SCOTTS MIRACLE-GRO CO

Form 4 March 02, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB 3235-0287 Number:

Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

January 31, Expires: 2005 Estimated average burden hours per

0.5

OMB APPROVAL

Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

response...

See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person *

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to Issuer

Lukemire Michael C

(Middle)

Symbol SCOTTS MIRACLE-GRO CO

(Check all applicable)

EVP and COO

[SMG]

(Last) (First) 3. Date of Earliest Transaction

Director 10% Owner

(Month/Day/Year)

02/27/2015

X_ Officer (give title below)

_ Other (specify

C/O THE SCOTTS MIRACLE-GRO COMPANY, 14111 SCOTTSLAWN ROAD

(Street)

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

X Form filed by One Reporting Person Form filed by More than One Reporting

6. Individual or Joint/Group Filing(Check

Person

MARYSVILLE, OH 43041

(City)	(State)	Zip) Table	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common Shares	02/27/2015		S	800	D	\$ 65.5	17,968	D	
Common Shares	02/27/2015		S	600	D	\$ 65.51	17,368	D	
Common Shares	02/27/2015		S	500	D	\$ 65.52	16,868	D	
Common Shares	02/27/2015		S	800	D	\$ 65.53	16,068	D	
	02/27/2015		S	79	D		15,989	D	

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Common Shares					\$ 65.54			
Common Shares	02/27/2015	S	100	D	\$ 65.55	15,889	D	
Common Shares	02/27/2015	S	21	D	\$ 65.56	15,868	D	
Common Shares	02/27/2015	S	200	D	\$ 65.57	15,668	D	
Common Shares	02/27/2015	S	1,000	D	\$ 65.58	14,668	D	
Common Shares	02/27/2015	S	1,600	D	\$ 65.59	13,068	D	
Common Shares	02/27/2015	S	600	D	\$ 65.62	12,468	D	
Common Shares	02/27/2015	S	200	D	\$ 65.64	12,268	D	
Common Shares	02/27/2015	S	100	D	\$ 65.65	12,168	D	
Common Shares	02/27/2015	S	1,400	D	\$ 65.66	10,768	D	
Common Shares						463.917	I	By 401(K) Plan

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

SEC 1474

(9-02)

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	ınt of rlying	8. Price of Derivative Security (Instr. 5)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

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Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Lukemire Michael C C/O THE SCOTTS MIRACLE-GRO COMPANY 14111 SCOTTSLAWN ROAD MARYSVILLE, OH 43041

EVP and COO

Signatures

Kathy L. Uttley as attorney-in-fact for Michael C. Lukemire

03/02/2015

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 3