

EXTENDED TO NOVEMBER 15, 2017

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf

OMB No 1545-0052

Forc	alen	dar year 2016 or tax year beginning		, and ending		
Nan	ne of	foundation	A Employer identification	number		
T	ΞGI	NA FOUNDATION, INC.	47-3209957			
		nd street (or P O box number if mail is not delivered to street ac	ddress)	Room/suite	B Telephone number	
		O JONES BRANCH DRIVE			703-873-66	00
		own, state or province, country, and ZIP or foreign po EAN, VA 22107	ostal code		C If exemption application is pe	ending, check here
G C	heck	all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
		Final return	Amended return		2 Fereign ergenizations ma	oting the 85% test
		Address change	Name change	1	2. Foreign organizations me check here and attach co	nputation Division
H C	_	type of organization: X Section 501(c)(3) ex			E If private foundation sta	
		- 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Other taxable private founda		under section 507(b)(1)	(A), check here
		rket value of all assets at end of year J Accounting	-	X Accrual	F If the foundation is in a	
	om F \$	Part II, col (c), line 16) 0t 0t	her (specify)	acco l	under section 507(b)(1)	(B), check here
Pa		Analysis of Revenue and Expenses		(b) Net investment	(a) Advicted not	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received		3 ^ , <i>3</i>	, , , , , , , , , , , , , , , , , , , ,	·
	2	Check X If the foundation is not required to attach Sch B Interest on savings and temporary	1 520	1 720	YA GAR D.	Cm2 mm2cm2m 1
1	3	cash investments	1,732.	1,732.	·	STATEMENT 1
	4	Dividends and interest from securities	42,483.	42,483.		STATEMENT 2
		Gross rents	3 2 2		¥. ,	·
	_	Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10	77,082.	1, 1941		/ \ { <u> </u>
e	b	Gross sales price for all / // / 2 2 1		, %		**********************************
Revenue		assets on line 6a 4,445,321. Capital gain net income (from Part IV, line 2)	* ` • .	77,082.	, <u>,</u> , , , ,, ,, ,, ,, , , , , , , , , , , ,	
Re	8	Net short-term capital gain	., .>		N/A	
	9	Income modifications	\$745° \$4			
	10a	Gross sales less returns and allowances		. (,3.00		*** ** * * * * * * * * * * * * * * * * *
	b	Less Cost of goods sold	4	** **	**	** ",
	C	Gross profit or (loss)	4 62 5			Cm2 mm1(m) 2
	11	Other Income	-4,637.	0. 121,297.	0.	STATEMENT 3
	12	Total. Add lines 1 through 11	116,660.	121,297.	RECEIVEL	3 0.
	13	Compensation of officers, directors, trustees, etc Other employee salaries and wages	0.	10:	RECEIVE	8 1
	14 15	Pension plans, employee benefits		डि	NOV 2 U 2017	\delta\
ş		Legal fees STMT 4	1,536.	168	1110.	1,536.
ense		Accounting fees		Ţ	OGDEN, UT	
ž	C	Other professional fees STMT 5	38,439.	38,439.	0.	0.
dministrative Expe	17	Interest				
rati	18	Taxes				
nist	19	Depreciation and depletion				A STATE OF THE PARTY.
ğ.	20	Occupancy		-		
⋖	21	Travel, conferences, and meetings	3,750.	0.	0.	3,750.
and	22	Printing and publications Other expenses STMT 6	0.		47,557.	
Operating	23 24	Other expenses STMT 6 Total operating and administrative		 	±/,55/•	
era	4	expenses. Add lines 13 through 23	38,439.	0.	52,843.	
O	25	Contributions, gifts, grants paid	91,282. 2,417,486.	,		52,843. 2,417,486.
	26	Total expenses and disbursements.	, , , , , , , , , , , , , , , , , , , ,			
		Add lines 24 and 25	2,508,768.	38,439.	0.	2,470,329.
	27	Subtract line 26 from line 12.				
	8	Excess of revenue over expenses and disbursements	-2,392,108.			
		Net investment income (if negative, enter -0-)		82,858.		
	C	Adjusted net income (if negative, enter -0-)			0.	L

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.



2,578,516.

Form 990-PF (2016)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

See the Part VI instructions.

