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Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

For	calend	ar year 2015 or tax year beginning May 11t	h	<u>,16</u>	and e	ending	September 30th dentification number	, 20 16
	e of foun					A Employer		
The	Scotts	Miracle-Gro Foundation		·		= = :	61-1794169 number (see instruction	one)
Num	ber and	street (or P O box number if mail is not delivered to street address)		Room/s	suite	B relephone		nisj
1/11	I1 Scott	slawn Road		<u> </u>			937-644-0011	
City	or town,	state or province, country, and ZIP or foreign postal code				C If exemptio	n application is pendi	ng, check here ▶
						[
		all that apply: Initial return Initial return	of a former	public	charity	D 1. Foreign	organizations, check f	nere ► 🗌
G	JI IOUN O	Final return Amended re				1	organizations meeting	the 85% test,
		☐ Address change ☐ Name chan	ge			check he	ere and attach compu	tation 🕨 📘
	Chock !	type of organization: Section 501(c)(3) exempt pr	ivate found	ation		E If private for	oundation status was to 7(b)(1)(A), check here	erminated under
	Soction	4947(a)(1) nonexempt charitable trust Other tax	able private	found	ation] Section of	(2)(1)(4)	_
쁜	Section	arket value of all assets at J Accounting method:	☐ Cash	✓ Ac	crual	F if the found	dation is in a 60-mont	n termination
' '	and of	year (from Part II, col. (c), Other (specify)		_		under sect	ion 507(b)(1)(B), check	k here ►∐
	ine 16)	you. (on cash bas	is.)				
		Analysis of Revenue and Expenses (The total of	(a) Revenue				(-) Advisted not	(d) Disbursements for charitable
ГС		amounts in columns (b), (c), and (d) may not necessarily equal	èxpenses	per		t investment income	(c) Adjusted net income	purposes
		the amounts in column (a) (see instructions).)	books	,				(cash basis only)
		Contributions, gifts, grants, etc., received (attach schedule)		0		· * • • •		
	1	Check ► ☐ If the foundation is not required to attach Sch. B	7	/ ;	, ,	, ",		
Name The S Numb 1411 City of Mary G C	2	Interest on savings and temporary cash investments		0		0	0	2 1 1
		Dividends and interest from securities		0				
	4			0		0		5 X C 10
	5a	Gross rents	, 3 ₂ ,	***	£ *,	7 17 7	1, 1, 1,	* . * *
	b	Net gain or (loss) from sale of assets not on line 10			," ₁	\$ C		Am M.
ne	6a	Gross sales price for all assets on line 6a0	1 9 1	<i>₹</i> ₹	, ,	, , , , , , , , , , , , , , , , , , ,		
len	b	Capital gain net income (from Part IV, line 2)		s ₄ ; 0,		0		
ě	7		8, 3	, ,	-		0	
ш	8	Net short-term capital gain	* * *			, , s° *	C	4. 1
	9	Income modifications	- Car	3	.	a so go a		, , , ,
	10a		A	٠	×	i. i. i.	* 1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
=	b	Less: Cost of goods sold	· · · · · · · · · · · · · · · · · · ·		1 5		() 4 1 1
3	C	Other income (attach schedule)		0		0	() : : : : :
9	11	Total. Add lines 1 through 11				0	() '
	12	Compensation of officers, directors, trustees, etc.				0		0
ည္က	13	Other employee salaries and wages				0		0
보 왕	14	Pension plans, employee benefits				0		0
co ē	15	Legal fees (attach schedule)	חרים	13 /= [¬ 0		0
型 型	16a	Accounting fees (attach schedule)	TLUL	VII	الر	0		0 0
包	b	Other professional fees (attach schedule)		(10	0		0 0
A.	C	Other professional fees (attach schedule)	FEB 18	2017	7 7 7 7	0		0 0
	17	Taxes (attach schedule) (see instructions)			0 15			0 0
	18	Depreciation (attach schedule) and depletion	4 7 1 1 2 1 1 P	· · · · · · · · · · · · · · · · · · ·		0		0
Ë	19	Occupancy	(addition	أليا	0	0		0 0
Ad	20	Travel conferences and meetings	 	.,	0	, <u> </u>		0 0
2	21	Havel, Comercines, and meetings			0	0		0 0
2	22	I filling and pasitioning			0	C		0 0
מ	23	Other expenses (attach schedule)	ļ ————		\top			
÷	24	Add lines 13 through 23	_		o	C) 	0 0
ي ا	5				0 .	τγ:		0
Š	25	Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25			0	(0 0
_	26	Outstand line Of from line 12:		12.5.	4 4	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	27	Subtract line 26 from line 12:			0			
	a	Excess of revenue over expenses and disbursements	.7 §.	S. A.	<u> </u>	(18. 3 4 7 1 14 14	
	þ	Net investment income (if negative, enter -0-) Adjusted net income (if negative, enter -0-)	7 1	37 all	3 5	1 1 2 8		0 1 1
	1 0	Admisted net income (ii flegative, effici -u-)	10.4					- 000 DE 10015

