# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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									
OMB Number:	3235-0287								
Estimated average burden									
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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 JAMES</u>							2. Issuer Name and Ticker or Trading Symbol SCOTTS MIRACLE-GRO CO [ SMG ]									Relationshi neck all app X Direc	olicable)			o Issuer % Owner	
(Last) (First) (Middle) C/O THE SCOTTS MIRACLE-GRO COMPANY 14111 SCOTTSLAWN ROAD					08/	3. Date of Earliest Transaction (Month/Day/Year) 08/19/2010								X Officer (give title Other (specify below)  CEO and Chairman							
(Street) MARYSVILLE OH 43041					=   4. If -	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	5. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)		(Sta		Zip)	lon Doris	rativo	Soc	uritic	νς Λ <i>α</i>	auire		isposod o	f or B	Popofic	oial	ly Own	nd.				$\dashv$
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Y				ion	n 2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or			5. Amount of Securities Beneficially Owned Following			6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
										Code	v	Amount (A) or (D)		Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Shares 08/19/201				010	10			S <sup>(1)</sup>		42,180	D	\$48.	.7	3,163,238		I		See footnotes <sup>(2)</sup>	(3)		
Common Shares 08/20/20				010	10			S <sup>(1)</sup>		17,824	D	\$48.2	28	3,145,414		I		See footnotes <sup>(2</sup>	)(3)		
Common Shares															79,654	.584	I	D			
Common Shares														30,539	.042		I	By 401(k) plan			
Common Shares														3,810.	1112		I	By DSPP			
			Та	ble II								posed of, convertib				Owned					
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security  Security  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  34. Deemed Execution Date (Month/Day/Year)  (Month/Day/Year)			emed tion Date,	4. Transaction Code (Instr. 8)		5. Number of		6. Da		cisable and Date	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		9. Numb derivativ Securiti Benefici Owned Followir Reporte Transac (Instr. 4)	ve Owner es Form: ally Direct or Ind ing d tion(s)		Benefici Ownersh ct (Instr. 4)	ct al hip		
						Code	Code V (A) (D)			Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares	r						

### **Explanation of Responses:**

- 1. Represents the sale for the account of James Hagedorn of a portion of his proportionate interest in the Issuer's common shares (the "Common Shares") held by the Hagedorn Partnership, L.P.
- 2. Pursuant to Exchange Act Rule 16a-1(a)(1), the Reporting Person may be deemed, solely for purposes of determining whether he is a beneficial owner of more than 10% of the Common Shares, to be the beneficial owner of the securities of the Issuer that are held by Hagedom Partnership, L.P., a Delaware limited partnership in which the Reporting Person is a general partner.
- 3. Represents the aggregate proportionate interest of James Hagedorn and those family members in whose holdings he may be deemed to have a pecuniary interest in the Common Shares held by Hagedorn Partnership, L.P.

### Remarks:

/s/ Rob McMahon, Attorneyin-Fact

08/23/2010

\*\* 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.