Instruction 1(b).

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,	DC	20549
vvasilington,	D.O.	20070

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

						() -				opay 7 tot	. 0	<u> </u>							
Name and Address of Reporting Person* Owen Andrea					2. Issuer Name and Ticker or Trading Symbol MILLERKNOLL, INC. [ MLKN ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Owen A	Andrea									J				Direc			10% Ov	-	
				a									X		er (give title		Other (s	specify	
(Last)	(Fir	rst) (f	Middle)				t Trar	nsactio	on (Mont	h/Day/Year)	)			below	,		below)		
855 EAST MAIN AVENUE				10/0	10/03/2022							President & CEO							
P.O. BOX 302																			
F.O. BO.	A 302			4 If	4. If Amondment, Date of Original Filed (Month/Dov/Veer)							2r) 6	6. Individual or Joint/Group Filing (Check Applicable						
				4. "	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)						
(Street)			0.1.5.1										X	-/					
ZEELAN	ND M	1 4	9464											Form filed by More than One Reporting				ortina	
														Perso			оо г сорт	og	
(City)	(St	ate) (2	Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of	Security (Inst	tr. 3)	2. Transactio		2A. Deemed 3. 4. Securities Acquired (A) or										7. Nature				
			Date (Month/Day/Y		Execution Date, ar) if any			Transaction Dispose Code (Instr.		Disposed Of	Of (D) (Instr. 3, 4 ar		nd 5) Secur Benef					of Indirect Beneficial	
[,			[, , ,		(Month/Day		ay/Year)		8)					Owned Followin Reported		Indirect (I)		Ownership	
						Γ	Code	V A	Amount	(A) or (D)	Price	Tran		nsaction(s)		(Instr. 4)	(Instr. 4)		
								Code	ľ	anount	(D)	File		(Instr.	3 and 4)				
Common Stock 10/03/202			22				P		60,606	A	\$16.878	5.8789 <sup>(1)</sup> 100,468			D				
		Tal	ole II - Derivat	ive S	ocurit	tios A	Δςα	uiro	d Dier	nosed of	or F	eneficia	IIv C	wna	4				
		· · ·								converti				WIIC	•				
1. Title of	2.	3. Transaction	3A. Deemed	4.			ımbe			xercisable and		itle and	8. Price				0.	11. Nature	
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution Date, if any		action (Instr.	of Deriv	/ative		piration Donth/Day/			ount of urities		vative urity	derivative Securities		Ownership Form:	of Indirect Beneficial	
(Instr. 3)	Price of Derivative	`	(Month/Day/Year)	8)	•	Securitie		es				lerlying	(Instr. 5)		Beneficially Owned		Direct (D)	Ownership	
	Security				Acquired (A) or				Derivative Security (Ins				tr.		Following	ng (I) (Instr. 4)		(Instr. 4)	
					Disposed 3 and of (D)				nd 4)			Reported Transaction	n/e)						
				(Instr. 3, 4			4					(Instr. 4)	(3)						
					and 5)														
												Amount							
												or Number							
				Code	l <sub>v</sub>	(A)	(D)	Dat	te ercisable	Expiration Date	n   Title	of Shares							
		I	I	1	1.	1 '''	ı (-)	1 -^-		1	1	1	1		I	- 1		1	

## **Explanation of Responses:**

1. Represents the weighted average purchase price. The lowest price at which shares were purchased was \$16.3949 and the highest price at which shares were purchased was \$17.0013.

By: Jacqueline H. Rice For: 10/04/2022 Andrea R. Owen

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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).

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.