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HAGEDORI Form 4										
January 05, 2	1	ED STAT	FES SECUR	RITIES A	ND EX(СНА	NGE C	OMMISSION		PPROVAL
	• •		Was	shington,	D.C. 20	549			Number:	3235-0287
Check th if no long subject to Section 1 Form 4 o Form 5		F CHANGES IN BENEFICIAL OWN SECURITIES Section 16(a) of the Securities Exchange					Expires: Estimated a burden hou response	•		
obligatio may cont <i>See</i> Instru 1(b).	ns sinue. Section	17(a) of		tility Hold	ling Con	ipan	y Act of	1935 or Sectio	n	
(Print or Type I	Responses)									
1. Name and A HAGEDOR	Address of Report	rting Person	Symbol	Name and S MIRAC			c	5. Relationship of Issuer (Chec	Reporting Pers	
(Last)	(First)	(Middle)	3. Date of (Month/D		ansaction			X Director X Officer (give below)	below)	6 Owner er (specify
	2, 14111 SCC			000				CEC	and Chairman	
MARYSVI	(Street))41		ndment, Dat hth/Day/Year)	-	l		6. Individual or Jo Applicable Line) _X_ Form filed by 0 Form filed by M	One Reporting Pe	rson
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Aca	Person uired, Disposed of	f. or Beneficial	lv Owned
1.Title of Security (Instr. 3)	2. Transaction (Month/Day/Y	ear) Exec any	Deemed	3. Transactio Code (Instr. 8) Code V	4. Securi n(A) or Di (Instr. 3,	ties A spose	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of
Common Shares								85,200	D	
Common Shares								20,004.46 (1)	Ι	By 401(K) Plan
Common Shares								9,576.16 <u>(2)</u>	Ι	By Deferral Plan
Common Shares	01/03/2006			А	47.65	А	\$ 41.97	308.16	Ι	By DSPP

Reporting Owners

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Common Shares						3,483,742	I	See (4)	note	
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)		4. Transactic Code (Instr. 8)	5. of Derivativ Securities Acquired (A) or Disposed of (D)	5	A U Se	Title and mount of inderlying ecurities nstr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr

4, and	d 5)			
Code V (A)	Exercisable	Expiration Date	Title	Amount or Number of Shares

(Instr. 3,

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
HAGEDORN JAMES C/O THE SCOTTS MIRACLE-GRO COMPANY 14111 SCOTTSLAWN ROAD MARYSVILLE, OH 43041	Х	Х	CEO and Chairman			
Signatures						
Kathy L. Uttley as attorney-in-fact for James Hagedorn	01/05/2006					
**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).

(1) Represents common shares held in the reporting person's account under The Scotts Company LLC Retirement Savings Plan ("401(K) Pla n") a/o 12/1/05.

(2) Represents common shares held in the reporting person's account under The Scotts Company LLC Executive Retirement Plan (the "Defe rral Plan") a/o 12/1/05.

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(3) Common shares acquired under The Scotts Miracle-Gro Company Discounted Stock Purchase Plan (DSPP).

Represents the aggregate proportionate interests of the reporting person and those family members in whose holdings he may be deemed (4) to have a pecuniary interest, in securities held by Hagedorn Partnership, L.P., a Delaware limited partnership of which the reporting

person is a general partner.

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.