MILLER HERMAN INC

Form 4

October 03, 2006

FORM 4

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

OMB

Number: 3235-0287

OMB APPROVAL

Expires: January 31, 2005 Estimated average

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burden hours per response...

5. Relationship of Reporting Person(s) to

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

2. Issuer Name and Ticker or Trading

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 *

NICKELS ELIZABETH A			Symbol	Symbol				Issuer				
			MILLE	MILLER HERMAN INC [MLHR]					(Check all applicable)			
(Last)	(First)	(Midd	dle) 3. Date of	3. Date of Earliest Transaction					(Check un applicable)			
				(Month/Day/Year)				Director 10% Owner				
855 EAST MAIN AVENUE, P.O.			O. 10/02/2	10/02/2006				X Officer (give title Other (specify below)				
BOX 302									EVP CFO			
(Street)			4. If Am	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
			Filed(Mo	Filed(Month/Day/Year)				Applicable Line)				
								X Form filed by One Reporting Person Form filed by More than One Reporting				
ZEELAND, MI 49464								Person				
(City)	(State)	(Zip	Tak	le I - Non-I	Derivative	Secur	rities Acq	uired, Disposed o	of, or Beneficial	ly Owned		
1.Title of	2. Transaction I	Date 2A	A. Deemed	3.	4. Secur			5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye		xecution Date, if					Securities	Form: Direct			
(Instr. 3)		an (N	ny Month/Day/Year)	Code (Instr. 3, 4 and 5) ay/Year) (Instr. 8)			. 5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(()				Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported				
						or		Transaction(s) (Instr. 3 and 4)				
C				Code V	Amount	(D)	Price	, , , , , , , , , , , , , , , , , , , ,				
Common Stock (1)	10/02/2006			D	1,520	D	\$ 33.97	55,342.341	D			
Common Stock	10/02/2006			S	500	D	\$ 33.97	54,842.341	D			
Common Stock								1,063.319	I	by profit share plan		

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

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number.

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

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	e and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amou	nt of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securi	ities	(Instr. 5)	Bene
	Derivative				Securities			(Instr.	3 and 4)		Own
	Security				Acquired						Follo
					(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or Number		
						Exercisable	Date		of		
				Code V	(A) (D)				Shares		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships
Reporting Owner Name / Address	

Director 10% Owner Officer Other

NICKELS ELIZABETH A 855 EAST MAIN AVENUE P.O. BOX 302

EVP CFO

ZEELAND, MI 49464

Signatures

By: Angela C. Burgess For: Elizabeth A. Nickels

10/03/2006

**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) The directly owned common stock holdings reflected in Table I of this form include shares purchased through Herman Miller's 1995 Employees' Stock Purchase Plan, which satisfies the exemption requirements of Rule 16b-3.

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.

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