#### SCRIPPS E W CO /DE

Form 4

March 24, 2005

## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

30(h) of the Investment Company Act of 1940

Check this box

if no longer subject to Section 16. Form 4 or

Form 5 obligations

may continue. See Instruction

**SECURITIES** Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* EBEL GREGORY L

> (Last) (First) (Middle)

312 WALNUT STREET, 28TH **FLOOR** 

(Street)

2. Issuer Name and Ticker or Trading

SCRIPPS E W CO /DE [SSP]

3. Date of Earliest Transaction (Month/Day/Year) 03/23/2005

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer Symbol

(Check all applicable)

Director 10% Owner X\_ Officer (give title Other (specify below) VP/Human Resources

**OMB APPROVAL** 

Estimated average

burden hours per

3235-0287

January 31,

2005

0.5

OMB

Number:

Expires:

response...

6. Individual or Joint/Group Filing(Check Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting Person

### CINCINNATI, OH 45202

share

(City)	(State)	(Zip) Tabl	le I - Non-D	<b>Derivative</b>	Secur	ities Acq	uired, Disposed o	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)			d of (D)	5. Amount of Securities Form: Direct Beneficially (D) or Owned Indirect (I) Following Reported (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
Class A Common Shares, \$.01 par value per share	03/23/2005		Code V	Amount 274	or (D)	Price \$ 47.95	Transaction(s) (Instr. 3 and 4) 580	D	
Class A Common Shares, \$.01 par value per							9,282	D	

### Edgar Filing: SCRIPPS E W CO /DE - Form 4

Common Voting Shares, \$.01 par value per share

0 D

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

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 control number.

SEC 1474 (9-02)

# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pri Deriv Secur (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option	\$ 24.5					01/24/2001	01/23/2010	Class A Common	20,000	
Option	\$ 32.125					01/25/2002	01/24/2011	Class A Common	22,000	
Option	\$ 37.555					02/20/2003	02/19/2012	Class A Common	30,000	
Option	\$ 39.985					02/26/2004	02/25/2013	Class A Common	24,000	
Option	\$ 48.71					03/23/2005	03/22/2014	Class A Common	22,500	
Option	\$ 46.46					02/15/2006	02/09/2013	Class A Common	15,000	

## **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Reporting Owners 2

#### Edgar Filing: SCRIPPS E W CO /DE - Form 4

EBEL GREGORY L 312 WALNUT STREET, 28TH FLOOR CINCINNATI, OH 45202

VP/Human Resources

### **Signatures**

/s/ M. Denise Kuprionis, Attorney-in-fact for Gregory L. Ebel

03/24/2005

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

- \* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Signatures 3