

MILLER INDUSTRIES INC /TN/
Form SC 13G
February 14, 2003

SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

SCHEDULE 13G

Under the Securities Exchange Act of 1934
(Amendment No. _____)*

Miller Industries

(Name of Issuer)

Common Stock

(Title of Class of Securities)

600551105

(CUSIP Number)

Check the following box if a fee is being paid with this statement []. (A fee is not required only if the filing person: (1) has a previous statement on file reporting beneficial ownership of more than five percent of the class of securities described in Item 1; and (2) has filed no amendment subsequent thereto reporting beneficial ownership of five percent or less of such class.) (See Rule 13d-7.)

* The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

(Continued in following page(s))

Page 1 of 4 Pages

CUSIP NO. 600551105

13G

Page 2 of 4 Pages

- 1. NAME OF REPORTING PERSON
S.S. or I.R.S. IDENTIFICATION NO. OF ABOVE PERSON

Account Management, LLC
04-3560441

- 2. CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP*

(a) []
(b) [X]

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3. SEC USE ONLY

4. CITIZENSHIP OR PLACE OF ORGANIZATION

Massachusetts

5. SOLE VOTING POWER
NUMBER OF SHARES -0-

6. SHARED VOTING POWER
BENEFICIALLY OWNED BY EACH REPORTING PERSON WITH -0-

7. SOLE DISPOSITIVE POWER
823,530

8. SHARED DISPOSITIVE POWER
-0-

9. AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON

823,530

10. CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES*

11. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9)

8.8%

12. TYPE OF REPORTING PERSON*

Investment Advisor (including its Profit Sharing Plan and its officers and their families)

*SEE INSTRUCTIONS BEFORE FILLING OUT!

Item 1(a) Name of Issuer:
Miller Industries

Item 1(b) Address of Issuer's Principal Executive Offices:
8503 Hilltop Drive, Ooltewah, TN 37363

Item 2(a) Name of Person Filing:
Account Management, LLC

Item 2(b) Address of Principal Business Office:
2 Newbury Street, Boston, MA 02116

Item 2(c) Citizenship:
Massachusetts

Item 2(d) Title of Class of Securities:
Common Stock

Item 2(e) CUSIP Number:

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600551105

Item 3. If this statement is filed pursuant to Rules 13d-1(b) or 13d-2(b), check whether the person filing is a:

(e) (xx) Investment Adviser registered under section 203 of the Investment Advisers Act of 1940

Item 4. Ownership

(a) Amount Beneficially Owned:
823,530

(b) Percent of Class:
8.8%

(c) Number of shares as to which such person has:
(i) sole power to vote or to direct the vote: -0-
(ii) shared power to vote or to direct the vote: -0-
(iii) sole power to dispose or to direct the disposition of 823,530
(iv) shared power to dispose or to direct the disposition of -0-

Item 5. Ownership of Five Percent or Less of a Class.

Page 3 of 4

Item 6. Ownership of More than Five Percent on Behalf of Another Person.
N.A.

Item 7. Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on by the Parent Holding Company.
N.A.

Item 8. Identification and Classification of Members of the Group.
N.A.

Item 9. Notice of Dissolution of Group.
N.A.

Item 10. Certification.

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired in the ordinary course of business and were not acquired for the purpose of and do not have the effect of changing or influencing the control of the issuer of such securities and were not acquired in connection with or as a participant in any transaction having such purposes or effect.

Signature.

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

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February 13, 2003

Date

/s/ Peter deRoethh

Signature

Peter deRoethh, Principal

Name/Title