

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2014</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2014 or fiscal plan year beginning <u>01/01/2014</u> and ending <u>12/31/2014</u>	
A This return/report is for:	☐ a multiemployer plan; ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions); or ☒ a single-employer plan; ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report; ☐ the final return/report; ☐ an amended return/report; ☐ a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558; ☐ automatic extension; ☐ the DFVC program; ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan SCRIPPS NETWORKS INTERACTIVE 401K SAVINGS PLAN	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;">001</td> </tr> <tr> <td colspan="2">1c Effective date of plan 01/01/2009</td> </tr> </table>	1b Three-digit plan number (PN) ▶	001	1c Effective date of plan 01/01/2009	
1b Three-digit plan number (PN) ▶	001				
1c Effective date of plan 01/01/2009					
2a Plan sponsor's name and address; include room or suite number (employer, if for a single-employer plan) SCRIPPS NETWORKS INTERACTIVE, INC 9721 SHERRILL BLVD KNOXVILLE, TN 37932	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) 61-1551890</td> </tr> <tr> <td>2c Plan Sponsor's telephone number 513-824-3343</td> </tr> <tr> <td>2d Business code (see instructions) 551112</td> </tr> </table>	2b Employer Identification Number (EIN) 61-1551890	2c Plan Sponsor's telephone number 513-824-3343	2d Business code (see instructions) 551112	
2b Employer Identification Number (EIN) 61-1551890					
2c Plan Sponsor's telephone number 513-824-3343					
2d Business code (see instructions) 551112					

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2015	TONYA GRAY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE
Preparer's name (including firm name, if applicable) and address (include room or suite number) (optional)			Preparer's telephone number (optional)

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
5 Total number of participants at the beginning of the plan year	5 2483
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).	
a(1) Total number of active participants at the beginning of the plan year	6a(1) 2001
a(2) Total number of active participants at the end of the plan year	6a(2) 1922
b Retired or separated participants receiving benefits	6b 2
c Other retired or separated participants entitled to future benefits.....	6c 543
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d 2467
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e 0
f Total. Add lines 6d and 6e	6f 2467
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g 2444
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h 118
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2A 2E 2F 2G 2J 2K 2S 2T 3H	
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☒ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

Part III**Form M-1 Compliance Information (to be completed by welfare benefit plans)**

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2014 Form M-1 annual report. If the plan was not required to file the 2014 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2014
		This Form is Open to Public Inspection.

For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan <u>SCRIPPS NETWORKS INTERACTIVE 401K SAVINGS PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SCRIPPS NETWORKS INTERACTIVE, INC</u>	D Employer Identification Number (EIN) <u>61-1551890</u>

Part I	Service Provider Information (see instructions)
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You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☒ Yes ☐ No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation <u>THE VANGUARD GROUP, INC.</u>
<u>23-1945930</u>

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation
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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

THE VANGUARD GROUP, INC.

23-1945930

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 25 26 37 52	NONE	138669	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3 If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III **Termination Information on Accountants and Enrolled Actuaries (see instructions)**
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

<p style="text-align: center;">SCHEDULE D (Form 5500)</p> <p style="text-align: center; font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="text-align: center; font-size: small;">Department of Labor Employee Benefits Security Administration</p>	<p style="text-align: center;">DFE/Participating Plan Information</p> <p style="text-align: center; font-size: small;">This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p style="text-align: center; font-weight: bold;">▶ File as an attachment to Form 5500.</p>	<p style="text-align: center; font-size: small;">OMB No. 1210-0110</p> <hr/> <p style="text-align: center; font-size: large; font-weight: bold;">2014</p> <hr/> <p style="text-align: center; font-size: small;">This Form is Open to Public Inspection.</p>
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For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

A Name of plan SCRIPPS NETWORKS INTERACTIVE 401K SAVINGS PLAN	B Three-digit plan number (PN) ▶	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 SCRIPPS NETWORKS INTERACTIVE, INC	D Employer Identification Number (EIN) 61-1551890	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: VFTC RETIREMENT SAVINGS TRUST III

b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

c EIN-PN 23-2186884-024	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15843246
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

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103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
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code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2014 This Form is Open to Public Inspection
For calendar plan year 2014 or fiscal plan year beginning <u>01/01/2014</u> and ending <u>12/31/2014</u>		
A Name of plan <u>SCRIPPS NETWORKS INTERACTIVE 401K SAVINGS PLAN</u>		B Three-digit plan number (PN) ► <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SCRIPPS NETWORKS INTERACTIVE, INC</u>		D Employer Identification Number (EIN) <u>61-1551890</u>

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	349213	357026
(2) Participant contributions.....	1b(2)	402357	404839
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property).....	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans.....	1c(8)	2287139	2424032
(9) Value of interest in common/collective trusts	1c(9)	15366173	15843246
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	206361211	238456657
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

1d Employer-related investments:

		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	224766093	257485800

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	224766093	257485800
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	13805330	
(B) Participants	2a(1)(B)	16797395	
(C) Others (including rollovers)	2a(1)(C)	1445638	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		32048363
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	91787	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		91787
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	9128772	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		9128772
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		369238
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		8482236
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		50120396

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	17232610	
(2) To insurance carriers for the provision of benefits.....	2e(2)		
(3) Other.....	2e(3)	3919	
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		17236529
f Corrective distributions (see instructions).....	2f		29320
g Certain deemed distributions of participant loans (see instructions).....	2g		551
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)		
(4) Other.....	2i(4)	134289	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		134289
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		17400689

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		32719707
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unqualified (2) ☐ Qualified (3) ☒ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)?

