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MILLER HERMAN INC

Reported by

RAMIREZ MICHAEL F.

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 07/20/11 for the Period Ending 07/18/11

Address	855 E MAIN AVE PO BOX 302 ZEELAND, MI 49464-0302
Telephone	6166543000
CIK	0000066382
Symbol	MLHR
SIC Code	2520 - Office Furniture
Industry	Furniture & Fixtures
Sector	Consumer Cyclical
Fiscal Year	05/30

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FORM 4

[ ] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

OMB APPROVAL
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *	2. Issuer Name **and** Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
Ramirez Michael F. (Last) (First) (Middle)	**MILLER HERMAN INC [MLHR]**	_____ Director _____ 10% Owner
855 EAST MAIN AVENUE, P.O. BOX 302 (Street)	3. Date of Earliest Transaction (MM/DD/YYYY) **7/18/2011**	_____ Officer (give title below) __ **X** __ Other (specify below) **SVP of People, Places & Admin**
ZEELAND, MI 49464 (City) (State) (Zip)	4. If Amendment, Date Original Filed (MM/DD/YYYY)	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

1.Title of Security (Instr. 3)	2. Trans. Date	2A. Deemed Execution Date, if any	3. Trans. Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			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)
			Code	V	Amount	(A) or (D)	Price			

Table II - Derivative Securities Beneficially Owned (*e.g.* , puts, calls, warrants, options, convertible securities)

1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. 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		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Non-Qualified Stock Option (right to buy)	**$25.75**	**7/18/2011**		**A**		**5659**		(1)	**7/18/2021**	**Common Stock**	**5659**	**$0**	**5659**	**D**	
Restricted Stock Units	(2)	**7/18/2011**		**A**		**1116**		(3)	(3)	**Common Stock**	**1116**	**$0**	**1116**	**D**	

Explanation of Responses:

(1) This grant vests in three equal annual installments beginning on the first anniversary of the grant date.

(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.

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Ramirez Michael F. **855 EAST MAIN AVENUE** **P.O. BOX 302** **ZEELAND, MI 49464**				**SVP of People, Places & Admin**

Signatures

By: Angela C. Burgess For: Michael F. Ramirez	**7/20/2011**
** 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 control number.