623521 11-23-16

	990-PF (2016) TEGNA FOUNDATION, INC.	<u>47-</u>	<u> 32099</u>	<u>57 </u>	Pa	age 4
'Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49)48 -	see inst	ructi	ons)	<u> </u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	į				ŧ
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					l i
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1			82	9.
_	of Part I, line 27b					ŧ
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)					ŧ
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			82	9.
-	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	-			0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5			82	
		<u> </u>				
	Credits/Payments 2016 estimated tax payments and 2015 overpayment credited to 2016 6a 1,000.	ļ				
		i		*		
	Exempt foreign organizations - tax withheld at source Tax paid with application for extension of time to file (Form 8868) 6c 2,600.	1				1
		┨	۲.			i
	Backup withholding erroneously withheld 6d 6d	<u> </u>		~···	· 	ñ
	Total credits and payments. Add lines 6a through 6d	7	 		,60	<u>u.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	 			—-
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9				
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		<u> 2</u>	,77	
	Enter the amount of line 10 to be Credited to 2017 estimated tax > 2,771. Refunded >	11				0.
	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın	Ļ	<u>\</u> Y		No
	any political campaign?		L	1a		<u>X</u>
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	L	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or		4.6		28
	distributed by the foundation in connection with the activities					
C	Did the foundation file Form 1120-POL for this year?		L	10		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation. ▶ \$ 0. (2) On foundation managers. ▶ \$ 0.	_		,		1.
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	-	4	26 .7	- 1	
	managers. ▶ \$0 .		*	Ž. 3	1	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		"	2		Х
	If "Yes," attach a detailed description of the activities				â	`.,
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, of	ır			(*
·	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3	å	X
A a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		x
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	1/A	4b	\neg	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		''	5	一十	X
J						 ,
e	If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
0				1		}
	By language in the governing instrument, or By state language in the directions that conflict with the state	a lave				,
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	iIaW			x	j
_	remain in the governing instrument?		-		$\frac{\hat{x}}{x}$	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	,	-		^ +	
_						
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				1	
	VA			1		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			-	.,	
	of each state as required by General Instruction G? If "No," attach explanation		1	8b -	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar			ĺ	
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV		L	9	\dashv	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
			Form	1 990-	PF (:	2016)

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48

N/A

Form 4720, to determine if the foundation had excess business holdings in 2016)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 990-PF (2016) TEGNA FOUNDATION, INC.			<u>47-32099</u>	57 Page 6
Part VII-B Statements Regarding Activities for Which Fo	orm 4720 May Be R	equired _{(contini}	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire	ectly,		
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?		Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section			
4945(d)(4)(A)? (see instructions)		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			s X No	,
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		ın Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instruc	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check he				,
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from			_ [,
expenditure responsibility for the grant?	I.	1/A 🔙 Ye	ıs L No	
If "Yes," attach the statement required by Regulations section 53 4945-			:	1
$f 6a$ Did the foundation, during the year, receive any funds, directly or indirectly, to ${f g}$	pay premiums on			1
a personal benefit contract?		Ye	s X No	
${f b}$ Did the foundation, during the year, pay premiums, directly or indirectly, on a positive probability of the foundation.	ersonal benefit contract?		-	6b X,
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax si		Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			<u>, N/A</u>	7b
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors		nagers, nignly		
1 List all officers, directors, trustees, foundation managers and their of		17.10	(4)	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	compensation	allowances
			_	
SEE STATEMENT 9	<u></u>	0.	0.	0.
				-
		-		
2 Compensation of five highest-paid employees (other than those incl	luded on line 1) if none	enter "NONE "		<u> </u>
2 Compensation of the highest-paid employees (outer than those mor	(b) Title, and average	1	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	account, other allowances
NONE	devoted to position		compensation	unovarious
NONE				
	1			
	-	•		
	1			
		1	 	
	1			
			-	
	1		1	
Total number of other employees paid over \$50,000	·	1	<u> </u>	0
1 Carrie Common out of the Common of the Com	· · · · · · · · · · · · · · · · · · ·			

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Part VIII Information About Officers, Directors, Trustees, For Paid Employees, and Contractors (continued)	oundation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If non-	e, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		}
7		▶ 0
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u> </u>
	ant statustical information such as the	
List the foundation's four largest direct charitable activities during the tax year. Include relevanumber of organizations and other beneficiaries served, conferences convened, research papers.	ers produced, etc.	Expenses
1 N/A		· · · · · ·
·		
2		
3		
		
· · · · · · · · · · · · · · · · · · ·		
4		
Rart IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax	year on lines 1 and 2.	Amount
1 N/A		
2		
An at		
All other program-related investments. See instructions.		
3		
Total Add lines 1 through 3		0.

