FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
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0.5

hours per response:

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

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1. Name and Address of Reporting Person*  Cardin Careen						2. Issuer Name and Ticker or Trading Symbol SCRIPPS E W CO /DE [ SSP ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Carum	<u> Lareen</u>											-				Dire	ctor	X	10% C	wner	
(Last) (First) (Middle) C/O MIRAMAR SERVICES INC.				3. Date of Earliest Transaction (Month/Day/Year) 01/27/2015											Officer (give title below)		Other below)	(specify			
250 GRA	50 GRANDVIEW AVE., SUITE 400					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street) FT. MITCHELL KY 41017													Line) X	Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(	(State)	(2	Zip)												Pers	SOIT				
			Table	e I - No	on-Deriva	ative	Sec	uritie	s Ac	quired	l, Dis	sposed o	f, or B	enefi	cially	Own	ed				
2. Transacti Date (Month/Day)  Common Voting Shares, \$.01 par value per share			Execution Date,		Date,	3. Transaction Code (Instr. 8)					and 5) Secu Bene Own		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership					
								Code	v	Amount (A) or (D)		Pric	e	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
			01/27/2	7/2015				S		130,666	D	\$1	6.72(1)	3,000		D					
Class A C per share	s A Common Shares, \$.01 par value hare												0			D					
			Та	ble II -								osed of, convertib				wned					
1. Title of Derivative Security (Instr. 3) Price of Derivative Security		cise (Month/Day/Year ve		Execution Date, if any		i. Transaction Code (Instr.				6. Date Exerc Expiration Da (Month/Day/Y		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		Deri Sec (Ins	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ov Fo Di or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
									ıl					or					l		

## **Explanation of Responses:**

1. The price reported in Column 4 was set on October 27, 2014, using a formula based on the average closing market price of the previous 15 trading days in accordance with the Scripps Family Agreement, to which the reporting person is a signatory.

(D)

Date Exercisable

Expiration

Date

## Remarks:

The reporting person may be deemed to have shared voting power with respect to more than 10% of the Class A Common Shares of the Issuer (due solely to the convertibility of Common Voting Shares of the Company into Class A Common Shares on a share-for-share basis) due to the voting provisions of the Scripps Family Agreement dated October 15, 1992, as amended, to which the reporting person is a party. The reporting person filed a Schedule 13D with the Commission on January 24, 2013, as amended March 18, 2013, September 20, 2013 and August 5, 2014.

> /s/ Tracy Tunney Ward on behalf of Miramar Services, Inc. as Attorney-In-Fact for

of Shares

Title

01/28/2015

Careen Cardin

\*\* 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.