FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

ATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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 Partnership, L.P.</u>					SC	2. Issuer Name and Ticker or Trading Symbol SCOTTS MIRACLE-GRO CO [SMG]										of Reportir licable) tor	ng Pe X	()	
(Last)	(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 08/18/2023								Office below	er (give title v)		Other (below)	specify
800 PORT WASHINGTON BOULEVARD					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) PORT WASHINGTON NY 11050					X Form filed by One Reporting Person Form filed by More than One Reporting Person														
(City)	(Sta	ate) (Z	Zip)		Rul	Rule 10b5-1(c) Transaction Indication													
		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																	
		Table	I - No	on-Deriva	tive S	Secui	rities	Acc	quired	l, Dis	sposed of	, or E	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)			Year) Execution		ıtion Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,			4 and 5) Secu Bene Own		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price		Transa	ported nsaction(s) str. 3 and 4)			(11150.4)
Common Shares 08/18/				08/18/2	023				S		47,795	D	\$49.8	36(1)	6(1) 13,993,980		D		
Common Shares 08/21/20					023				S		23,685	D	\$49.6	54 ⁽²⁾	4 ⁽²⁾ 13,970,295		5 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)			Code (8)	ransaction ode (Instr. I 		mber rative rities ired rosed) : 3, 4	6. Date Expira (Monti	ation D h/Day/		te Amount of Securities Underlying Derivative Security (Ins. 3 and 4) Expiration Amount of Security (Ins. 3 and 4)		ount		9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- 1. The transaction was executed in multiple trades at prices ranging from \$49.2612 to \$50.17. 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.
- 2. The transaction was executed in multiple trades at prices ranging from \$49.31 to \$50.15. 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.

/s/ Rob McMahon, Attorneyin-Fact

08/22/2023

** 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.