Da	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End of	<u> </u>
FG		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	∍	(c) Fair Market Value
	1	Cash – non-interest-bearing	0		0	0
	2	Savings and temporary cash investments	0		0	0
	3	Accounts receivable ▶0				
		Less: allowance for doubtful accounts ▶ 0	0		0	0
	4	Pledges receivable ▶ 0			'	* * * * * * * * * * * * * * * * * * *
		Less: allowance for doubtful accounts ▶ 0	0		0	0
	5	Grants receivable	0		0	0
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)	0		0	0
	7	Other notes and loans receivable (attach schedule) ▶0				
		Less. allowance for doubtful accounts ▶ 0	0	_	_ 0	0
ts.	8	Inventories for sale or use	0		0	0
Assets	9	Prepaid expenses and deferred charges	0		0	0
As	10a	Investments—U.S. and state government obligations (attach schedule)	0		0	0
	ь	Investments – corporate stock (attach schedule)	0		0	0
	С	Investments – corporate bonds (attach schedule)	0		0	0
	11	Investments—land, buildings, and equipment: basis ▶ 0	a dia a sa dia dia dia dia dia dia dia dia dia di	***		* *
] -	Less: accumulated depreciation (attach schedule) ▶ 0	0	w ² cou	أه **	0
	12	Investments—mortgage loans	0	-	0	0
	13	Investments—other (attach schedule)	0		0	0
	14	Land, buildings, and equipment: basis ▶ 0			1	
	1	Less: accumulated depreciation (attach schedule) ▶ 0	0	come the city	اه	· · · · · · · · · · · · · · · · · · ·
	15	Other assets (describe ▶ 0)	0		0	0
	16	Total assets (to be completed by all filers—see the				
	'	instructions. Also, see page 1, item I)	o		ام	n
	17	Accounts payable and accrued expenses	0		0	, - 4, - 7).
	18	Grants payable	0		0	
es	19	Deferred revenue	0			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	0			
ab	21	Mortgages and other notes payable (attach schedule)	0			
_	22	Other liabilities (describe ▶ 0	0			
	23	Total liabilities (add lines 17 through 22)	0			
		Foundations that follow SFAS 117, check here ▶ □			<u> </u>	
lances	Į	and complete lines 24 through 26 and lines 30 and 31.		į.		
2	24	Unrestricted			ام	
	25	Temporarily restricted	0		0	
Ö	26	Permanently restricted	0		0	
P		Foundations that do not follow SFAS 117, check here ▶ □		· · · · · · · · · · · · · · · · · · ·		
Net Assets or Fund Ba]	and complete lines 27 through 31.	ĺ		ł	
ŏ	27	Capital stock, trust principal, or current funds	0		o	
ţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0		0	
ŝ	29	Retained earnings, accumulated income, endowment, or other funds	0		0	
Ą	30	Total net assets or fund balances (see instructions)	0		0	the first of the second
et	31	Total liabilities and net assets/fund balances (see				
Z		instructions)	0		0	
Pa	art III		<u> </u>	•		
		al net assets or fund balances at beginning of year-Part II, colu	ımn (a), line 30 (mus	st agree with		
•		-of-year figure reported on prior year's return)			1	0
•		er amount from Part I, line 27a		-	2	ŏ
		er increases not included in line 2 (itemize) ▶ 0			3	0
		I lines 1, 2, and 3			4	0
				[5	0
ě	Tota	creases not included in line 2 (itemize) 0 al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 30	6	0

