FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number:	3235- 0104						
Estimated average burden							
hours per response:	0.5						

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. Name and Address of Reporting Person* <u>DUNLEAVY CATHERINE</u>			2. Date of Event Requiring Statement (Month/Day/Year) 07/01/2024 3. Issuer Name and Ticker or Trading Symbol TEGNA INC [TGNA]								
(Last) C/O TEGN		(Middle)	07/01/202	~	4. Relationship of Reporting Issuer (Check all applicable) Director	Person(s) to 10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year) 07/10/2024			
(Street) TYSONS (City)	VA (State)	22102 (Zip)	,		Officer (give title below)	Other below)	(specify		eck Applicable Form filed I Person	by One Reporting	
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)			Į i	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Common Stock					14(1)	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
		2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of S Underlying Derivative So (Instr. 4)	curity Conver		cise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr.		
I I		Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivati Security	ive	Direct (D) or Indirect (I) (Instr. 5)	5)		

Explanation of Responses:

1. These shares were inadvertently omitted from the reporting person's original Form 3.

Remarks:

/s/ Marc S. Sher, attorneyin-fact

08/19/2024

** 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 5 (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.