☒ Yes ☐ No

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **DELOITTE & TOUCHE LLP**

(2) EIN: **13-3891517**

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.).....

	Yes	No	Amount
4a		X	
4b		X	

	Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
4c			
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.).....		X	
4d			
e Was this plan covered by a fidelity bond?	X		15000000
4e			
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f			
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?.....		X	
4g			
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?.....		X	
4h			
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i			
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X	
4j			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k			
l Has the plan failed to provide any benefit when due under the plan?.....		X	
4l			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?
 If "Yes," enter the amount of any plan assets that reverted to the employer this year..... ☐ Yes ☒ No Amount:

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)? ☐ Yes ☐ No ☐ Not determined

Part V Trust Information (optional)

6a Name of trust	6b Trust's EIN

<div>SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Retirement Plan Information</div> <div>This schedule is required to be filed under section 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).</div> <div>► File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2014</div> <div>This Form is Open to Public Inspection.</div>
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For calendar plan year 2014 or fiscal plan year beginning 01/01/2014 and ending 12/31/2014

<div>A Name of plan SCRIPPS NETWORKS INTERACTIVE 401K SAVINGS PLAN</div>	<div>B Three-digit plan number (PN) ► 001</div>
<div>C Plan sponsor's name as shown on line 2a of Form 5500 SCRIPPS NETWORKS INTERACTIVE, INC</div>	<div>D Employer Identification Number (EIN) 61-1551890</div>

Part I	Distributions
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All references to distributions relate only to payments of benefits during the plan year.

1	Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1
2	Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 23-2186884	
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3	Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....	3

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part)
---------	---

4	Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.				
5	If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____	If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6	a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....	6a		
	b Enter the amount contributed by the employer to the plan for this plan year.....	6b		
	c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c		
If you completed line 6c, skip lines 8 and 9.				
7	Will the minimum funding amount reported on line 6c be met by the funding deadline?.....	☐ Yes	☐ No	☐ N/A
8	If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?.....	☐ Yes	☐ No	☐ N/A

Part III	Amendments
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9	If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....	☐ Increase	☐ Decrease	☐ Both	☐ No
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Part IV	ESOPs (see instructions). If this is not a plan described under Section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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10	Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11	a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
	b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.).....	☐ Yes	☐ No
12	Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

- 14** Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	14a	
b The plan year immediately preceding the current plan year	14b	
c The second preceding plan year	14c	

- 15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

- 16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year	16a	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	

- 17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment. ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

- 18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

- 19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

- a** Enter the percentage of plan assets held as:
 Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%
- b** Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more
- c** What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

INDEPENDENT AUDITORS' REPORT

To the Employee Benefits Committee of
Scripps Networks Interactive, Inc.
Knoxville, Tennessee

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Scripps Networks Interactive 401(k) Savings Plan, which comprise the statements of net assets available for benefits as of December 31, 2014 and 2013, and the related statement of changes in net assets available for benefits for the year ended December 31, 2014, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Vanguard Fiduciary Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certifications from the trustee as of December 31, 2014 and 2013 and for the year ended December 31, 2014, that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Other Matter

The supplemental schedule of assets held at end of year as of December 31, 2014 is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule.

Report on Form and Content in Compliance with Department of Labor Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Deloitte + Touche LLP

October 14, 2015

Scripps Networks Interactive 401(k) Savings Plan

Employer Identification Number: 61-1551890
Plan Number: 001

Financial Statements as of December 31, 2014 and
2013, and for the Year Ended December 31, 2014,
Supplemental Schedule as of December 31, 2014,
and Independent Auditors' Report

SCRIPPS NETWORKS INTERACTIVE 401(k) SAVINGS PLAN

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FINANCIAL STATEMENTS:	
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Notes to Financial Statements as of December 31, 2014 and 2013, and for the Year Ended December 31, 2014	5–15
SUPPLEMENTAL SCHEDULE—	16
Form 5500, Schedule H, Part IV, Line 4i—Schedule of Assets (Held at End of Year) as of December 31, 2014	17
NOTE: All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 have been omitted because they are not applicable.	

INDEPENDENT AUDITORS' REPORT

To the Employee Benefits Committee of
Scripps Networks Interactive, Inc.
Knoxville, Tennessee

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Scripps Networks Interactive 401(k) Savings Plan, which comprise the statements of net assets available for benefits as of December 31, 2014 and 2013, and the related statement of changes in net assets available for benefits for the year ended December 31, 2014, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Vanguard Fiduciary Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained certifications from the trustee as of December 31, 2014 and 2013 and for the year ended December 31, 2014, that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Other Matter

The supplemental schedule of assets held at end of year as of December 31, 2014 is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on this supplemental schedule.

