte<br>Transac<br>(Instr. 3  | tion(s)  |                            |   | (Instr. 4) |  |
| Common Stock   |       |                  | 12/10/2019    |   |   |   |                               | G <sup>(1)</sup> | v   | 580   |   | D                  |  | 0   | 7,651.994   |  | ]  | I                          | By Perry<br>E. Davis<br>Revocable<br>Trust          |            |  |
| Common   | Stock |                  |               | 12/10   | /2019   |   |                               |                  | <b>G</b> <sup>(1)</sup>   | V     | 580   |                    | A  | \$  | 0   | 129,3  | 02.1526  | I                          | )   |            |  |
| Common Stock   |       |                  | 12/10/2019    |   |   |   |                               | G <sup>(2)</sup> | v   | 3,245 | 3,245 D   |                    | \$   | 0   | 3,938   |  | j  | I                          | By Wife's<br>Revocable<br>Trust                     |            |  |
| Common   | Stock |                  |               | 12/10   | /2019   |   |                               |                  | <b>G</b> <sup>(2)</sup>   | V     | 3,245   |                    | A  | \$  | 0   | 132,5  | 47.1526  | I                          | )   |            |  |
|  |       | Та               |               |   |   |   |                               |                  |   |       | osed of,<br>onvertib  |                    |  |   |   | wned   |  |                            |   |            |  |
| Security (Instr. 3) Price of Derivative Security (Month/Day/Year) if any (Month/Day/Year) 8) |       | Transa<br>Code ( | Instr.        | 5. Nu of Deriving Secu Acqu (A) or Dispo of (D) (Instrand 5 | rities<br>iired<br>r<br>osed<br>)<br>: 3, 4                             |   |                               | te               | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares |       | of<br>s<br>og<br>e<br>(Instr. 3<br>mount<br>r<br>umber<br>f                             | De Se (In          | . Price of<br>Perivative<br>Pecurity<br>Pecurity<br>Pecurity | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4)                           | wnership<br>orm:<br>rect (D)<br>Indirect   | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                            |   |            |  |

## **Explanation of Responses:**

- 1. This transaction involved a gift of securities by the reporting person's revocable trust to an account held directly by the reporting person.
- 2. This transaction involved a gift of securities by the reporting person's wife's revocable trust to an account held directly by the reporting person.

/s/ S. Scott Luton, attorney-in-<u>fact</u>

\*\* 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.