FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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Estimated average burden								
hours per response	: 0.5							

	Check this box if no longer subjec
	to Section 16. Form 4 or Form 5
$\cup$	obligations may continue. See
	Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

					_		. ,			mpany Act (									
1. Name and Address of Reporting Person*  DAVIES JOHN L				2. Issuer Name <b>and</b> Ticker or Trading Symbol SCHOLASTIC CORP [ SCHL ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
DITTIES JOINTE													X Director			10% Owner		vner	
(Last)	st) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 08/02/2023									Office below	er (give title /)		Other (spe below)		
	C/O CORPORATE SECRETARY SCHOLASTIC					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable						
CORP					,,							Li	Line)						
557 BRO	OADWAY												X Form filed by One Reporting Person						
(Street)													Form filed by More than One Reporting Person						
l ` ′	NEW YORK NY 10012			Rule 10b5-1(c) Transaction Indication															
(City)	(St	ate) (Z	Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										ended to				
		Table	I - No	on-Deriva	tive S	ecur	ities A	quired	l, Dis	sposed of	f, or E	Benefic	ially	Own	ed				
1. Title of Security (Instr. 3)  2. Transactio Date (Month/Day/V			Execution Date,		ion Date,	Transaction Disposed Code (Instr. 5)			es Acquired (A) o Of (D) (Instr. 3, 4		l and Secur Benef Owner Follow		cially I ing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) oi (D)	Price			ted action(s) 3 and 4)				
Common Stock 08/02/20					)23			S		4,530	D	\$43.6	3,930		,930	D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
	of 2. 3. Transaction 3A. Deemed Execution Date Execution Date if any		Deemed cution Date,	4. Transaction Code (Insti		5. Number of Derivativ Securitie Acquired (A) or Disposed of (D) (Instr. 3, and 5)	6. Date Exercisable a Expiration Date (Month/Day/Year)		cisable and	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Beneficial Ownership (Instr. 4)		
					Code	v	(A) (D)	Date Exerc	sable	Expiration Date	Title	or Number of Shares							

## Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$43.50-44.01 inclusive. The reporting person undertakes to provide to Scholastic Corporation, any holder of Scholastic Corporation stock or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (1) to this Form 4.

/s/ John L. Davies, by Andrew
S. Hedden, Esq., Attorney-in- 08/03/2023

<u>fact</u>

\*\* Signature of Reporting Person 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.