Report on Form and Content in Compliance with Department of Labor Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedule, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Deloitte + Touche LLP

October 14, 2015

SCRIPPS NETWORKS INTERACTIVE 401(k) SAVINGS PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS AS OF DECEMBER 31, 2014 and 2013

	2014	2013
ASSETS:		
Participant-directed investments—at fair value:		
Mutual funds	\$ 238,456,657	\$ 206,361,211
Common collective trust fund	<u>15,843,246</u>	<u>15,366,173</u>
Total participant-directed investments—at fair value	<u>254,299,903</u>	<u>221,727,384</u>
Receivables:		
Notes receivable from participants	2,424,032	2,287,139
Employer contributions receivable	357,026	349,213
Participant contributions receivable	<u>404,839</u>	<u>402,357</u>
Total receivables	<u>3,185,897</u>	<u>3,038,709</u>
NET ASSETS AVAILABLE FOR BENEFITS AT FAIR VALUE	<u>257,485,800</u>	<u>224,766,093</u>
ADJUSTMENT FROM FAIR VALUE TO CONTRACT VALUE FOR FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACTS	<u>(467,425)</u>	<u>(406,892)</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 257,018,375</u>	<u>\$ 224,359,201</u>

See notes to financial statements.

SCRIPPS NETWORKS INTERACTIVE 401(k) SAVINGS PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEAR ENDED DECEMBER 31, 2014

ADDITIONS:

Contributions:

Participant contributions	\$ 18,243,033
Employer contributions	<u>13,805,330</u>

Total contributions	<u>32,048,363</u>
---------------------	-------------------

INVESTMENT INCOME:

Net appreciation in fair value of investments	8,482,237
Interest and dividends	<u>9,437,476</u>

Net investment income	<u>17,919,713</u>
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Interest income on notes receivable from participants	<u>91,787</u>
---	---------------

Total additions	<u>50,059,863</u>
-----------------	-------------------

DEDUCTIONS:

Benefits paid to participants	17,266,400
Administrative expenses	<u>134,289</u>

Total deductions	<u>17,400,689</u>
------------------	-------------------

INCREASE IN NET ASSETS	32,659,174
------------------------	------------

BEGINNING OF YEAR	<u>224,359,201</u>
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END OF YEAR	<u><u>\$257,018,375</u></u>
-------------	-----------------------------

See notes to financial statements.

SCRIPPS NETWORKS INTERACTIVE 401(K) SAVINGS PLAN

NOTES TO FINANCIAL STATEMENTS

AS OF DECEMBER 31, 2014 AND 2013, AND FOR THE YEAR ENDED DECEMBER 31, 2014

1. DESCRIPTION OF PLAN

The following description of the Scripps Networks Interactive 401(k) Savings Plan (the “Plan”) is provided for general information purposes only. Participants should refer to the Plan Document for more complete information.

General—The Plan is a defined contribution plan maintained by Scripps Networks Interactive, Inc. (“Scripps”) and subsidiaries. The Plan became effective on January 1, 2009.

The Plan includes a 401(k) savings option which allows participants to defer a portion of their eligible compensation (principally base salary and commissions) for income tax reporting purposes, subject to a maximum set by federal law. Vanguard Fiduciary Trust Company (“Vanguard”) serves as the trustee of the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Participation—Effective January 1, 2010, Participation in the Plan was open to all employees upon employment.

Contributions—Participants may contribute to the Plan, through payroll deductions, a minimum of 1% and up to 16% of eligible compensation, subject to certain Internal Revenue Code (IRC) limitations. For most participants, Scripps contributes amounts equal to one-half of the participants’ contributions up to 6% of eligible compensation.

Beginning January 1, 2010, the Plan included an auto-enrollment provision whereby all newly eligible employees are automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan. Automatically enrolled participants have their deferral rate set at 6% of eligible compensation and their contributions invested in a designated balanced fund until changed by the participant.

Beginning January 1, 2010, upon meeting a one year service requirement, participants also receive an additional company contribution based on a point system which combines age and years of service as of the first day of the year, ranging from a minimum of 2% to a maximum of 8% of eligible compensation.

Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. Contributions are subject to certain Internal Revenue Code (IRC) limitations.

Participant Accounts—Individual accounts are maintained for each Plan participant. Each participant’s account is credited with the participant’s contribution, the Scripps matching contribution, allocations of Scripps’ discretionary contributions, and Plan earnings, and charged with withdrawals and an allocation of Plan investment income and losses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

Investments—Participants direct the investment of their contributions and/or existing account balances into various investment options offered by the Plan. The Plan currently offers 26 mutual funds and a common collective trust (CCT) fund as investment options for participants.

Vesting—All participants are immediately fully vested in employee contributions, plus earnings thereon. Participants hired before January 1, 2010 are immediately fully vested in employer matching contributions. Participants hired after January 1, 2010 become fully vested in employer matching contributions after three years of service based on a three year cliff vesting of 33% per year. All participants become fully vested in any age and service based employer contributions after three years of service.

