Edgar Filing: SCOTTS MIRACLE-GRO CO - Form 4

SCOTTS MI Form 4	RACLE-GRO CO)							
July 22, 2013	3								
							OMB A	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287 January 31, 2005	
Check this box if no longer						Expires:			
subject to STATEMENT OF CHANGES				ES IN BENEFICIAL OWNERSHIP OF SECURITIES			Estimated average burden hours per response 0.		
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns inue. Section 17(a)	uant to Section) of the Public 30(h) of the	Utility Hole	ding Cor	npan	y Act of	1935 or Sectio	n	
(Print or Type F	Responses)								
HAGEDORN PAUL Symbol SCOT			ol			5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
			SCOTTS MIRACLE-GRO CO [SMG]						
	DORN PARTNER DRT WASHINGT	(Month SHIP, 07/19)	of Earliest Tr /Day/Year) 2013	ransaction			Director Officer (give below)	titleOtho	
(Street) 4. If Am			endment, Date Original			6. Individual or Joint/Group Filing(Check			
	onth/Day/Year	h/Day/Year) Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting							
PORTWAS	SHINGTON, NY 1	1050					Person		1 0
(City)	(State) (Z	Zip) Ta	ble I - Non-E	Derivative	Secur	rities Acq	uired, Disposed of	f, or Beneficial	lly Owned
1.Title of Security (Instr. 3)			3. 4. Securities Acquired te, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (A) (A) or		d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Shares	07/19/2013		Code V $S(\underline{1})$	Amount 9,358	(D) D	Price \$ 50.03		Ι	See footnotes (2) (3)

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

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.

Edgar Filing: SCOTTS MIRACLE-GRO CO - Form 4

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	Date	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Relationships						
1	Director	10% Owner	Officer	Other				
HAGEDORN PAUL C/O HAGEDORN PARTNERSHIP, L.P. 800 PORT WASHINGTON BOULEVAR PORT WASHINGTON, NY 11050	D	Х						
Signatures								
/s/ Rob McMahon - Attorney-in-Fact	07/22/2013							
**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) Represents the sale for the account of Paul Hagedorn and certain family members of a portion of their proportionate interest in the Issuer's common shares (the "Common Shares") held by the Hagedorn Partnership, L.P.
- Pursuant to Exchange Act Rule 16a-1(a)(1), the Reporting Person may be deemed, solely for purposes of determining whether he is a
 (2) beneficial owner of more than 10% of the Common Shares, to be the beneficial owner of the securities of the Issuer that are held by Hagedorn Partnership, L.P., a Delaware limited partnership in which the Reporting Person is a general partner.
- (3) Represents the aggregate proportionate interest of Paul Hagedorn and those family members in whose holdings he may be deemed to have a pecuniary interest in the Common Shares held by Hagedorn Partnership, L.P.

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.