#### MILLER HERMAN INC

Form 4 July 22, 2014

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB Number: 3235-0287

**OMB APPROVAL** 

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

0.5

Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

burden hours per response...

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See Instruction 1(b).

(Print or Type Responses)

1 Name and Address of Departing De

WALKER	BRIAN C	-	Symbol	nd Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer				
			MILLER HER	MAN INC [MLHR]	(Chec	ck all applicab	ole)		
(Last)	(First)	(Middle)	3. Date of Earliest	Transaction					
			(Month/Day/Year	)		10			
855 EAST MAIN AVENUE, P.O.			07/18/2014		_X_ Officer (give below)	e title Ot below)	her (specify		
BOX 302					below)	CEO			
(Street)			4. If Amendment,	Date Original	6. Individual or Joint/Group Filing(Check				
			Filed(Month/Day/Y	ear)	Applicable Line)				
					_X_ Form filed by One Reporting Person Form filed by More than One Reporting				
ZEELAND	), MI 49464				Person	Aore than One F	Reporting		
(City)	(State)	(Zip)	Table I - Noi	n-Derivative Securities Acq	quired, Disposed of	f, or Benefici	ally Owned		
1.Title of	2. Transaction	Date 2A. Deem	ed 3.	4. Securities Acquired	5. Amount of	6.	7. Nature o		

(City)	(State)	(Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securi or(A) or D (Instr. 3,	ispose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	07/18/2014		M	5,825	A	\$ 0	217,352.872 (1)	D		
Common Stock	07/18/2014		F	2,803	D	\$ 30.49	214,549.872	D		
Common Stock							88,554.984	I	by Spouse	
Common Stock							5,415.407	I	by profit share plan	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pr Derri Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted Stock Units	<u>(2)</u>	07/18/2014		M	5,825	(3)	(3)	Common Stock	5,825	

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

WALKER BRIAN C 855 EAST MAIN AVENUE P.O. BOX 302

CEO

ZEELAND, MI 49464

### **Signatures**

By: Angela M. Shamery For: Brian C. Walker 07/22/2014

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

- \* 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).
- (1) The directly owned common stock holdings reflected in Table I of this form include shares acquired through participatation in the Herman Miller Dividend Reinvestment Plan, which satisfies the exemption of Rule 16b-2.
- (2) Each restricted stock unit represents a contingent right to receive one share of MLHR common stock.
- (3) The restricted stock units have a three year cliff vest.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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