Withdrawals—Contributions to the Plan and corresponding earnings are accessible to participants upon retirement or after employment with Scripps ends. However, the Plan grants participants access to contributions and the corresponding earnings for withdrawal during employment subject to various limitations and restrictions. In addition, participants who have made contributions to the Plan for greater than 60 months or participants who are at least age 65 may withdraw Scripps' matching contributions and the corresponding earnings. Participants are also permitted to withdraw contributions and corresponding earnings under financial hardship provisions. Participants who elect to withdraw funds under the financial hardship provisions are not allowed to contribute to the Plan for six months following such a withdrawal. Withdrawals are recorded when paid.

Notes Receivable from Participants—Participants may borrow from their fund accounts a minimum of \$1,000 up to the lesser of \$50,000 or 50% of their account balances. Loans are treated as transfers from an investment fund to the Participant Loan Fund. Principal and interest are paid ratably through payroll deductions or as a lump sum for the outstanding balance over a period not to exceed five years; however, loans become due and payable upon termination of employment. The loans are secured by the balance in the participants' accounts and bear interest at a rate equal to prime (as of the date the loan is issued) plus 1%. The prime rate was 3.25% at December 31, 2014. As of December 31, 2014, participant loans have maturities through 2020 at an interest rate of 4.25%.

Payment of Benefits—Benefit payments to participants are recorded upon distribution. There were no participants, who elected to withdraw from the Plan, but had not yet been paid at December 31, 2014.

Forfeited Accounts—At December 31, 2014 and 2013, forfeited nonvested accounts totaled \$308,966 and \$265,058, respectively. These accounts will be used to reduce future employer contributions or pay Plan administrative expenses. During the year ended December 31, 2014, employer contributions were reduced by \$425,402 from forfeited nonvested accounts.

Administration—Scripps provides the Plan with certain accounting and administrative services for which no fees are charged.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting—The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America ("GAAP").

Investment Valuation and Income Recognition—The Plan's investments are stated at fair value. Fair value of a financial instrument is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4, *Fair Value Measurements*, for discussion on fair value measurements.

The Vanguard Retirement Savings Trust III (the “Fund”) is a CCT fund which invests in fully benefit-responsive investment contracts. Investment contracts held by a defined contribution plan are required to be reported at fair value; however, contract value is the relevant measurement attribute for that portion of the net assets available for benefits that is attributable to fully benefit-responsive investment contracts. Contract value is the amount Plan participants would receive if they were to initiate permitted transactions under the terms of the Plan. The statement of net assets available for benefits presents the fair value of the investment contracts as well as the adjustment of the fully benefit-responsive investment contracts from fair value to contract value. The statement of changes in net assets available for benefits is prepared using the contract value basis.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan’s gains and losses on investments bought and sold as well as held during the year.

Management fees and operating expenses charged to the Plan for investments in the mutual funds are deducted from income earned on a daily basis and are not separately reflected. Consequently, management fees and operating expenses are reflected as a reduction of investment return for such investments.

Notes Receivable from Participants—Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are recorded as distributions based on the terms of the Plan document.

Use of Estimates—The preparation of financial statements in conformity with generally accepted accounting principles requires Plan management to make estimates and assumptions that affect the reported amounts of assets, liabilities, and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Risks and Uncertainties—The Plan utilizes various investment options to its participants, including mutual funds and a CCT fund. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and those changes could materially affect the amounts reported in the financial statements.

Subsequent Events—The Plan has evaluated subsequent events through October 14, 2015, the date these financial statements were available to be issued.

New Accounting Standards Not Yet Effective—

In May 2015, the Financial Accounting Standards Board (FASB) issued Accounting Standards Update (ASU) 2015-7, which removes the requirement for reporting entities to categorize within the fair value hierarchy all investment for which fair value is measured using the net asset value per share as a practical expedient. ASU 2015-7 also removes the requirement to make certain disclosures for all investments that are measured at fair value using the net asset value per share as a practical expedient. This update is effective for fiscal periods beginning after December 15, 2016. The Company is currently evaluating the impact of this guidance.

In July 2015, the FASB issued ASU 2015-12 in an attempt to reduce complexity in employee benefit plan accounting consistent with its simplification initiative. There are three parts under this new standard to take into consideration. They are as follows:

Part I amends the accounting guidance to allow fully benefit-responsive investment contracts measured, presented and disclosed only at contract value, which will eliminate the fair value adjustments presented on the face of plan benefit financial statements and modify the reconciliation disclosure in the footnotes.

Part II amends the accounting guidance to remove the requirement to disclose individual investments that are 5% or more of net assets and net appreciation or depreciation for investments by general type.

Part III provides a practical expedient to permit plans to measure investment and investment-related accounts as of a month-end date that is closest to the plan's fiscal year-end, when the fiscal period does not coincide with a month end.

The new accounting guidance is effective for fiscal periods beginning after December 15, 2016. Early adoption is permitted. The Plan is currently evaluating the impact of this guidance.

3. INFORMATION CERTIFIED BY THE TRUSTEE

The following is a summary of the unaudited information regarding the Plan as of December 31, 2014 and 2013 and for the year ended December 31, 2014, included in the Plan's financial statements and supplemental schedule that was prepared by or derived from information prepared by the trustee, and furnished to the Plan administrator. The Plan administrator has obtained certifications from the trustee that such information is complete and accurate.

