FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL        |           |  |  |  |  |  |  |  |  |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number:         | 3235-0287 |  |  |  |  |  |  |  |  |
| Estimated average b | ourden    |  |  |  |  |  |  |  |  |

0.5

hours per response:

|   | Check this box if no longer subject to |
|---|--|
| ì | Section 16. Form 4 or Form 5           |
| J | obligations may continue. See          |
|   | Instruction 1(b).                      |

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| 1. Name and Address of Reporting Person* <u>Hagedorn Partnership, L.P.</u>   |  |  |      |       |   | 2. Issuer Name <b>and</b> Ticker or Trading Symbol SCOTTS MIRACLE-GRO CO [ SMG ] |   |                                 |                                     |                    |        |   |  |      |  | all app                    |   | g Pers  | 10% C                                      | owner  |
|--|--|--|------|-------|---|--|---|---------------------------------|-------------------------------------|--------------------|--------|---|--|------|--|----------------------------|---|---|--|--|
| (Last) (First) (Middle) 800 PORT WASHINGTON BOULEVARD  |  |  |      |       |   | 3. Date of Earliest Transaction (Month/Day/Year) 01/15/2013                      |   |                                 |                                     |                    |        |   |  |      |  | Officer (give title below) |   |   | Other<br>below)                            | (specify   |
| (Street) PORT WASHIN   |  |  | 1050 |       | 4. If                                   | 4. If Amendment, Date of Original Filed (Month/Day/Year)                         |   |                                 |                                     |                    |        |   |  |      | Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |                            |   |   |  |  |
| (City)   | (City) (State) (Zip)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned |  |      |       |   |  |   |                                 |                                     |                    |        |   |  |      |  |                            |   |   |  |  |
| 1. Title of Security (Instr. 3)  2. Transac Date (Month/Da   |  |  |      |       | action                                  | ction 2A. De<br>Execu  |   | 2A. Deemed<br>Execution Date,   |                                     | 3. 4. Securit      |        | ities Acquired (A)<br>d Of (D) (Instr. 3, 4   |  |      | or 5. Se Be Ov   |                            | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following                                   |   | nership<br>: Direct<br>Indirect<br>str. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership                |
|  |  |  |      |       | Code                                    | v  | Amount  |                                 | A) or<br>D)                         | Price              |        | Reported<br>Transaction(s)<br>(Instr. 3 and 4)  |  |      |  | (Instr. 4)                 |   |   |  |  |
| Common Shares 01/15/2  |  |  |      |       |   |  |   |                                 | S                                   |                    | 45,364 | 4 D \$  |  | \$44 | 75 17,749  |                            | 749,578   |   | D  |  |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)   |  |  |      |       |   |  |   |                                 |                                     |                    |        |   |  |      |  |                            |   |   |  |  |
| Derivative Security or Exercise (Month/Day/Year) Frice of Derivative Security    Date (Month/Day/Year)   Execution Date, if any (Month/Day/Year)   Security   Securit |  |  |      | Date, | 4.<br>Transaction<br>Code (Instr.<br>8) |  | 5. Nui<br>of<br>Derivi<br>Secui<br>Acqui<br>(A) or<br>Dispo<br>of (D)<br>(Instr.<br>and 5 | ative<br>rities<br>ired<br>osed | 6. Date E<br>Expiration<br>(Month/E | on Dat             |        | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amour or Numbe |  | ount |  |                            | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) |  | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|  |  |  |      | Code  | v                                       | (A)  | (D)   | Date<br>Exercisa                |                                     | Expiration<br>Date | Title  | of<br>Sha   |  |      |  |                            |   |   |  |  |

**Explanation of Responses:** 

Remarks:

/s/ Rob McMahon, Attorney-

in-Fact

01/17/2013

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.