FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
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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

					OI :	Section	30(11)	OI LITE	invesi	imeni c	company Act	01 1940								
1. Name and Address of Reporting Person* HAGEDORN PAUL						2. Issuer Name and Ticker or Trading Symbol SCOTTS MIRACLE-GRO CO [SMG]								Relationship of Reporting Person(s) to Issuer (Check all applicable)						
IIIIGEI	JOIN II	<u>IOL</u>													Dire			X 10% C	-	
(Last) (First) (Middle) C/O HAGEDORN PARTNERSHIP, L.P.						3. Date of Earliest Transaction (Month/Day/Year) 05/09/2017									Officer (give title Other (specify below) below)					
800 PORT WASHINGTON BOULEVARD																				
					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)										,	(,,,		_ine)				9 (10 10 10 10 10 10 10 10 10 10 10 10 10 1	
PORT	PORT															m filed by One Reporting Person				
WASHINGTON NY 11050														Form filed by More than One Reporting Person				orting		
(City)	(St	ate) (Zip)																	
		Tabl	eI-	Non-Deriv	ative	Seci	uritie	s A	cquir	ed, D	isposed o	of, or E	3enefici	ially	Own	ed				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				/ear)	Execution I		te,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			d 5) Secur Benef		rities Ficially (d Following (m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price		Transa	ction(s) 3 and 4)			(111501. 4)	
Common Shares 05/09/201					17	.7			S		4,259	D	\$89.462	\$89.4624(1)		2,293,751 ⁽²⁾		T I	See footnote ⁽²⁾	
		Та	ble I	I - Derivat (e.g., pı							posed of, convertib				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expi	ate Exer ration I ath/Day		7. Title Amou Securi Under Deriva Securi and 4)	nt of ities lying itive ity (Instr. 3	Der Sec	Price of ivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	,,	(A)	(D)	Date	cisable	Expiration	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. The transaction was executed in multiple trades at prices ranging from \$89.26 to \$89.67. 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 common shares are directly held by the Hagedorn Partnership, L.P. (the "Partnership"). The Reporting Person is a general partner of the Partnership. The amount of shares reported as beneficially owned represent the aggregate proportionate interest in common shares held by the Partnership of the Reporting Person and those family members in whose holdings he may be deemed to have a pecuniary interest. The Reporting Person disclaims beneficial ownership of the common shares except to the extent of his pecuniary interest.

Remarks:

/s/ Rob McMahon - Attorneyin-Fact

05/10/2017

** Signature of Reporting Person

on 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.