FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL										
	OMB Number:	3235-0287									
	Estimated average b	urden									
ı	hours nor resnonse.	0.5									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940
Name and Address of Reporting Person*	2. Issuer Name and Ticker or Trading Symbol

1. Name and Address of Reporting Person * ROOME HUGH R					2. Issuer Name and Ticker or Trading Symbol SCHOLASTIC CORP [SCHL]								ationship of Rep k all applicable) Director Officer (give		erson(s) to Iss 10% Ov Other (s	vner
(Last) (First) (Middle) C/O CORPORATE SECRETARY, SCHOLASTIC CORP					3. Date of Earliest Transaction (Month/Day/Year) 05/10/2007								below) `		below) Internation	·
557 BROADWAY (Street) NEW YORK NY 10012						4. If Amendment, Date of Original Filed (Month/Day/Year)							vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(S	tate)	(Zip)													
		Tak	le I - No	n-Deriva	ative S	ecurities Ac	quired,	Dis	posed of	f, or Be	nefi	cially	Owned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)						2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			or and 5)	5. Amount of Securities Beneficially Owned Follow	For (D)	rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership
							Code	v	Amount	(A) or (D)	Pr	ice	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock 05/10/2							M		20,000	A	\$:	17.595	34,049		D	
Common Stock 05/10/2							S ⁽¹⁾		20,000	D		\$32	14,049		D	
Common Stock													5,819		I	By trustee of 401(k) Plan
						curities Acqu lls, warrants							wned			
				ansaction ode (Instr	n of	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu		S	erivative derivative Security	umber of vative urities eficially	10. Ownership Form: Direct (D)	11. Nature of Indirect Beneficial Ownership	

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. Transa Code (8)		of Deri Sec Acq (A) o Disp of (I	umber vative urities uired or oosed O) (Instr. and 5)	Expiration Date (Month/Day/Year)		nd 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Employee Stock Option (right to buy)	\$17.595	05/10/2007		M			20,000	(2)	07/16/2007	Common Stock	20,000	\$0	47,184	D	

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on April 24, 2007.
- 2. Option vested in four equal annual installments beginning on July 15, 1998, the first anniversary of the date of grant.

Hugh Roome, by Teresa M. Connelly, Attorney-in-fact

05/14/2007

** Signature of Reporting Person

Date

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

- * 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.