	2014	2013
Statements of net assets available for benefits:		
Mutual funds—at fair value	\$ 238,456,657	\$ 206,361,211
Vanguard Retirement Savings Trust III (at contract value) *	15,375,821	14,959,281
Notes receivable from participants	2,424,032	2,287,139
Statement of changes in net assets available for benefits:		
Net appreciation in fair value of investments	\$ 8,482,237	
Interest and dividends	9,437,476	
Interest income on notes receivable from participants	91,787	
Supplemental schedule: All investment balances and information included in the supplemental schedule of assets (held at end of year).		

Notes 4 and 7: All investment balances and investment information, excluding the classification and level of investments in Note 4, *Fair Value Measurements*.

* Represents a party-in-interest investment.

4. FAIR VALUE MEASUREMENTS

ASC 820, *Fair Value Measurements and Disclosures*, provides a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value, as follows: Level 1, which refers to securities valued using unadjusted quoted prices from active markets for identical assets; Level 2, which refers to securities not traded on an active market but for which observable market inputs are readily available; and Level 3, which refers to securities valued based on significant unobservable inputs. Assets are classified in their entirety based on the lowest level of input that is significant to the fair value measurement.

Asset Valuation Techniques—Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs. The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2014 and 2013.

Mutual Funds—Valued at the daily closing prices as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Common Collective Trust—Valued at the net asset value of units of a bank collective trust. The net asset value as provided by the trustee, is used as a practical expedient to estimate fair value. The net asset value is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported net asset value. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

The following table sets forth by level within the fair value hierarchy the Plan's investments measured at fair value on a recurring basis at December 31, 2014, held at Vanguard.

	Level 1	Level 2	Level 3	Total
Vanguard Fiduciary Trust Company				
Mutual funds:				
Vanguard Mutual Funds:				
Extended Market Index Fund*	\$ 15,297,394	\$ -	\$ -	\$ 15,297,394
Inflation-Protected Securities Fund*	1,522,913	-	-	1,522,913
Institutional Index Fund Admiral Shares*	33,335,238	-	-	33,335,238
International Growth Fund*	18,957,936	-	-	18,957,936
International Value Fund*	5,599,731	-	-	5,599,731
Primecap Fund Admiral Shares*	29,125,324	-	-	29,125,324
Prime Money Market Fund*	151,430	-	-	151,430
Target Retirement 2010 Fund*	498,439	-	-	498,439
Target Retirement 2015 Fund*	2,145,801	-	-	2,145,801
Target Retirement 2020 Fund*	4,938,918	-	-	4,938,918
Target Retirement 2025 Fund*	5,879,981	-	-	5,879,981
Target Retirement 2030 Fund*	10,207,105	-	-	10,207,105
Target Retirement 2035 Fund*	13,579,449	-	-	13,579,449
Target Retirement 2040 Fund*	10,427,951	-	-	10,427,951
Target Retirement 2045 Fund*	12,339,035	-	-	12,339,035
Target Retirement 2050 Fund*	7,801,574	-	-	7,801,574
Target Retirement 2055 Fund*	1,611,872	-	-	1,611,872
Target Retirement 2060 Fund*	84,484	-	-	84,484
Target Retirement Income Fund*	988,811	-	-	988,811
Selected Value Fund*	1,012,090	-	-	1,012,090
Wellington Fund*	29,114,902	-	-	29,114,902
Windsor II Fund*	15,960,575	-	-	15,960,575
Alger SmallCap Growth Institutional Fund I	1,145,302	-	-	1,145,302
PIMCO Total Return Fund	12,902,642	-	-	12,902,642
Touchstone Smallcap Value Fund	1,381,841	-	-	1,381,841
T Rowe Price Mid-Cap Growth Fund	2,445,919	-	-	2,445,919
Common collective trust—				
Vanguard Retirement Savings Trust III*	<u>-</u>	<u>15,843,246</u>	<u>-</u>	<u>15,843,246</u>
	<u>\$ 238,456,657</u>	<u>\$ 15,843,246</u>	<u>\$ -</u>	<u>\$ 254,299,903</u>

* Represents a party-in-interest investment.

The following tables set forth by level within the fair value hierarchy the Plan's investments measured at fair value on a recurring basis at December 31, 2013, held at Vanguard.

