FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

3235-0287 OMB Number: Estimated average burden 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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					OI	Seci	1)06 1101.	1) 01 111	ie ilive	esument '	COIII	ipany Act	01 1940								
1. Name and Address of Reporting Person* Weber Jennifer L						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)					
weber	<u>Jenniner i</u>	<u></u>										-				Directo			10% O		
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/21/2008										below)	Officer (give title below) SVP/Human Re		Other (s	specify	
312 WALNUT STREET, 28TH FLOOR				02/	(21/2	2000								v P/Huma	ап ке	sources					
(Street)					- 4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
CINCIN	NATI O	OH 45202														X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(S	tate)	(Zip)										Person								
		Tab	le I - No	n-Deriv	/ative	e Se	curiti	es A	cqu	ired, D	isp	osed o	f, or	Bene	ficially	/ Owned	l				
			Date	2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)			Transaction Disp Code (Instr. 5)				(A) or 3, 4 and		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
										Code	,	Amount	(A (E) or)	Price	Transact	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)	
Class A Common Shares, \$.01 par value per share				02/21/2008						A		7,826	5	A	(1)	7,826(1)		D			
Class A Common Shares, \$.01 par value per share																9,361			D		
Common share	mmon Voting Shares, \$.01 par value per re															0			D		
		7	Гable II -									sed of, onvertil				Owned					
1. Title of 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	d Date,	4. Transactior Code (Instr 8)		5. Number		6. Da	ate Exerc iration Da nth/Day/Y	isab ıte		7. Title of Sec Under Deriva	7. Title and Amoun of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transactic (Instr. 4)	e Ov s Fo llly Dii or g (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownershi (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	e rcisable		xpiration ate	Title	O N O	umber						
Option	\$49.91								09/	01/2006	08	3/31/2013	Class Comm		0,000		4		D		
Option	\$48.91								02/:	/22/2007	02	2/21/2014	Class Comm		0,000		4		D		
Option	\$48.82								02/	/22/2008	02	2/21/2015	Class Comm		2,500		4		D		
Option	\$42.62	02/21/2008			A		1		02/2		02	2/20/2016	Class		5,000	(3)	4		D		

Explanation of Responses:

- $1.\ This\ restricted\ share\ award\ shall\ vest\ in\ three\ equal\ installments\ on\ 2/21/09,\ 2/21/10\ and\ 2/21/11.$
- 2. This option is exercisable in equal installments on 2/21/09, 2/21/10 and 2/21/11.
- 3. The exercise price of this nonqualified stock option award granted under the company's Long-Term Incentive Plan is \$42.62.

Remarks:

/s/M. Denise Kuprionis, Attorney-in-fact for Jennifer L. 02/25/2008 Weber

** 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.