

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04816

Entity Name: TEGNA INC.**Current Principal Place of Business:**8350 BROAD STREET,SUITE 2000
TYSONS, VA 22102**Current Mailing Address:**8350 BROAD STREET,SUITE 2000
TYSONS, VA 22102 US**FEI Number: 16-0442930****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name BENTLEY, ANNE
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title DIRECTOR
Name DONSECA, LIDIA
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title DIRECTOR
Name EPSTEIN, STUART
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title TREASURER
Name HART, MICHAEL A.
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title DIRECTOR
Name BIANCHINI, GINA L.
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title DIRECTOR
Name ELIAS, HOWARD D.
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title SECRETARY
Name HARRISON, AKIN S.
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title DIRECTOR
Name LOUGEE, DAVID T.
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CLIFTON MCCLELLAND**SVP/CONTROLLER****03/27/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SVP/CONTROLLER
Name MCCLELLAND, CLIFTON
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title DIRECTOR
Name MCGEE, HENRY
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title DIRECTOR
Name NOLOP, BRUCE
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title VP
Name THOMPSON, KAREN
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title DIRECTOR
Name MCCUNE, SCOTT K.
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title DIRECTOR
Name NESS, SUSAN
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title DIRECTOR
Name SHAPRIO, NEAL
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102

Title DIRECTOR
Name WITMER, MELINDA C.
Address 8350 BROAD STREET,SUITE 2000
City-State-Zip: TYSONS VA 22102