Capital Gains and Losses for Tax on Investment Income

Part IV

		ne kind(s) of property sold (e.g., real estate use; or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr)
1a						
b						
С						
d					_	
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		in or (loss) (f) minus (g)
а						
b						
С						
<u>d</u>						
<u>e</u>				40/04/00		
	Complete only for assets sho	owing gain in column (h) and owned				ol. (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		ot less than -0-) or from col (h))
a_						
b						
c						
d						
ее						
2	Capital gain net income o		also enter in Pa , enter -0- ın Paı		2	
3	If gain, also enter in Part	ın or (loss) as defined in sections : I, line 8, column (c) (see instruc				
_	Part I, line 8				3	
Part	 _	der Section 4940(e) for Redu				
(For o	ptional use by domestic pr	ivate foundations subject to the	section 4940(a)	tax on net investi	ment income.)	
If sect	non 4940(d)(2) applies, leav	e this part blank.				
		·				- V N-
		e section 4942 tax on the distribut t qualify under section 4940(e). D			ase period?	☐ Yes 🗸 No
1	·	ount in each column for each ye			king ony ontroe	
	(a)		ar, see the matte		T Trues.	(d)
Cale	Base period years endar year (or tax year beginning in	Adjusted qualifying distribution	s Net value o	(c) f noncharitable-use as		stribution ratio divided by col (c))
	2014					0
	2013					0
	2012					0
	2011					0
	2010					0
_	Takal at line 4 and image (al	N				_
2 3	Total of line 1, column (d)				0
3	-	dation has been in existence if le		•	1 }	_
	number of years the loun	dation has been in existence in te	33 than o yours		· 3	0
4	Enter the net value of nor	ncharitable-use assets for 2015 f	rom Part X, line	5	4	0
5	Multiply line 4 by line 3				. 5	0
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		. 6	0
7	Add lines 5 and 6				. 7	0
٥	Entor qualificing distantion	one from Dart VII. line 4				
8		ons from Part XII, line 4				0 1% tay rate. See the
	Part VI instructions.	ater than the 7, Check the DOX II	i i ait vi, iiic It	, and complete i	mat part using a	170 Iax Tale. See IIIe
	. Green mondonor					Form 990-PF (2015)

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	-s	ee ir	ıstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1.		, (,	٠.	\hat{\chi}	€ ' 31 48
L	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)	1	77	ž,	· ** •	12.
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b	<u>गुक्त</u> ा	, ,	Ĩ.	- 0	-
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		***		******	23.
2		2			0	
3	The state of the s	3			0	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5			0	
6	Credits/Payments:	- [ß.	**	* (x
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 0	, , , , , , , , , , , , , , , , , , ,	- [1.	1	4
b	Exempt foreign organizations—tax withheld at source		41°.		*	* .** *.**
С	Tax paid with application for extension of time to file (Form 8868) . 6c 0	- 1	1	45	1 10	S
d	Backup withholding erroneously withheld	7	2×.	17.	, t,	
7		7			0	
8		В			0	<u> </u>
9		9			0	
10		0			0	
11	Enter the amount of line 10 to be. Credited to 2016 estimated tax ▶ 0 Refunded ▶ 1	1			0	L
	VII-A Statements Regarding Activities		<u> </u>		V	- No.
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or participate or intervene in any political campaign?	raic	ן זונ		Yes	No
h	• • • •	· ·	. }	1a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes Instructions for the definition)?	s (s		1b		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any ma	ateri	als	,	×	£
	published or distributed by the foundation in connection with the activities.				*	
С	Did the foundation file Form 1120-POL for this year?	-	- [1c		1
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				*	
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$				4. \$5.	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax important on foundation managers. ▶ \$	ose	d		£ .	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		· ·	် 2	i de	
_	If "Yes," attach a detailed description of the activities.		· }	7	~ ¿;	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	cles	of	ia Se u	Sales of	1.40
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes.	•	.	3		✓
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		.	4a		✓
b	If "Yes," has it filed a tax return on Form 990-T for this year?	•	.	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		.	5		/
_	If "Yes," attach the statement required by General Instruction T.				¥.	, , , , , , , , , , , , , , , , , , ,
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		Ì			agency in
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory direction 	ne ti	hat	3	, we 6, 5	- 1%
	conflict with the state law remain in the governing instrument?	15 11	. IC.	- <u>- </u>		40
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and P.) Jart '	n, t	7		
, 8а	Enter the states to which the foundation reports or with which it is registered (see instructions)	an ,	` `	ug.	×	
	Ohio		ļ		. 3	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney G	iene	eral			. 200
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation		. /	8b	r acent	, } , , _ £a ✓
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942((i)(3)	or	Ĉ.	1, ,	, see 1
_	4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If			56 i.	ar m.	c restend
	complete Part XIV		.	9		✓
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	g th	neır			
	names and addresses	•		10		✓_

