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SCOTTS MI	IRACLE-GRO	CO									
Form 4											
December 03	3, 2014										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB	3235-0287		
Check the	is box		vv a	sington,	, D.C. 20	549			Number:	January 31,	
if no longer								Expires:	2005		
subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							Estimated average burden hours per response 0.5				
Section 16. SECURITIES											
Form 5		oursuant to S	Section 1	6(a) of th	e Securit	ies E	xchange	e Act of 1934,	16300136	0.0	
obligation	ns Section 1						•	1935 or Section	1		
may cont See Instru	inue.			vestment	•	· ·					
1(b).	uction	. ,			•	-					
(Print or Type I	Responses)										
1 1 1 1		· p *						5 0 1 41 11 6			
	ddress of Reporti	ing Person _		er Name and Ticker or Trading			5. Relationship of Reporting Person(s) to Issuer				
SANDERS BARRY W Symbol											
				ГS MIRACLE-GRO CO				(Check all applicable)			
			[SMG]								
(Last)	(First)	(Middle)		f Earliest Transaction				Director 10% Owner X Officer (give title Other (specify			
		CLE CDO		/Day/Year)				below) below)			
C/O THE SCOTTS MIRACLE-GRO 12/01/2014 COMPANY, 14111 SCOTTSLAWN								Presi	dent and COO		
ROAD	, 14111 5001										
Rond	(Sture et)		4 10 4							(21 1	
(Street) 4. If Amend Filed(Month				endment, Date Original			6. Individual or Joint/Group Filing(Check				
				illi/Day/Teal	()			Applicable Line) _X_ Form filed by One Reporting Person			
MARYSVI	LLE, OH 4304	1						Form filed by M			
								Person			
(City)	(State)	(Zip)	Tab	le I - Non-E	Derivative S	Secur	ities Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction D	Date 2A. Deen	ned	ed 3. 4. Securities Acquired				5. Amount of	6.	7. Nature of	
Security	(Month/Day/Yea	ar) Execution	n Date, if Transaction(A) or Disposed of (D)						Ownership		
(Instr. 3)		Code (Instr. 3, 4 and 5)				5)	Beneficially Owned	Form: Direct (D) or	ct Beneficial Ownership		
(Month/Day/Year)			(Instr. 8)				Following	Indirect (I)	(Instr. 4)		
						(A)		Reported	(Instr. 4)		
						or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	12/01/2014			А	4.5796	А	\$	647.0382	Ι	By DSPP	
Shares	12/01/2014			11	1.5790	11	54.59	017.0302		(1)	

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)	3. Transaction Date (Month/Day/Year)	Code	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owno Follo Repo Trans (Instr
		Code V	(A) (D)	Date Exercisable	Expiration Date		Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
SANDERS BARRY W C/O THE SCOTTS MIRACLE-GRO COMPANY 14111 SCOTTSLAWN ROAD MARYSVILLE, OH 43041			President and COO			
Signatures						
Kathy L. Uttley as attorney-in-fact for Barry W. Sanders	12	2/03/2014				
**Signature of Reporting Person		Date				
Explanation of Responses:						

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) Common shares acquired under The Scotts Miracle-Gro Company Discounted Stock Purchase Plan (DSPP).

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.