	Level 1	Level 2	Level 3	Total
Vanguard Fiduciary Trust Company				
Mutual funds:				
Vanguard Mutual Funds:				
500 Index*	\$ 30,148,099	\$ -	\$ -	\$ 30,148,099
Extended Market Index Fund*	14,268,892	-	-	14,268,892
Inflation-Protected Securities Fund*	415,053	-	-	415,053
International Growth Fund*	18,530,367	-	-	18,530,367
International Value Fund*	4,794,613	-	-	4,794,613
Primecap Fund*	24,723,425	-	-	24,723,425
Prime Money Market Fund*	270,557	-	-	270,557
Target Retirement 2010 Fund*	539,174	-	-	539,174
Target Retirement 2015 Fund*	4,187,907	-	-	4,187,907
Target Retirement 2020 Fund*	2,995,509	-	-	2,995,509
Target Retirement 2025 Fund*	4,757,610	-	-	4,757,610
Target Retirement 2030 Fund*	7,880,925	-	-	7,880,925
Target Retirement 2035 Fund*	11,278,091	-	-	11,278,091
Target Retirement 2040 Fund*	7,986,462	-	-	7,986,462
Target Retirement 2045 Fund*	9,941,381	-	-	9,941,381
Target Retirement 2050 Fund*	5,915,977	-	-	5,915,977
Target Retirement 2055 Fund*	1,078,036	-	-	1,078,036
Target Retirement 2060 Fund*	27,424	-	-	27,424
Target Retirement Income Fund*	894,454	-	-	894,454
Wellington Fund*	24,058,744	-	-	24,058,744
Windsor II Fund*	15,310,987	-	-	15,310,987
Alger SmallCap Growth Institutional Fund I	1,150,684	-	-	1,150,684
Perkins Mid Cap Value Fund	621,496	-	-	621,496
PIMCO Total Return Fund	11,539,912	-	-	11,539,912
Touchstone Smallcap Value Fund	866,577	-	-	866,577
T Rowe Price Mid-Cap Growth Fund	2,178,855	-	-	2,178,855
Common collective trust—				
Vanguard Retirement Savings Trust III*	-	15,366,173	-	15,366,173
Total	<u>\$ 206,361,211</u>	<u>\$ 15,366,173</u>	<u>\$ -</u>	<u>\$ 221,727,384</u>

* Represents a party-in-interest investment.

Transfers Between Levels—The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances, the transfer is reported at the beginning of the reporting period.

We evaluate the significance of transfers between levels based upon the nature of the financial instrument and size of the transfer relative to total net assets available for benefits. For the years ended December 31, 2014 and 2013, there were no transfers between levels.

5. STABLE VALUE FUND

The Fund is a stable value CCT fund sponsored and trustee by Vanguard. The Fund invests in benefit-responsive investment contracts that are issued by insurance companies and commercial banks and in contracts that are backed by bond trusts that are selected by Vanguard. The primary investment contracts consist of the following:

- Traditional investment contracts issued by insurance companies and banks are nontransferable, but provide for benefit-responsive withdrawals by plan participants at contract value. For traditional investment contracts, fair value comprises the expected future cash flows for each contract discounted to present value. Contract value represents contributions made plus interest accrued at the contract rate, less withdrawals. The crediting rate on traditional contracts is typically fixed for the life of the investment.
- Alternative investment contracts (also called “synthetic investment contracts”) consist of investments together with contracts under which a bank or other institution provides for benefit-responsive withdrawals by plan participants at contract value. For alternative investment contracts, the fair value comprises the aggregate market values of the underlying investments in bond trusts, and the value of the wrap contracts, if any. The difference between valuation at contract value and fair value is reflected over time through the crediting rate formula provided for in the Fund’s synthetic contracts. The crediting rate of the contract resets every quarter based on the performance of the underlying investment portfolio. To the extent that the Fund has unrealized gains and losses (that are accounted for, under contract value accounting, through the value of the synthetic contract), the interest crediting rate may differ from then-current market rates. An investor currently redeeming Fund units may forgo a benefit, or avoid a loss, related to a future crediting rate different from then-current market rates.

The beneficial interest of each participant is represented by units of participation. Units are issued and redeemed daily at the Fund’s constant net asset value (NAV) of \$1 per unit. Distributions of net investment income to unit holders are declared daily and reinvested on the first business day of the following month. It is the expectation of the Fund to maintain a stable net asset value of \$1 per unit, although there is no guarantee that the Fund will be able to maintain this value.

Participants ordinarily may direct either the withdrawal or transfer of all or a portion of their investment at contract value. Contract value represents contributions made to the Fund, plus earnings, less participant withdrawals and administrative expenses as applicable. There are no unfunded commitments or restrictions on redemption frequency for the Fund.

Limitations on the Ability of the Fund to Transact at Contract Value—The Fund’s investment contracts are designed to allow a stable value portfolio to maintain a constant NAV, provide a stable crediting rate, and protect a portfolio in extreme circumstances. The issuers’ ability to meet these obligations may be affected by economic developments in their respective companies and industries.

Further, the existence of certain conditions can limit the Fund’s ability to transact at contract value with issuers of its investment contracts. In general, issuers may terminate the contract and settle at other than contract value if there is a change in the qualification status of participant, employer, or plan; a breach of material obligations under the contract and misrepresentation by the contract holder; or failure of the

underlying portfolio to conform to the pre-established investment guidelines. Any event outside the normal operation of the Fund that causes a withdrawal from an investment contract may result in a negative market value adjustment with respect to the withdrawal. Examples of such events include, but are not limited to, partial or complete legal termination of the Fund or a unit holder, tax disqualification of the Fund or unit holder, and certain Trust amendments if issuers' consent is not obtained.

As of December 31, 2014, the occurrence of an event outside the normal operation of the Fund that would cause a withdrawal from an investment contract is not considered to be probable.

