Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, I	D.C.	20549
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STATEMENT C	OF CHANGES I	N BENEFICIAL	OWNERSHIP

OMB APPROVAL								
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Hagedorn Christopher</u>				2. Issuer Name and Ticker or Trading Symbol SCOTTS MIRACLE-GRO CO [SMG]						5. Relationship (Check all app Direc		licable) tor		10% Ov	vner				
(Last)	•	rst) (I	Middle)	PANY	3. Date of Earliest Transaction (Month/Day/Year) 01/23/2024							X	Office below	er (give title v) Division		Other (s below) ident	specify		
14111 SCOTTSLAWN ROAD				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)					6. Inc Line)	6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street)				-							X	X Form filed by One Reporting Person				on			
l ` ′	VILLE OI	H 4	3041												Form filed by More than One Reporting Person				orting
(City)	(St	ate) (2	Zip)		Rul	Rule 10b5-1(c) Transaction Indication													
	Check this box to indicate that a transaction was made pursuant satisfy the affirmative defense conditions of Rule 10b5-1(c). See																		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr.			, 4 and Securit Benefic Owned		ties For cially (D) I Following (I) (I		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership						
								Code	v	Amount	(A) (D)	or P	rice	Reporte Transa (Instr. 3	orted nsaction(s) tr. 3 and 4)			(Instr. 4)	
Common Shares 01/2			01/23/2	2024 ⁽¹⁾			A		7,294	A		\$ <mark>0</mark>	66,978.0644			D			
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)	Derivative Conversion Date Execution Date, Gecurity or Exercise (Month/Day/Year) if any		4. Transa Code (8)			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

1. On February 3, 2023, the Issuer made a grant to the Reporting Person of 7,294 performance units (the "2023 grant"). Under the award agreement, the 2023 grant included an enhanced issuance provision under which the Reporting Person would receive a range of 50% to 100% of the original grant depending on certain pre-determined performance criteria over the entirety of the plan performance period. On January 23, 2024, the Compensation Committee of the Issuer's Board of Directors determined that the performance measures related to the 2023 grant were satisfied to the extent required to permit for the issuance of shares equal to 100% of the original grant. The grant continues to be subject to service based vesting requirements that will be fully satisfied on February 3, 2026.

Remarks:

/s/ Kathy L. Uttley as attorney-in-fact for Christopher J. Hagedorn

** Signature of Reporting Person

01/25/2024

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.