Edgar Filing: SCHOLASTIC CORP - Form 4

Form 4											
October 29, 2				COMMISSION							
Check thi	Check this box Wa				shington, D.C. 20549					3235-0287 January 31,	
if no longer subject to Section 16. Form 4 or				GES IN SECUR		ICIA	LOW	NERSHIP OF	Expires: 20 Estimated average burden hours per response (
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 1	7(a) of the	Public U		ling Con	npany	Act of	e Act of 1934, E 1935 or Section 40	1		
(Print or Type R	Responses)										
NEWMAN JUDITH Syn			Symbol	Name and				5. Relationship of Reporting Person(s) to Issuer			
				f Earliest Transaction Day/Year) 1014				(Check all applicable) <u></u> Director <u></u> 10% Owner <u></u> Officer (give title <u></u> Other (specify below) <u></u> below) EVP, Pres., Bk Clubs & E-comm.			
Filed(Mon				ndment, Date Original th/Day/Year)				 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
	K, NY 10012							Person		porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if any (Month/Day/Year)			(A) or				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	10/28/2014			Code V S	Amount 1,500	(D) D	Price \$ 33.25	30,292	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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: SCHOLASTIC CORP - Form 4

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. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
Popo	rting (WPoro		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
Reporting Owner Name / Address			Director	10% Own	Relati er Officer	ionships			Other		
	N JUDITH RPORATE S	SECRETARY, SC	HOLASTIC			EVP P	res Bk C	lubs &	ç		

EVP, Pres., Bk Clubs & E-comm.

Signatures

557 BROADWAY NEW YORK, NY 10012

CORP

Judith Newman, by Teresa M. Connelly, Attorney-in-fact

**Signature of Reporting Person

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.

Date

10/29/2014