FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB Number: Estimated average burden hours per response: 0.5

OMB APPROVAL

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* HENDERSON STEVEN K						2. Issuer Name and Ticker or Trading Symbol LEGGETT & PLATT INC [LEG]								(Check	tionship of Reportin all applicable) Director Officer (give title		g Person(s) to Issuer 10% Owner Other (specify	
(Last) (First) (Middle) NO. 1 LEGGETT ROAD					3. Date of Earliest Transaction (Month/Day/Year) 01/15/2020								X	belov	w) ``	below below	v) `	
(Street) CARTHAGE MO 64836					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Indiv Line) X				
(City)	(St		Zip) e I - N	on-Deriv	/ative	Secu	uritie	s Ac	auire		sposed o	f. or E	Benefic	ially				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				tion 2A. Deen Execution					ction Instr.	4. Securities Acquired (A)		ed (A) or		5. Ame Securi Benefi	ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price		Transa	action(s) 3 and 4)		(Instr. 4)
Common Stock 01/15/20								A		25.0447	A	1	3415	17,322.2029		D		
Common Stock 01/15/20					2020	20		A		56.6586	A	\$40	\$40.792		17,378.8615			
		Та	ble II								osed of, convertib				wned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, //Day/Year)	4. Transa Code (8)				6. Date Exerc Expiration Do (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Deri Sec (Ins	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

/s/ S. Scott Luton, attorney-in-01/16/2020

fact

** Signature of Reporting Person

Date

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.

 $^{^{\}star}$ 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).