FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APP	ROVAL							
OMB Number: 3235-0287								
Estimated average burden								
hours per response: 0.5								

	tion 1(b).	iue. See		Filed						rities Exchanç Company Act o		1934			hours	per respon	ise:	0.5
1. Name and Address of Reporting Person* Douglas Scott S				LE	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol LEGGETT & PLATT INC [LEG]								tionship of Reportin all applicable) Director Officer (give title		10% O		wner (specify	
(Last) NO. 1 LI	ast) (First) (Middle) IO. 1 LEGGETT ROAD				3. Date of Earliest Transaction (Month/Day/Year) 02/11/2022							9	below) below SVP-Gen. Counsel and Secre				ary	
(Street)	AGE M	O 6	4836		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Lir		ividual or Joint/Group Filing (Check App Form filed by One Reporting Person Form filed by More than One Reporti				on
(City)	(St	ate) (Z	Zip)											Perso	n			
		Table	I - N	on-Deriva	ative	Secui	rities Ac	auiro	d D	isnosed of	f or B	enefici	ally	Own	л ч			
				on Benve		occui	ilies Ac	quire	u, D	эроэси о	, 0. 5	CHCHC	uii y	CVVIII	-u			
1. Title of S	Security (Ins			2. Transactio Date (Month/Day/)	n	2A. Dee Executi if any		3. Transa Code (8)	ction	4. Securities Disposed Of	Acquired	d (A) or	5)	5. Amo Securit Benefic	unt of ies ially Following	6. Owner Form: Di (D) or Inc (I) (Instr.	rect lirect 4)	7. Nature of Indirect Beneficial Ownership
1. Title of S	Security (Ins			2. Transactio Date	n	2A. Dee Executi if any	med on Date,	3. Transa Code (ction	4. Securities	Acquired	d (A) or	5)	5. Amo Securit Benefic	unt of ies ially Following ed ction(s)	Form: Di (D) or Inc	rect lirect 4)	of Indirect Beneficial
1. Title of S				2. Transactio Date	on Year)	2A. Dee Executi if any	med on Date,	3. Transa Code (8)	action Instr.	4. Securities Disposed Of	Acquired (D) (Instr	d (A) or r. 3, 4 and	5)	5. Amo Securit Benefic Owned Reporte Transa (Instr. 3	unt of ies ially Following ed ction(s)	Form: Di (D) or Inc	rect lirect 4)	of Indirect Beneficial Ownership
	Stock			2. Transactio Date (Month/Day/\	rear)	2A. Dee Executi if any	med on Date,	3. Transa Code (8)	action Instr.	4. Securities Disposed Of Amount	Acquired (D) (Insti	d (A) or r. 3, 4 and Price	5)	5. Amo Securit Benefic Owned Report Transa (Instr. 3	unt of ies ially Following ed ction(s)	Form: Di (D) or Inc (I) (Instr.	rect lirect 4)	of Indirect Beneficial Ownership
Common	Stock	tr. 3)		2. Transactio Date (Month/Day/N 02/11/20 02/11/20 - Derivati	rear) 22 22 ive S	2A. Dee Executi if any (Month/	emed on Date, Day/Year)	3. Transa Code (8) Code	v V Dis	4. Securities Disposed Of Amount 26.5631	(A) or (D) A A Or Bei	Price \$32.49	55) 955 84	5. Amo Securit Benefic Owned Reporte Transa (Instr. 3	unt of ies idly Following ed etion(s) and 4) 01.5119 81.6937	Form: Di (D) or Inc (I) (Instr.	rect lirect 4)	of Indirect Beneficial Ownership

Explanation of Responses:

Remarks:

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

Amount

of Shares

Title

fact

Expiration

** Signature of Reporting Person Date

Transaction(s) (Instr. 4)

02/14/2022

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).

Code

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.

of (D) (Instr. 3, 4 and 5)

(A) (D) Date

Exercisable