MILLER HERMAN INC

Form 4 July 21, 2016

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * McDonald Louise M.

2. Issuer Name and Ticker or Trading Symbol

MILLER HERMAN INC [MLHR]

5. Relationship of Reporting Person(s) to

(Check all applicable)

OMB

Number:

Expires:

response...

Estimated average

burden hours per

Issuer

(Last)

(First)

(Middle)

(Zip)

3. Date of Earliest Transaction

(Month/Day/Year) 07/19/2016

Director Officer (give title

10% Owner __X__ Other (specify below)

OMB APPROVAL

3235-0287

January 31,

2005

0.5

855 EAST MAIN AVENUE, P.O. BOX 302

(Street)

(State)

(City)

4. If Amendment, Date Original

Filed(Month/Day/Year)

President - HM Healthcare 6. Individual or Joint/Group Filing(Check

Applicable Line)

X Form filed by One Reporting Person Form filed by More than One Reporting

Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

below)

ZEELAND, MI 49464

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) (Instr. 3)

Execution Date, if (Month/Day/Year)

3. 4. Securities TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

Code V Amount (D) Price

(A)

5. Amount of Securities Beneficially Owned Following Reported

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect Beneficial Ownership (I) (Instr. 4) (Instr. 4)

Transaction(s) (Instr. 3 and 4)

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

1. Title of 3. Transaction Date 3A. Deemed 5. Number of 6. Date Exercisable and 7. Title and Amour 4. Derivative Conversion (Month/Day/Year) Execution Date, if **Transaction**Derivative **Expiration Date Underlying Securit** Securities Security or Exercise Code (Month/Day/Year) (Instr. 3 and 4) any

Edgar Filing: MILLER HERMAN INC - Form 4

(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired or Dispose (D) (Instr. 3, 4 and 5)	ed of			
				Code V	(A)	(D) Date Exercisable	Expiration Date	Title	Amo or Num of Sh
Non-Qualified Stock Option (right to buy)	\$ 31.86	07/19/2016		A	22,710 (1)	(2)	07/19/2026	Common Stock	22,7
Non-Qualified Stock Option (right to buy)	\$ 31.86	07/19/2016		A	16,473	(2)	07/19/2026	Common Stock	16,4
Restricted Stock Units	<u>(3)</u>	07/19/2016		A	2,846	<u>(4)</u>	<u>(4)</u>	Common Stock	2,8

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

McDonald Louise M. 855 EAST MAIN AVENUE P.O. BOX 302 ZEELAND, MI 49464

President - HM Healthcare

Signatures

By: Angela M. Shamery For: Louise M. McDonald

07/21/2016

**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) Stock option granted based on the achievement of one-year performance objectives in FY16 which was approved in July 2015 by the Herman Miller, Inc. Board of Directors.
- (2) This grant vests in three equal annual installments beginning on the first anniversary of the grant date.
- (3) Each restricted stock unit represents a contingent right to receive one share of MLHR common stock.
- (4) 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.

Reporting Owners 2