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

	tion 1(b).	nuc. See	File								es Exchar npany Act					l	urs per r	esponse:		0.5
1. Name and Address of Reporting Person*  MCCOY SUSAN R					2. Issuer Name and Ticker or Trading Symbol  LEGGETT & PLATT INC [ LEG ]									5. Relationship of Repo (Check all applicable) Director Officer (give til			10%		o Issuer Owner er (specify	
(Last)	(Fii EGGETT R	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/05/2020									SVP - Investor Relations						
(Street)			4836	4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								· .	Individual or Joint/Group Filing (Check Applicatione)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
(City)	(51		Zip) I - Non-Deriva		Secur	rities /	7 cui	ıire	-d [	Dien	n hazn	of or	Renefic	— lei	ly Own					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Ye	2A. Deem		ied n Date,	3. Transact Code (In 8)		tion	4. Securities Ac Disposed Of (D		Acquire	d (A) or		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership		
						Coc	de \	v	Amo		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)		
Common	mmon Stock 06/0		06/05/202	20			A	A		6	.066	A	A \$31.5775		22,399.5367		D			
Common	Stock														1,0	00	I By S		By S	pouse
Common Stock													3,038.579		3.579	I		Held Trust Unde Issue Retir Plan	t er	
		Tal	ble II - Derivat (e.g., p												Owned	t				
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  (Instr. 3)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  3A. Deemed Execution Date, if any (Month/Day/Year)				Transaction Of Code (Instr. 8) Se Ad (A Di of Of Code (Instr. 8) Se Ad (A Di of Of Code (Instr. 8) Se Ad (In		ive ies	Expiration (Month/Da				Amo Secu Unde Deriv	tle and unt of irities erlying vative irity (Instr. d 4)	D S (I	perivative security nstr. 5)	9. Numb derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	re es ally g d tion(s)	10. Ownersh Form: Direct (D or Indirec (I) (Instr.	ip of Bo ) O ct (li	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
							Date				Expiratior		Amount or Number of							

Explanation of Responses:

Scott Luton, attorney-in-

**fact** 

\*\* Signature of Reporting Person Date

06/08/2020

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).