6. NAV PER SHARE

In accordance with ASU No. 2009-12, *Fair Value Measurements and Disclosures (Topic 820): Investments in Certain Entities That Calculate Net Asset Value Per Share (or Its Equivalent)*, the Plan should include disclosures to include the category, fair value, redemption frequency, and redemption notice period for those assets whose fair value is estimated using the NAV per share. The estimated fair value of the Fund is NAV. The use of NAV as a fair value is deemed appropriate as the Fund does not have a finite life, unfunded commitments, or restrictions on redemptions.

7. INVESTMENTS

The Plan's investments, which represented 5% or more of net assets available for benefits as of December 31, 2014 and 2013, are as follows:

	2014	2013
Vanguard Mutual Funds:		
500 Index*	\$ -	\$ 30,148,099
Extended Market Index Fund*	15,297,394	14,268,892
Institutional Index Fund*	33,335,238	-
International Growth Fund*	-	18,530,367
International Growth Fund Admiral Shares*	18,957,936	-
Primecap Fund*	-	24,723,425
Primecap Fund Admiral Shares*	29,125,324	-
Target Retirement 2035 Fund*	13,579,449	11,278,091
Wellington Fund*	29,114,902	24,058,744
Windsor II Fund*	15,960,575	15,310,987
PIMCO Total Return Fund	12,902,642	11,539,912
Vanguard Retirement Savings Trust III* (at contract value)	15,375,821	14,959,281

* Represents a party-in-interest investment.

** Investment's balance does not exceed 5% of the Plan's assets available for benefits as of year-end.

During 2014, the Plan's investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated (depreciated) in value as follows:

Vanguard Mutual Funds:

500 Index Fund*	\$ (104,245)
Extended Market Index Fund*	(5,325,547)
Extended Market Index Ind*	6,207,176
Institutional Index Fund*	3,574,316
International Growth ADM*	(1,178,046)
International Growth Fund*	(368,489)
International Value Fund*	(551,683)
Primecap Fund*	979,479
Primecap ADM*	1,751,296
Inflation Protection Fund*	(19,155)
Selected Value Fund*	(4,302)
Target Retirement 2010 Fund*	13,114
Target Retirement 2015 Fund*	95,396
Target Retirement 2020 Fund*	185,763
Target Retirement 2025 Fund*	255,831
Target Retirement 2030 Fund*	417,553
Target Retirement 2035 Fund*	551,232
Target Retirement 2040 Fund*	418,591
Target Retirement 2045 Fund*	512,894
Target Retirement 2050 Fund*	322,275
Target Retirement 2055 Fund*	52,858
Target Retirement 2060 Fund*	(1,606)
Target Retirement Income Fund*	28,957
Wellington Fund*	731,718
Windsor II Fund*	247,584
Alger SmallCap Growth Institutional Fund I	(232,756)
Perkins Mid Cap Value Fund	166
PIMCO Total Return Fund	(55,406)
T Rowe Price Mid-Cap Growth Fund	79,738
TS Sm Cap Val OP Class Y	<u>(102,465)</u>
	<u>\$ 8,482,237</u>

* Represents a party-in-interest investment.

8. EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of mutual funds and a CCT fund managed by Vanguard. Vanguard is the trustee as defined by the Plan and, therefore, these transactions qualify as exempt party-in-interest transactions. Fees paid by the Plan for investment management services were included as a reduction of the return earned on each fund.

9. FEDERAL INCOME TAX STATUS

The Internal Revenue Service (IRS) has determined and informed Scripps by a letter dated April 28, 2012, that the Plan and related trust were designed in accordance with the applicable regulations of the IRC. Plan management believes that the Plan is currently designed and operated in compliance with the applicable requirements of the IRC, and the Plan and related trust continue to be tax-exempt. Therefore, no provision for income taxes has been included in the Plan's financial statements.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that as of December 31, 2014 and 2013, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2011.

10. PLAN TERMINATION

Although it has not expressed any intention to do so, Scripps has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. In the event that the Plan is terminated, participants would become 100% vested in their accounts.

11. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500 as of December 31, 2014 and 2013.

	2014	2013
Net assets available for benefits per the financial statements	\$257,018,375	\$224,359,201
Adjustment from contract value to fair value for fully benefit-responsive investment contracts	<u>467,425</u>	<u>406,892</u>
Net assets available for benefits per the Form 5500	<u>\$257,485,800</u>	<u>\$224,766,093</u>

For the year ended December 31, 2014, the following is a reconciliation of increase in net assets per the financial statements to the Form 5500:

Increase in net assets per the financial statements	\$32,659,174
Prior year adjustment from contract value to fair value for fully benefit-responsive investment contracts	(406,892)
Current year adjustment from contract value to fair value for fully benefit-responsive investment contracts	<u>467,425</u>
Net income (loss) per the Form 5500	<u>\$32,719,707</u>

* * * * *

SUPPLEMENTAL SCHEDULE

SCRIPPS NETWORKS INTERACTIVE 401(k) SAVINGS PLAN

Employer ID No: 61-1551890

Plan No: 001

FORM 5500, SCHEDULE H, PART IV, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) AS OF DECEMBER 31, 2014

