FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* FRENCH DOUGLAS D						2. Issuer Name <b>and</b> Ticker or Trading Symbol  MILLER HERMAN INC [ MLHR ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
TRENCH BOOGLAS D														Directo	r		10% Ow	/ner	
(Last) 855 EAST	(Firs	,		3. Date of Earliest Transaction (Month/Day/Year) 01/20/2016								Officer (give title Other (specification) below)				pecify			
P.O. BOX 302																			
	4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)									
(Street)													- 1 '		led by One	. Reno	rtina Persor	,	
ZEELAND MI 49464														X Form filed by One Reporting Person  Form filed by More than One Reporting					
					.									Person		e man	One Repor	urig	
(City)	(Sta	te) (Z	ip)																
		Tabl	e I - No	n-Deri\	/ative	Seci	uritie	es Ac	quired,	, Dis	posed of	f, or Ber	eficiall	y Owned					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Date,						s Acquired (A) or If (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	tion(s)			(Instr. 4)	
Common Stock 01/20/2						2016			М		976	A	\$0.0	11,052.7492(1)			D		
Common Stock 01/20/2						2016			S		976	D	\$24.923	3 10,076.7492			D		
		T	able II -								osed of, convertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/E		4. Transac Code (Ir		5. Number of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal	ble	Expiration Date	Title	Amount or Number of Shares						
Performance Shares <sup>(2)</sup>	\$0.0 <sup>(3)</sup>	01/20/2016			M			976	01/15/201	19 <sup>(2)</sup>	08/08/1988	Common Stock	976	\$24.923	5,523.25	53 <sup>(4)</sup>	D		

## **Explanation of Responses:**

- 1. The directly owned common stock holdings reflected in Table I of this form include shares acquired through participation in the Herman Miller Dividend Reinvestment Plan, which satisfies the exemption of Rule 16b-2.
- 2. Performance shares are equal to phantom stock units that were accrued under the HMI Nonemployee Officer and Director Deferred Compensation Stock Purchase Plan, and are payable in shares of the Company's Common Stock only.

3. 1 for 1

4. The Number of Derivative Securities Beneficially Owned Following Reported Transaction reflected in Table II of this form include shares acquired through participation in the Herman Miller Dividend Reinvestment Plan, which satisfies the exemption of Rule 16b-2.

By: Angela M. Shamery For:
Douglas D. French

01/22/2016

\*\* Signature of Reporting Person Date

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).

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.