FORM 3

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Smith Mike C. Requirin (Month/E			Date of Event equiring Staten Month/Day/Year 1/16/2019	nent	3. Issuer Name and Ticker or Trading Symbol  MILLER HERMAN INC [ MLHR ]						
(Last) (First) (Middle) 855 EAST MAIN AVENUE					ationship of Reporting Perso ( all applicable) Director	son(s) to Issuer		5. If Amendment, Date of Original Filed (Month/Day/Year)			
P.O. BOX 302					Officer (give title below)		Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person		
(Street) ZEELAND	MI	49464								y More than One	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					2. Amount of Securities Beneficially Owned (Instr. 4)  3. Ownersh Form: Direct or Indirect ( (Instr. 5)		t (D) (Instr. 5)				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)  2. Date Exercis Expiration Date (Month/Day/Yes			ate	and 3. Title and Amount of Secu Underlying Derivative Secu		ty (Instr. 4) Conve		ise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
			Date Exercisable	Expiratio Date	n Title	3	Amount or Number of Shares	Price of Derivativ Security			

Explanation of Responses:

No securities are beneficially owned.

By: Angela M Shamery For: Michael C Smith

01/18/2019

\*\* 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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).