Issuer	Description of Investment Maturity Date, Interest Rate	Current Value
Vanguard Retirement Savings Trust III **	Common collective trust fund	\$ 15,843,246
Various participants*	Participant loans (maturing 2015 through 2020, interest rates 4.25%)	2,424,032
Vanguard Extended Market Index Fund*	Registered investment mutual fund	15,297,394
Vanguard Inflation-Protected Securities Fund*	Registered investment mutual fund	1,522,913
Vanguard Institutional Index Fund*	Registered investment mutual fund	33,335,238
Vanguard International Growth Fund*	Registered investment mutual fund	18,957,936
Vanguard International Value Fund*	Registered investment mutual fund	5,599,731
Vanguard Primecap Fund*	Registered investment mutual fund	29,125,324
Vanguard Prime Money Market Fund*	Registered investment mutual fund	151,430
Vanguard Target Retirement 2010 Fund*	Registered investment mutual fund	498,439
Vanguard Target Retirement 2015 Fund*	Registered investment mutual fund	2,145,801
Vanguard Target Retirement 2020 Fund*	Registered investment mutual fund	4,938,918
Vanguard Target Retirement 2025 Fund*	Registered investment mutual fund	5,879,981
Vanguard Target Retirement 2030 Fund*	Registered investment mutual fund	10,207,105
Vanguard Target Retirement 2035 Fund*	Registered investment mutual fund	13,579,449
Vanguard Target Retirement 2040 Fund*	Registered investment mutual fund	10,427,951
Vanguard Target Retirement 2045 Fund*	Registered investment mutual fund	12,339,035
Vanguard Target Retirement 2050 Fund*	Registered investment mutual fund	7,801,574
Vanguard Target Retirement 2055 Fund*	Registered investment mutual fund	1,611,872
Vanguard Target Retirement 2060 Fund*	Registered investment mutual fund	84,484
Vanguard Target Retirement Income Fund*	Registered investment mutual fund	988,811
Vanguard Selected Value Fund*	Registered investment mutual fund	1,012,090
Vanguard Wellington Fund*	Registered investment mutual fund	29,114,902
Vanguard Windsor II Fund*	Registered investment mutual fund	15,960,575
Alger SmallCap Growth Institutional Fund I	Registered investment mutual fund	1,145,302
PIMCO Total Return Fund	Registered investment mutual fund	12,902,642
Touchstone Smallcap Value Fund	Registered investment mutual fund	1,381,841
T Rowe Price Mid-Cap Growth Fund	Registered investment mutual fund	2,445,919
Total		<u>\$ 256,723,935</u>

* Represents a party-in-interest investment.

** At fair value, contract value is \$15,375,821; represents a party-in-interest investment.

See accompanying independent auditors' report.

SCRIPPS NETWORKS INTERACTIVE 401(k) SAVINGS PLAN

Employer ID No: 61-1551890

Plan No: 001

FORM 5500, SCHEDULE H, PART IV, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) AS OF DECEMBER 31, 2014

Issuer	Description of Investment Maturity Date, Interest Rate	Current Value
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Vanguard Institutional Index Fund*	Registered investment mutual fund	33,335,238
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Vanguard International Value Fund*	Registered investment mutual fund	5,599,731
Vanguard Primecap Fund*	Registered investment mutual fund	29,125,324
Vanguard Prime Money Market Fund*	Registered investment mutual fund	151,430
Vanguard Target Retirement 2010 Fund*	Registered investment mutual fund	498,439
Vanguard Target Retirement 2015 Fund*	Registered investment mutual fund	2,145,801
Vanguard Target Retirement 2020 Fund*	Registered investment mutual fund	4,938,918
Vanguard Target Retirement 2025 Fund*	Registered investment mutual fund	5,879,981
Vanguard Target Retirement 2030 Fund*	Registered investment mutual fund	10,207,105
Vanguard Target Retirement 2035 Fund*	Registered investment mutual fund	13,579,449
Vanguard Target Retirement 2040 Fund*	Registered investment mutual fund	10,427,951
Vanguard Target Retirement 2045 Fund*	Registered investment mutual fund	12,339,035
Vanguard Target Retirement 2050 Fund*	Registered investment mutual fund	7,801,574
Vanguard Target Retirement 2055 Fund*	Registered investment mutual fund	1,611,872
Vanguard Target Retirement 2060 Fund*	Registered investment mutual fund	84,484
Vanguard Target Retirement Income Fund*	Registered investment mutual fund	988,811
Vanguard Selected Value Fund*	Registered investment mutual fund	1,012,090
Vanguard Wellington Fund*	Registered investment mutual fund	29,114,902
Vanguard Windsor II Fund*	Registered investment mutual fund	15,960,575
Alger SmallCap Growth Institutional Fund I	Registered investment mutual fund	1,145,302
PIMCO Total Return Fund	Registered investment mutual fund	12,902,642
Touchstone Smallcap Value Fund	Registered investment mutual fund	1,381,841
T Rowe Price Mid-Cap Growth Fund	Registered investment mutual fund	2,445,919
Total		<u>\$ 256,723,935</u>

* Represents a party-in-interest investment.

** At fair value, contract value is \$15,375,821; represents a party-in-interest investment.

See accompanying independent auditors' report.