Part	VII-A Statements Regarding Activities (continued)			,
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	. 11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqua	lifted		,
	person had advisory privileges? If "Yes," attach statement (see instructions)		1	\ <u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applications and exemption applications and exemption applications and exemption applications are supplied to the foundation comply with the public inspection requirements for its annual returns and exemption applications. ■ N/A	1011!		<u> </u>
14	Tolonhono no	937-644-	0011	
1.4	Located at ▶ 14111 Scottslawn Road Marysville, OH ZIP+4 ▶	4304		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ □
•	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other au		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		✓
	See the instructions for exceptions and filling requirements for FinCEN Form 114. If "Yes," enter the na	me of	, brag	
	the foreign country ▶			
Part	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required	*	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		162	NO
1a	· · · · · · · · · · · · · · · · · · ·	☑ No		5.5
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	5)140		
	<u></u>	√ No		
	· · · · · · · · · · · · · · · · · · ·	√ No {		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes	☑ No		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		21667 1138	1000
	= -	✓ No		
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		83	
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	√ No 🏥	. 8	
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regula	23847.	3' ";	
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	· 1b	,	1 "1 " 1"
		▶□		
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	were not corrected before the first day of the tax year beginning in 2015?			1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a properating foundation defined in section 4942(j)(3) or 4942(j)(5)):	ıvate		
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and	_,,		
	= -	✓ No		
	If "Yes," list the years ▶ 20 , 20 , 20 , 20, 20)(2)(2)		
b	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)	(2) to		
	all years listed, answer "No" and attach statement—see instructions.)	. 2b	,	1
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20 , 20 , 20 , 20		/d.	
3a				
		✓ No		
b		on or	2.1	
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by	y the	13.	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lap the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine in	if the	_	
	foundation had excess business holdings in 2015.)	. 3b	1 .	
4a	Division of the state of the st			1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardi	ize its 🗎 🚉	. Žůi	S PR
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2	2015? 4b		✓

										1 age C
	t VII-B Statements Regarding Activities			4720	May Be F	Require	ed (conti	nued)		
5a							_		_~{1}	
	(1) Carry on propaganda, or otherwise attempt						☐ Yes	✓ No	, *,	
	(2) Influence the outcome of any specific pub				•	-			ş. 4.	, , , , , , , , , , , , , , , , , , ,
	directly or indirectly, any voter registration of						Yes Yes	✓ No	,	
	(3) Provide a grant to an individual for travel, st						🗌 Yes	✓ No	*.	
	(4) Provide a grant to an organization other than			-			1		S. S.	ALC CALL
	section 4945(d)(4)(A)? (see instructions) .						☐ Yes	✓ No		
	(5) Provide for any purpose other than religiou				•		l			
	purposes, or for the prevention of cruelty to						∐Yes	✓ No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the							ibed in) jú	, g) fu
	Regulations section 53.4945 or in a current notice					uctions)?		5b	
_	Organizations relying on a current notice regard								100	
С	If the answer is "Yes" to question 5a(4), does because it maintained expenditure responsibility							_	4 %	
	·	-	-				∐ Yes	∐ No	300	83.5
60	If "Yes," attach the statement required by Regu								, ,	4
6a	Did the foundation, during the year, receive any on a personal benefit contract?	y iunas,	directly or in	airectiy	, to pay pro	emiums	_		1	*, ,
h	-			-41			∐ Yes	_ ✓ No	2.84	23.3
b	Did the foundation, during the year, pay premiul If "Yes" to 6b, file Form 8870.	ms, aire	ctly or indire	ctiy, on	a persona	beneti	t contract	7.	6b	1
7a	At any time during the tax year, was the foundation	a narty	to a probibitor	tav ch	altar transa	ation?	☐Yes	[Z] Na	15. 4	
	If "Yes," did the foundation receive any proceed						_		7b	
	t VIII Information About Officers, Dire									906
	and Contractors	0.0.0,	11401000, 1	Junua	tion man	agei 3,	inginy i	alu L	прюу	ees,
1	List all officers, directors, trustees, foundation	on mana	agers and th	eir con	npensation	ı (see i	nstruction	ns).		
		(b) Titl	e, and average	(c) Co	mpensation	(d)	Contributions	s to	(a) Eypo	nse account,
	(a) Name and address		rs per week ed to position		not paid, iter -0-)		byee benefit erred compe			allowances
SEE A	TTACHED SCHEDULE			-						
		1								
·		İ								
		1				<u> </u>				
2	Compensation of five highest-paid employe "NONE."	es (oth	er than thos	se incl	uded on li	ne 1—:	see instr	uctions	s). If no	one, enter
			(b) Title, and a	verage			(d) Contribu	tions to		
	(a) Name and address of each employee paid more than \$50,0	000	hours per v	veek -	(c) Comper	nsation	employee plans and c			nse account, allowances
			devoted to p	JSILION			compens			
NONE			1							
						,				
			ļ							·· ··
		-+								
Total	number of other employees paid over \$50,000 .		l		L		L			
, otal	number of other employees paid over \$30,000.							. 📂 📗		

