FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average burden | | | | | | | | | | |

0.5

hours per response:

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

| Check this box to indicate that a |
|---|
| transaction was made pursuant to a |
| contract, instruction or written plan for |
| the purchase or sale of equity |
| securities of the issuer that is |
| intended to satisfy the affirmative |
| defense conditions of Rule 10b5-1(c). |
| See Instruction 10. |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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>Kingdon Mark D</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol SCOTTS MIRACLE-GRO CO [SMG] | | | | | | | | Relationship heck all app Direc | icable) or | ng Pers | 10% Ow | mer |
|--|--|------------|--|-----------------------------|-------|--|---------|-------|-------------------|--|-------------------|---|--|--|---|---------|---|--|
| (Last) (First) (Middle) C/O THE SCOTTS MIRACLE-GRO COMPANY 14111 SCOTTSLAWN ROAD | | | | | 06/ | Date of Earliest Transaction (Month/Day/Year) 06/06/2025 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Officer (give title Other (specify below) 6. Individual or Joint/Group Filing (Check Applicable | | | | |
| (Street) MARYSVILLE OH 43041 | | | | | | | | | | | | | Line) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | | | | |
| | | Tabl | e I - Non | -Deriv | ative | Sec | curitie | es Ac | quired | Dis | posed | of, or Be | neficia | Illy Owne | d | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | Execution Date, | | | Code | Transaction Disposed Code (Instr. 5) | | rities Acquired (A) o d Of (D) (Instr. 3, 4 a | | Benefic | es Form ally (D) of Following (I) (II | | Direct (Indirect Str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | Code | v | Amount | (A) or (D) Pri | | Transac | action(s) . 3 and 4) | | | msu. 4) | |
| | 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 | | 3A. Deeme Execution I if any (Month/Day | Date, Transact Code (Ins | | | ion of | | Expiratio | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Secur (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | ly | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | xpiration ate | Title | Amount or Number of Shares | | | | | |
| Dividend Equivalent Rights | (1) | 06/06/2025 | | | A | | 85 | | (1) | | (1) | Common Shares | 85 | \$66.48 | 415 | | D | |

Explanation of Responses:

1. The dividend equivalent rights accrued on DSU or RSU grants and become exercisable proportionately with the DSUs or RSUs to which they relate. Each dividend equivalent right is the economic equivalent of one common share of the Issuer

Remarks:

/s/ Kathy L. Uttley as attorneyin-fact for Mark D. Kingdon ** Signature of Reporting Person

Date

06/10/2025

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.