## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB A	PROVAL
OMB Number:	3235-0287
Estimated avera	ge burden
hours per respor	nse: 0.5

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>Hale Mark S</u>					2. Issuer Name and Ticker or Trading Symbol SCRIPPS E W CO /DE [ SSP ]									(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  X Officer (give title Other (specify below)  SVP of Technology Operations							
(Last) (First) (Middle) 312 WALNUT STREET, 28TH FLOOR						3. Date of Earliest Transaction (Month/Day/Year) 02/22/2007															<u> </u>	
(Street) CINCINNATI OH 45202					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting						
(City) (State) (Zip)																	Person					
			le I - Nor			_				ed, D	isp					_						
Date			2. Transa Date (Month/D			2A. Deemed Execution Date, if any (Month/Day/Year)		Co	Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)				Securitie Beneficia Owned F	5. Amount of Securities Beneficially Owned Following Reported		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Co	ode \	/	Amount	()	A) or D)	Price	Transaction(s) (Instr. 3 and 4)				(o)		
Class A Common Shares, \$.01 par value per share															1,470		I		Wife's Trust			
Common Voting Shares, \$.01 par value per share																0		D				
		٦	Table II - I	Derivat (e.g., pu												Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security  3. Transaction Date Execution Date, if any (Month/Day/Year) (Month/Day/Year)  3. Deemed Execution Date, if any (Month/Day/Year) 4. Transaction Code (Instr. 8)				5. Number 6. Da			Date Exercisable and piration Date onth/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)				
				С	ode	v	(A)	(D)	Date Exercis	sable		cpiration ate	Title	or Nu of	nount Imber Iares							
Option	\$23.61								01/15/	/1999	01	/14/2008	Class		,000		12		D			
Option	\$23.66								01/19/	/2000	01	/18/2009	Class A Common 1		0,000		12		D			
Option	\$24.5				$\neg$				01/24/	/2001	01	/23/2010	Class A Common 1		,000		12		D			
Option	\$32.13								01/25/	/2002	01	1/24/2011	Class A Common 1		5,000		12		D			
Option	\$37.56								02/20/	/2003	02	2/19/2012	Class Comn		0,000		12		D			
Option	\$39.99								02/26/	/2004	02	2/25/2013	Class		5,000		12		D			
Option	\$49.15								02/25/	/2005	02	2/24/2014	Class Comn		5,000		12		D			
Option	\$46.46								02/15/	/2006	02	2/09/2013	Class Comn	A 16	5,000		12		D			
Option	\$50.75								07/27/	/2006	07	7/26/2013	Class Comn		1,000		12		D			
Option	\$48.91								02/22/	/2007	02	2/21/2014	Class Comn		5,000		12		D			
Option	\$42.44								08/01/	/2007	07	7/31/2014	Class Comn		),000		12		D			
Ontion	\$48.82	02/22/2007		T	<sub>Δ</sub> Τ		1		02/22/2	2000(1)	100	2/21/2015	Class	A 20	000	(2)	12		D			

## **Explanation of Responses:**

- 1. This option is exercisable in three equal installments on 2/22/08, 2/22/09 and 2/22/10.
- 2. The exercise price of this nonqualified stock option award granted under the company's Long-Term Incentive Plan is \$48.82.

## Remarks:

Hale

\*\* Signature of Reporting Person

son Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.