Pari	VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	ployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONI	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE		
Total	number of others receiving over \$50,000 for professional services	
	IV A Comment of Direct Observation	
Par	IX-A Summary of Direct Charitable Activities	
	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
	anizations and other beneficiales served, comercines convened, resourch papers produced, etc	
1		
_		
2		
_		
3	***************************************	
4		
Par	IX-B Summary of Program-Related Investments (see instructions)	<u></u>
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	, , , , , , , , , , , , , , , , , , , ,	
•		
2		
_		
All	other program-related investments. See instructions	
3		
•		
Total	Add lines 1 through 3	

Form **990-PF** (2015)

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foundations	i,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:	13.2	
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and	. :	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part		oundations	
1	Minimum investment return from Part X, line 6	1	0
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.) 2b		
С	Add lines 2a and 2b	2c	0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	0
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	0
	Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1.	
1	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	_
a	Program-related investments—total from Part IX-B	1b	0
ь 2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	10	0
2	purposes		_
_		2	0
3	Amounts set aside for specific charitable projects that satisfy the:	***	
a	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	
_	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether the fo	undation

Part 2	XIII Undistributed Income (see instruction	ns)			
_		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7	36%		*	
2	Undistributed income, if any, as of the end of 2015:	· //	· · · · · · · · · · · · · · · · · · ·	1.21 3.62	5:
a	Enter amount for 2014 only	**		0	2 s s
b	Total for prior years: 20,20,20		0		
3	Excess distributions carryover, if any, to 2015:				
а	From 20100				
b	From 2011				* * * * * * * * * * * * * * * * * * * *
С	From 2012		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
d	From 2013		, , ,		
e	From 2014	·	S. S. Janesey		
t 4	Total of lines 3a through e	0	. , , , , ,		, , , , , ,
4	line 4: > \$				2
а	Applied to 2014, but not more than line 2a.				
	Applied to undistributed income of prior years	3 4 4 4	<u></u>	11.	
	(Election required—see instructions)		o		
С	Treated as distributions out of corpus (Election	· · · · · · · · · · · · · · · · · · ·	188 118		
	required—see instructions)	0	* / * * * * * * * * * * * * * * * * * *	*	() () () () () () () () () ()
d	Applied to 2015 distributable amount	د داد داد . د داد د . د د داد د			0
е	Remaining amount distributed out of corpus	0		\$, · · · · · · · · · · · · · · · · · ·	No
5	Excess distributions carryover applied to 2015	0	2 (5) 3 (3) () () () ()		0
	(If an amount appears in column (d), the same amount must be shown in column (a).)			5,3 ×2,	*
6	Enter the net total of each column as				() ' , ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
U	indicated below:				<u>ዩ</u> .
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	ر (میشسایی) 0			
b	Prior years' undistributed income. Subtract		· · ·	, 21. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
	line 4b from line 2b		0	·	*
С	Enter the amount of prior years' undistributed	, , , , , , , , , , , , , , , , , , ,			5 4
	income for which a notice of deficiency has	in the second se		4.25°	ا بران بران در
	been issued, or on which the section 4942(a)		_		, , ,
_	tax has been previously assessed Subtract line 6c from line 6b. Taxable	\$	0	*(*,*.*********************************	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
ď	amount—see instructions		0		
_	Undistributed income for 2014. Subtract line		/2 (m) x	200 X	*# \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Ŭ	4a from line 2a. Taxable amount—see		4 6 6		
	instructions		\$ 50 x8400	0	
f	Undistributed income for 2015. Subtract lines				
	4d and 5 from line 1. This amount must be				
_	distributed in 2016	, "\$277	** \$ ** **	* * * · · · · · · · · · · · · · · · · ·	<u>0</u>
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)	۱ .			
8	Excess distributions carryover from 2010 not			(
	applied on line 5 or line 7 (see instructions).	o		last light st	
9	Excess distributions carryover to 2016.				
	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9:				
а	Excess from 2011				
b	Excess from 2012				
C	Excess from 2013		12		
d	Excess from 2014	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1.50	
		1	·	<u></u>	Form 990-PF (2015)

