FORM 4

1. Name and Address of Reporting Person

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

5. Relationship of Reporting Person(s) to Issuer

OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

neck this box if no longer subject to	
ection 16. Form 4 or Form 5	
ligations may continue. See	
struction 1(h)	

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

2. Issuer Name and Ticker or Trading Symbol

GALLOWAY DAVID A						SCRIPPS E W CO /DE [SSP]										(Check all applicable) X Director 10% Owner						
(Last) 312 WA	```	irst) EET, 28TH FLC	(Middle))OR			Date o 5/04/2		est Tra	ansaction (Mon	ith/Day/Y	′ear)		Officer below)	(give title	Other (s below)		specify				
(Street) CINCIN (City)	CINCINNATI OH 45202						endmer	nt, Dat	e of Origin	al Fi	iled (Mon	nth/Da <u>r</u>	Line	 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person 								
		Tal	ole I - Nor	n-Deriv	/ativ	e Se	curit	ies A	cquired	1, C	ispos	ed o	f, or l	Bene	eficiall	y Owned						
Date				2. Trans Date (Month		'ear)	2A. Deemed Execution Da if any (Month/Day/Y		Code		ction Dispos		urities Acquired (A) sed Of (D) (Instr. 3, 4			5. Amour Securitie Beneficia Owned F	s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Cod	e '	V Am	Amount		() or ()	Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)		
Class A Common Shares, \$.01 par value per share																2,0	2,000		D			
Common Voting Shares, \$.01 par value per share															0		D					
			Table II -						quired, ts, optic							Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	1. Transaction Code (Instr. 3)		5. Number of		1		rcisable and Date		7. Title and Amo of Securities Underlying Deriv Security (Instr. 3 4)		erivative	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(A) (D) Dat		ole	Expiratio Date		Fitle	Amount Number Shares								
Option	\$38.805								11/21/20)3	11/20/20		Class A Commor		5,000		6		D			
Phantom Stock	\$44.66								(1)		(1)		Class A Commoi		.3.92 ⁽¹⁾		6		D			
Option	\$39.82								04/29/20)4	04/28/20		Class A Common 10,0		0,000		6		D			
Option	\$52.91								04/15/20)5	04/14/20		Class A Commoi		0,000		6		D			
Option	\$51.26								04/14/20	06	04/13/20		Class A Commor		0,000		6		D			

Explanation of Responses:

\$46.64

1. Pursuant to the company's 1997 Deferred Compensation and Stock Plan for Directors, directors may defer fees into a phantom stock fund. Under this plan, fees are converted quarterly into phantom shares at the fair market value of the company's Class A Common shares on the last trading day of each quarter. Upon retirement as a director, the balance may be paid in either shares or cash. The balance at 3/31/06 was 4,354.12 phantom shares.

05/04/2007

2. The exercise price of this nonqualified stock option award granted under the company's 1997 Long-Term Incentive Plan is \$46.64.

Remarks:

Option

<u>/s/ M. Denise Kuprionis,</u> <u>Attorney-in-fact for David A.</u> <u>Galloway</u>

10.000

(2)

Class A

Commor

05/03/2016

05/05/2006

6

D

** 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).

05/04/2006

** 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.