FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
	OMB Number:	3235-0287							
l	Estimated average burden								
l	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 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 * Koors Mark L							2. Issuer Name and Ticker or Trading Symbol SCRIPPS E W CO /DE [SSP]										of Reporting cable) or (give title	g Perso	on(s) to Issu 10% Ow Other (s)	ner		
(Last) (First) (Middle) 312 WALNUT STREET 28TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 09/12/2014										below)		d Con	below)			
(Street) CINCINNATI OH 45202					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					
(City) (State) (Zip)							curiti	oc 1	cani	ired	Dier	nosed (eficiall	sially Owned								
Table I - Non-Deriv. 1. Title of Security (Instr. 3) 2. Transa Date (Month/D						ar) i	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transac Code (II	tion	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			(A) or	5. Amou Securitie Benefici Owned I	nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Direct C Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	(,	A) or O)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
Class A Common Shares, \$.01 par value per share 09/12						2014				S		0.921		D	\$20.69) 44	44,781		D			
Common ' share												0		D								
		٦	Γable ΙΙ -									sed of				Owned						
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transaction Code (Instr 8)		of	iired r osed) r. 3, 4	Expi	ate Exe iration I nth/Day	Date	ole and 7. Title of Sec Under Deriva		ritle and Amount Securities derlying rivative Security str. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	ode V ((D) Ex		e rcisable		piration ite	Title	N O	Amount or Number of Shares							
Option	\$9.09								02/2	21/2009	02	/20/2016	Class Comn		30,516		30,516	5	D			
Restricted Stock Units	(1)								03/1	15/2013	03	/15/2015	Restric Stoc Unit	k	4,071		4,071 ⁽¹	1)	D			
Restricted Stock Units	(2)								03/0	09/2014	03	/09/2016	Restric Stoc Unit	k .	4,662		4,662 ⁽²	2)	D			
Restricted Stock	(3)								03/0	09/2015	03	/09/2017	Restric	ted k	6,022		6,022 ⁽³	3)	D			

Explanation of Responses:

- 1. This restricted stock unit award will vest in 2015. Upon vesting, each restricted stock unit will convert into one Class A Common Share of the Company.
- 2. This restricted stock unit award will vest in equal parts in 2015 and 2016. Upon vesting, each restricted stock unit will convert into one Class A Common Share of the Company.
- 3. This restricted stock unit award will vest in equal parts in 2015, 2016 and 2017. Upon vesting, each restricted stock unit will convert into one Class A Common Share of the Company.

Remarks:

/s/ William Appleton, Attorney-in-fact for Mark L.

09/15/2014

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** 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.