	NIV Private Operating Founda	tions (see instru	ictions and Par	t VII-A guestion 9	<u> </u>	Páge 10
	If the foundation has received a ruling				/ _	
ıu	foundation, and the ruling is effective fo	-				
ь	Check box to indicate whether the fou			Į.	ction)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	Ţ <u> </u>	Prior 3 years		<u> </u>
	income from Part I or the minimum investment return from Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	each year listed	0				0
b	85% of line 2a	0				0
C	Qualifying distributions from Part XII,					
	line 4 for each year listed	0				o
d	Amounts included in line 2c not used directly for active conduct of exempt activities	0				0
е	Qualifying distributions made directly		····································	-		
•	for active conduct of exempt activities.		İ			
	Subtract line 2d from line 2c	o]		0
3	Complete 3a, b, or c for the					
	alternative test relied upon:	}]		
а	"Assets" alternative test-enter:		İ			
	(1) Value of all assets					<u> </u>
	(2) Value of assets qualifying under		İ			
L	section 4942(j)(3)(B)(i)			<u></u>		ļ
b	of minimum investment return shown in					
	Part X, line 6 for each year listed	0				0
С	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest,	ļ				
	dividends, rents, payments on		į			
	securities loans (section 512(a)(5)), or royalties)			1 1		
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)]]	1		
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Information	on (Complete th	is part only if	the foundation ha	ad \$5,000 or m	ore in assets at
	any time during the year-	-see instructior	ns.)			
1	Information Regarding Foundation	~			_	
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	only if they have co	minouted more t	nan \$5,000). (See Se	ection 507 (a)(2).)	
	List any managers of the foundation	who own 10% o	r more of the sto	ock of a corporation	/or an oqually le	argo portion of the
b	ownership of a partnership or other e					arge portion or the
		3,7				
2	Information Regarding Contribution	n. Grant. Gift. Loa	n. Scholarship.	etc Programs:		
	Check here ▶ ☑ if the foundation				organizations and	does not accept
	unsolicited requests for funds. If the					
	other conditions, complete items 2a,					
а	The name, address, and telephone nu	ımber or e-mail ac	dress of the pers	son to whom applica	ations should be	addressed:
b	The form in which applications should	d be submitted and	d information and	f materials they sho	uld include:	
						
C	Any submission deadlines:					

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part	XV Supplementary Information (conti	nued)			
3	Grants and Contributions Paid During t	he Year or Approve	ed for Fut	ure Payment	
	Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	any foundation manager or substantial contributor	recipient	CONTIDUION	
а					
					•
					İ
				•	
					[
					Į.
		<u> </u>			
		1			
	•				
					1
	Total			▶ 3a	
b	Approved for future payment				
				<u> </u>	
			-		
			<u> </u>		
	T - 4 - 1			- 0L	

