FORM 4

UNITED STATES SECU

Washington, D.C. 20549

RH	IES	AND EX	CHANGE	COMMIS	SION

OMB APE	PROVAL
OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

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

1(0). 3	ee instruction	0.																		
Name and Address of Reporting Person* Henderson Kaya					2. Issuer Name and Ticker or Trading Symbol SCHOLASTIC CORP [SCHL]						(Cl	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
Henderson Kaya											-				√	Direct	or		10% Ov	vner
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 09/18/2024								Officer (give title Other (specific below) below)					specify	
C/O LEGAL DEPT., SCHOLASTIC CORP																				
557 BROADWAY					4. If Amendment, Date of Original Filed (Month/Day/Year)						6. 1	6. Individual or Joint/Group Filing (Check Applicable								
						Line)														
(Street)															Form filed by One Reporting Person					
NEW YO	IEW YORK NY 10012													Form filed by More than One Reporting Person						
(City)	(St	ate) (Ž	Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acq Disposed Of (D) (5)		Acquired (A) or D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		ies ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
										v	Amount	(A) (D)) or)	Price	Tr	Transaction(s) (Instr. 3 and 4)				(instr. 4)
Common Stock 09/18/2					2024				A		3,920 ⁽¹⁾ A		A	\$31.8	88	8 5,835			D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
				(e.g., pu	its, ca	alis, v	warra	ants,	optio	ns, c	convertio	ie se	ecur	ities)						
1. Title of Derivative Security (Instr. 3)	vative Conversion Date urity or Exercise (Month/Day/Year) Execution Date, if any				Transaction of Code (Instr. Derivative		rative rities rired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		; ;	8. Price Derivati Security (Instr. 5)		tive derivative ity Securities		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	or Nur of	ount mber ires								

Explanation of Responses:

1. Represents a grant of restricted stock units under the Amended and Restated Scholastic Corporation Outside Directors Stock Incentive Plan, all of which are scheduled to vest on the earlier of September 18, 2025 or the date of the Company's 2025 annual stockholder meeting.

/s/ Kaya Henderson, by Vanessa Hill, Esq. Attorney-

09/20/2024

in-fact

** 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.