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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB Number: 3235-0287

Estimated average burden	
hours per response:	0.5

1. Name and Addre Koors Mark	1 0	erson*	2. Issuer Name and Ticker or Trading Symbol <u>E.W. SCRIPPS Co</u> [SSP]		ionship of Reporting Pe all applicable) Director	rson(s) to Issuer 10% Owner	
(Last) 312 WALNUT 28TH FLOOR	(First) STREET	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 06/03/2015		Officer (give title below) VP/Audit and Co	Other (specify below) ompliance	
(Street) CINCINNATI	ОН	45202	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)					

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

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1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(11150.4)
Class A Common Shares, \$.01 par value per share	06/03/2015		S		15,034	D	\$23.6542	34,639	D	
Common Voting Shares, \$.01 par value per share								0	D	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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. Transa Code (8)		n of		6. Date Exerc Expiration Da (Month/Day/\	ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Restricted Stock Units	(1)							03/09/2014	03/09/2016	Restricted Stock Units	2,646		2,646 ⁽¹⁾	D	
Restricted Stock Units	(2)							03/09/2015	03/09/2017	Restricted Stock Units	2,734		2,734 ⁽²⁾	D	
Restricted Stock Units	(3)							03/09/2016	03/09/2018	Restricted Stock Units	4,872		4,872 ⁽³⁾	D	

Explanation of Responses:

1. This restricted stock unit award will vest in 2016. 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 2016 and 2017. 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 2016, 2017 and 2018. Upon vesting, each restricted stock unit will convert into one Class A Common Share of the Company.

Remarks:

/s/ William Appleton,

Koors

Attorney-in-fact for Mark L.

06/05/2015

** 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.