Edgar Filing: SCOTTS MIRACLE-GRO CO - Form 4

| SCOTTS MI Form 4 August 28, 2 | RACLE-GRO 013 | CO | | | | | | | | | |
|--|--|---|------------------------------------|---|--|--------|--|--|---|---|--|
| FORN Check thi if no long | 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | OMB AF OMB Number: Expires: | PROVAL 3235-0287 January 31, | | |
| subject to Section 1 Form 4 o Form 5 obligation may cont See Instru 1(b). | 6. r Filed p ns inue. | 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(h) of the Investment Company Act of 1940 | | | | | | | Estimated average burden hours per response 0.5 | | |
| (Print or Type F | | * | | | | | | 5 5 1 1. | | | |
| Lyski James Symbo | | | | ΓΤS MIRACLE-GRO CO | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| | (First) COTTS MIRA 7, 14111 SCOT | | 3. Date of (Month/D 08/26/20 | - | ansaction | | | Director X Officer (give below) EVP Chie | | Owner er (specify ficer | |
| | | | | endment, Date Original nth/Day/Year) | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person | | | | |
| MARYSVII | LLE, OH 4304 | 1 | | | | | | Form filed by M Person | Iore than One Re | porting | |
| (City) | (State) | (Zip) | Table | e I - Non-D | Derivative S | Securi | ties Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Da (Month/Day/Yea | r) Execution any | | Code (Instr. 8) Code V | 4. Securit or(A) or Dis (Instr. 3, 4 Amount 23.355 | sposed | 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) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Shares | 08/26/2013 | | | А | <u>(1)</u> | А | » 54.66 | 853.62 | D | | |

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.

 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. Transactic Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | le and unt of rlying ities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|-----------------------|---|---|--|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

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Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|-----------|-----------------------------------|-------|--|--|--|
| 1 O | Director | 10% Owner | Officer | Other | | | |
| Lyski James C/O THE SCOTTS MIRACLE-GRO COMPANY 14111 SCOTTSLAWN ROAD MARYSVILLE, OH 43041 | | | EVP Chief Marketing Officer | | | | |
| Signatures | | | | | | | |
| Kathy L. Uttley as attorney-in-fact for James R. Lyski | 08/28/20 | 013 | | | | | |
| **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) Reflects common shares of the Issuer represented by amount credited to the benchmark Company stock fund within the reporting person's bookkeeping account under The Scotts Company LLC Executive Retirement Plan.

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.