FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

3...,

| OMB APPROVAL | |
|--------------|-----------|
| OMB Number: | 3235-0287 |

0.5

hours per response:

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB Number: 3238
Estimated average burden

| 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* PETERMAN TIM | | | | | | 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) Director 10% Owner | | | | | | |
|--|---|---------------------|---|---------|---|---|--------------|-----------|--|---------|------|---|---|-------------------------------|---|--|--|--|--|---|--|
| (Last) (First) (Middle) 312 WALNUT STREET, 28TH FLOOR | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/15/2007 | | | | | | | | | | below) | | Other (spe below) te Development | | ` ´ | |
| (Street) CINCINNATI OH 45202 | | | | | 4. 11 | 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) | (5 | • | (Zip) | n-Deriv | /ative | Sec | ·uriti | | canin | red [| Dier | nsed (| of or B | enef | cially | , Owner | 1 | | | | |
| Table I - Non-Deriv. 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | saction | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | e, 3 T | 3. Transaction Code (Instr. | | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5) | | | 5. Amou Securitie Benefici Owned F | Amount of curities neficially rned Following | | : Direct r Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | c | ode | v | Amount | (A) (D) | or P | rice | | orted saction(s) r. 3 and 4) | | | (Instr. 4) | |
| Class A (share | Common Sl | nares, \$.01 par va | alue per | 03/1 | 5/2007 | 7 | | | | s | | 1,22 | 5 D \$ | | \$43.5 | 4,682 | | D | | | |
| Common Voting Shares, \$.01 par value per share | | | | | | | | | | | | | | | | | 0 | | D | | |
| | | 7 | able II - | | | | | | | | | | , or Be ble sec | | | Owned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | 3A. Deeme Execution if any (Month/Da | Date, | 4. Transaction Code (Instr. 8) | | 5. Number of | | 6. Date Exercisa Expiration Date (Month/Day/Year | | | | 7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exerc | cisable | | piration te | Title | Amo or Num of Sha | ber | | | | | | |
| Option | \$37.505 | | | | | | | | 03/03 | 1/2003 | 02 | /28/2012 | Class A Commor | 20, | 000 | | 7 | ĺ | D | | |
| Option | \$39.985 | | | | | | | | 02/26 | 6/2004 | 02 | /25/2013 | Class A Commor | 24, | 000 | | 7 | | D | | |
| Option | \$48.71 | | | | | | | | 03/23 | 3/2005 | 03 | /22/2014 | Class A Commor | 22, | 500 | | 7 | ĺ | D | | |
| Option | \$46.46 | | | | | | | | 02/15 | 5/2006 | 02 | /09/2013 | Class A Commor | 15, | 000 | | 7 | | D | | |
| Option | \$47.07 | | | | | | | | 11/09 | 9/2006 | 11 | /08/2013 | Class A Common | 15, | 000 | | 7 | | D | | |
| Option | \$48.91 | | | | | | | | 02/22 | 2/2007 | 02 | /21/2014 | Class A Common | 17, | 500 | | 7 | | D | | |
| Option | \$48.82 | | | | | | | | 02/22 | 2/2008 | 02 | /21/2015 | Class A Commor | 17, | 500 | | 7 | | D | | |

Explanation of Responses:

Remarks:

/s/ M. Denise Kuprionis,

Attorney-in-fact for Tim

Peterman

** Signature of Reporting Person

03/15/2007

Date

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

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.

 $^{^{\}star}$ 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).