Check this

FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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Check this box if no longer subject	,
to Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** 3235-0287 Estimated average burden hours per response: 0.5

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*  Hagedorn Partnership, L.P.						2. Issuer Name and Ticker or Trading Symbol SCOTTS MIRACLE-GRO CO [ SMG ]									all app Direc	tor	ng Pe X	10% O	Owner
(Last) 800 POR	(Fir T WASHIN	st) (M	Middle VAR	,		3. Date of Earliest Transaction (Month/Day/Year) 06/19/2020									Office	er (give title		Other ( below)	specify
(Street) PORT WASHIN	NGTON N	ζ 1	1050		4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)									Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	(Sta		Zip)			_									_				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y			Year)	Execution D		on Date,		ction Instr.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			nd 5) Securi Benefi		ities F icially (I d Following (I		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price	Trans		action(s) 3 and 4)			(1130.4)
Common	Common Shares 06/19/202					20			S <sup>(1)</sup>		1,911	D	\$130.	.3 <sup>(2)</sup> 14		14,796,044		D	
Common Shares 06/19/20				20						8,070	D	\$131.	.13 <sup>(3)</sup> 14		14,787,974		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)    Execution Date, if any (Month/Day/Year)   Transaction Code (Instr. 8)   A (# D D (Instr. 8)   Code (Instr. 8)   C				of Deriv Secu Acqu (A) o Dispo	r osed ) r. 3, 4	Expir	te Exer ration D th/Day/		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Der Sec	ivative curity etr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amount or Number of Shares						

## **Explanation of Responses:**

- 1. The transactions reported in this Form 4 were made pursuant to a Rule 10b5-1 trading plan.
- 2. The transaction was executed in multiple trades at prices ranging from \$130.00 to \$130.89. The price above reflects the weighted average sales price. Detailed information regarding the number of shares sold at each separate price will be provided upon request by the Commission staff, the Issuer or a security holder of the Issuer.
- 3. The transaction was executed in multiple trades at prices ranging from \$131.00 to \$131.75. The price above reflects the weighted average sales price. Detailed information regarding the number of shares sold at each separate price will be provided upon request by the Commission staff, the Issuer or a security holder of the Issuer.

## Remarks:

/s/ Rob McMahon, Attorney-

06/23/2020

in-Fact

\*\* Signature of Reporting Person 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.