FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-028

Estimated average burden hours per response: 0.5

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

Filed nursuant to Section 16(a) of the Securities Eychange Act of 1934

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1. Name and Address of Reporting Person* <u>HAGEDORN JAMES</u>					2. Issuer Name and Ticker or Trading Symbol SCOTTS MIRACLE-GRO CO [SMG]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner						
(Last) (First) (Middle) C/O HAGEDORN PARTNERSHIP, L.P. 800 PORT WASHINGTON BOULEVARD					3. Date of Earliest Transaction (Month/Day/Year) 08/03/2006								X Officer (give title Other (specify below) CEO and Chairman						
(Street) PORT WASHINGTON NY 11050 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - N	Non-Deriv	/ative	Sec	uritie	s Ac	quire	ed, Di	sposed o	f, or E	Benefici	ally Own	ed				
1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/Y				Execution Year) if any		emed tion Date, n/Day/Year)			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an 5)			5. Amount Securities Beneficial Owned Fo	s Formulay (D) (I) (I) (I)		ership Direct ndirect tr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 ar				(Instr. 4)	
Common Shares 08/03/200					006	06					35,000	D	\$38.03	3,429,371 ⁽²⁾		I		See footnot	es ⁽³⁾⁽⁴⁾
		Та	ble II								osed of, convertib			y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu if any	fany		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		te Exerc ation D th/Day/		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Owners Form: Direct (I or Indire (I) (Instr	hip of In Ben O) Owr ect (Inst	Nature ndirect eficial nership tr. 4)
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Number of Shares						

Explanation of Responses:

- 1. Represents the sale for the account of James Hagedorn and certain family members of a portion of their proportionate interest in the Issuer's common shares (the "Common Shares") held by the Hagedorn Partnership, L.P.
- 2. The number of common shares has been adjusted to reflect the 2-for1 stock split by The Scotts Miracle-Gro Company on November 9, 2005 to shareholders of record on November 2, 2005.

- 3. 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 Hagedorn Partnership, L.P., a Delaware limited partnership in which the Reporting Person is a general partner.
- 4. 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:

Rob McMahon, Attorney-in-

08/04/2006

Fact

** 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.