FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL
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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* <u>Lawlor Brian G.</u>						2. Issuer Name and Ticker or Trading Symbol E.W. SCRIPPS Co [SSP]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) (First) (Middle) 312 WALNUT STREET 28TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 03/15/2016								Sr. VP/Television							
(Street)		Н	45202		4.	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)	(S		(Zip)																	
Table I - Non-Deriv 1. Title of Security (Instr. 3) 2. Trans Date					sactio	2A. Deemed Execution Date,								or 5. Amount of Securities		S	6. Ownership Form: Direct		7. Nature of Indirect	
			(Month/Day/Yea		ear)	if any (Month/Day/Yea		ar) Code (Instr.	1			_	Beneficially Owned Following Reported		(D) or Indirect (I) (Instr. 4)	str. 4)	Beneficial Ownership (Instr. 4)		
									Code	Code V A		(A) o (D)	r Price	Price Transa (Instr. 3						
Class A Common Shares, \$.01 par value per share														71,002		D				
Common Voting Shares, \$.01 par value per share															(0		D		
			Table II -						uired, D s, option						vned					
Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Transaction 3A. Deeme		d 4. Date, Transact Code (In:		5. Number of		6. Date Ex Expiration (Month/Da	Date	ble and 7. Title and Am of Securities		ies g Security	De Se	8. Price of Derivative Security (Instr. 5) 8. Price of derivative Security Security Benef Owne Follow Repoil Trans (Instr.		e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amour or Number of Shares	er						
Restricted Stock Units	(1)	03/15/2016			J		31,073		03/09/201	7 03	3/09/2020	Restricted Stock Units	31,07	3	\$17.7	31,073	(1)	D		
Restricted Stock Units	(2)								03/09/201	4 03	3/09/2017	Restricted Stock Units	5,294	4		5,294 ⁰	(2)	D		
Restricted Stock Units	(3)								03/09/201	5 03	3/09/2018	Restricted Stock Units	6,383	3		6,383 ⁰	(3)	D		
Restricted Stock	(4)								03/09/201	6 03	3/09/2019	Restricted Stock	12,99	3	_	12,993	(4)	D		

Explanation of Responses:

- 1. This restricted stock unit award will vest in equal parts in 2017, 2018, 2019 and 2020. A portion of the award is performanced based. 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 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 2017 and 2018. Upon vesting, each restricted stock unit will convert into one Class A Common Share of the Company.
- 4. This restricted stock unit award will vest in equal parts in 2017, 2018 and 2019. Upon vesting, each restricted stock unit will convert into one Class A Common Share of the Company.

Remarks:

/s/ William Appleton, Attorney-03/16/2016 in-fact for Brian G. Lawlor

** Signature of Reporting Person

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.