FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235		
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OMB Number:	3235-0287
Estimated average bu	rden
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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).

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

Name and Address of Reporting Person*     Hagedorn Partnership, L.P.					2. Issuer Name <b>and</b> Ticker or Trading Symbol SCOTTS MIRACLE-GRO CO [ SMG ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner					)wner	
(Last) (First) (Middle) 800 PORT WASHINGTON BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 03/12/2015											er (give title w)		Other below)	(specify
(Street) PORT WASHIN	NGTON N	Ý 1	1050		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					on
(City)	(St	ate) (2	Zip)																	
		Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Ben	efici	ally (	Owne	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Exe ay/Year) if ar		A. Deemed execution Date, any Month/Day/Year)				rrities Acquired (A) ed Of (D) (Instr. 3, 4			4 and Sec Ber Ow		curities neficially		Ownership rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)		Price		Transa	action(s) 3 and 4)			(	
Common Shares 03/12/2					/2015						30,000	0 D \$		\$68	68.27 15		5,914,869		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)		4. Transaction Code (Instr. 8)			ative rities ired osed	Expiration			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of Title Shares		ount nber	<u> </u>		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

**Explanation of Responses:** 

Remarks:

/s/ Rob McMahon, Attorney-

in-Fact

03/13/2015

\*\* 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.