nter g	ross amounts unless otherwise indicated.	Unrelated but	siness income	Excluded by sect	on 512, 513, or 514	l (e)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions.)
	rogram service revenue:	 				
a b						
C						
d		-				
e		<u> </u>		 		
f				<u> </u>		
g	Fees and contracts from government agencies					
_	embership dues and assessments			1		
	terest on savings and temporary cash investments					
	vidends and interest from securities					
5 N	et rental income or (loss) from real estate:	,		, 1, 2, 2, 1	, ,	~ × , × , 5, × , 5, × ,
а	Debt-financed property					
b	Not debt-financed property					
6 N	et rental income or (loss) from personal property					
	ther investment income		<u></u>			
	ain or (loss) from sales of assets other than inventory					
	et income or (loss) from special events					
	ross profit or (loss) from sales of inventory					
	ther revenue: a		·			
b	· · · · · · · · · · · · · · · · · · ·					
C						
d						
е	ubtotal. Add columns (b), (d), and (e)					
12 Si	ubtotal. Add columns (b), (d), and (e)					
40 T						
13 To					13	
13 To See wo	orksheet in line 13 instructions to verify calculation	s.)			13	
13 To See wo	orksheet in line 13 instructions to verify calculation KVI-B Relationship of Activities to the A	s.) .ccomplishme	ent of Exemp	t Purposes		moortantly to the
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Form **990-PF** (2015)

-onn 990		•										ge IS
Part 2		Exempt Or	n Regarding Tra ganizations							ritabl		
	in sec		directly or indirectline Code (other that								Yes	No
		ers from the repash	porting foundation	to a noncharitat	ble exempt org	anızation	of: 			1a(1)		· ·
b	Other	her assets . transactions:								1a(2)	, ž	✓
	(2) Pu	rchases of asse	a noncharitable e ets from a nonchar	ritable exempt oi	rganization .					1b(1) 1b(2)		1
	(4) Re		, equipment, or otl rrangements rrantees							1b(3) 1b(4) 1b(5)		√ √ √
	(6) Pe	rformance of se	ervices or member equipment, mailing	ship or fundraisi	ing solicitations	s				1b(6) 1c	$\overline{}$	√ √
	value	of the goods, o	of the above is "Y ther assets, or sei on or sharing arrar	rvices given by t	he reporting fo	undation.	If the founda	ation recei	ved less	than	fair m	arket
(a) Line	no (b) Amount involved	(c) Name of nor	ncharitable exempt o	rganization	(d) Descri	ption of transfers	s, transaction	is, and sha	iring arra	angeme	ents
								· · - · · · · · · · · · · · · · · · · ·				
									· · · · · · · ·			
	-								 .			
	\dashv											
	-		 									
			ectly or indirectly a 501(c) of the Code					t organiza		7 V		
			e following schedu	•					· · L] Yes	· [V] I	NO
		(a) Name of organ	nization	(b) Ty	pe of organization		(0) Description	of relation	nship		
Sign Here	correc		declare that I have exam laration of preparer (other	than taxpayer) is base	ed on all information		rer has any know		May the IF with the p	RS discu	ss this i	eturn selow
Paid	٦	Print/Type preparer		Preparer's sign			Date		i I if	TIN		
Prepa Use C		Firm's name		l			<u> </u>	Firm's EIN				
	···· y	Firm's address		· 				Phone no				

Scotts Miracle-Gro Foundation 61-1794169 Supporting Schedule

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

		Check "X" if					Foreign		Average
	Name	Business	Street	City	State	Zip Code	Country	Title	Hours
1	Jim King		14111 Scottslawn Road	Marysville	НО	43041		President	
7	Mark Slavens		14111 Scottslawn Road	Marysville	НО	43041		Director	
3	Patricia Ziegler		14111 Scottslawn Road	Marysville	ЮН	43041		Director	
4	Michael A. Sommer		14111 Scottslawn Road	Marysville	ОН	43041		VP, Treasurer	
2	Su Lok		14111 Scottslawn Road	Marysville	НО	43041		VP, Secretary	
9	Bernard Asırifi		14111 Scottslawn Road	Marysville	Ю	43041		Asst. Secretary	
7									
∞									
6									
10									

				•	
Name Compensation	Compensation		Benefits	Expense Account	Explanation
Jim King					
Mark Slavens					
Patrıcia Zıegler					
Michael A. Sommer					
Su Lok					
Bernard Asirifi					
		ľ			