단	11 990-Pr. (2010) TEGNA FOUNDATION, INC.		<u> </u>	3203337	1 age b
P	art X Minimum Investment Return (All domestic foundations mus	st complete this part. Foreign fo	undations, se	ee instructions)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, it	etc., purposes:			
a	Average monthly fair market value of securities	,, ,	1a	3,272,	593.
	Average of monthly cash balances		1b	3,272, 790,	368.
	Fair market value of all other assets		1c		
d	Total (add lines 1a, b, and c)		1d	4,062,	961.
	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	e 0	.		
2	Acquisition indebtedness applicable to line 1 assets	·	2		0.
3	Subtract line 2 from line 1d		3	4,062,	961.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, se	e instructions)	4		944.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on P.	•	5	4,002,	
6	Minimum investment return Enter 5% of line 5		6	200,	
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and	(i)(5) private operating foundations	and certain	- ····	
_	foreign organizations check here and do not complete this part.)	(I)(O) P			
1	Minimum investment return from Part X, line 6		1	200,	<u> 101.</u>
2a	Tax on investment income for 2016 from Part VI, line 5	a 829	<u>.</u>		
b	Income tax for 2016 (This does not include the tax from Part VI)	b	_		
C	Add lines 2a and 2b		2c		829.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	199,	272.
4	Recoveries of amounts treated as qualifying distributions		4		0.
5	Add lines 3 and 4		5	199,	272.
6	Deduction from distributable amount (see instructions)		6		0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII	II, line 1	7	199,	272.
P	art XII. Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpos	es	1 1		
8	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	2,470,	<u>329.</u>
b	Program-related investments - total from Part IX-B		1b		0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable,	etc., purposes	2		
3	Amounts set aside for specific charitable projects that satisfy the:				
a	Suitability test (prior IRS approval required)		3a		
b	Cash distribution test (attach the required schedule)		3b		
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and	Part XIII, line 4	4	2,470,	329.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	nent			
	income. Enter 1% of Part I, line 27b		5		829.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	2,469,	500.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years whe 4940(e) reduction of tax in those years.	n calculating whether the foundation	qualifies for t	he section	

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Part XIII Undistributed Income (see instructions)			
	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,	Сограс	, sais pros. to 25 to		199,272.
Ine 7 Undistributed income, if any, as of the end of 2016				133,474.
a Enter amount for 2015 only			0.	
b Total for prior years.				·····
g total to pico years.		0.		
3 Excess distributions carryover, if any, to 2016.				
a From 2011				
b From 2012				
c From 2013		·	*	
d From 2014		*		
e From 2015 277,509.		*	,	
f Total of lines 3a through e	277,509.		·	
4 Qualifying distributions for 2016 from	,	***		,
Part XII, line 4. ► \$ 2,470,329.		. *	,	.*
a Applied to 2015, but not more than line 2a	\ <u>\</u>		0.	* *
b Applied to undistributed income of prior		•	, %	
years (Election required - see instructions)	· 100	0.	,	,
c Treated as distributions out of corpus		***, **	^ _ ` ,	
(Election required - see instructions)	0.	- ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	· · · · · · · · · · · · · · · · · · ·	100 070
d Applied to 2016 distributable amount	***	3\ \frac{4}{2}	¥:7,	199,272.
e Remaining amount distributed out of corpus	2,271,057.		374	0.
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount	0.	<u> </u>	, , , , , , , , , , , , , , , , , , ,	
must be shown in column (a))	3 💸	.	2,	
6 Enter the net total of each column as	***		(2) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	* , ^î.
indicated below:	2,548,566.			2
Corpus Add lines 3f, 4c, and 4e Subtract line 5 Department and installed an arms Subtract	2,340,300.	*, *, *,		, *
b Prior years' undistributed income Subtract line 4b from line 2b		0.	` *	
c Enter the amount of prior years'	***************************************		<u> </u>	
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	, * , '	0.	*	
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line	·			
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.	2 540 566			
Subtract lines 7 and 8 from line 6a	2,548,566.		····	
10 Analysis of line 9				
a Excess from 2012	4			
b Excess from 2013	-			
d Excess from 2014 d Excess from 2015 277,509.	4			
d Excess from 2015 277,509. e Excess from 2016 2,271,057.	-			

		INC.			209957 Page 10
Part XIV Private Operating Fo	oundations (see ins	structions and Part VII-	A, question 9)	_N/A	
1 a If the foundation has received a ruling of	determination letter that	it is a private operating			
foundation, and the ruling is effective for	2016, enter the date of t	the ruling	>		
b Check box to indicate whether the found	ation is a private operatir	ng foundation described in	section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed	i				
d Amounts included in line 2c not					
used directly for active conduct of					
·					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon.					
 a "Assets" alternative test - enter. 					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:		 			
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on					
securities loans (section				İ	
512(a)(5)), or royalties)				<u> </u>	
(2) Support from general public and 5 or more exempt					
organizations as provided in					
section 4942(j)(3)(B)(III)		<u> </u>	····		
(3) Largest amount of support from					
an exempt organization	<u></u>			· · · · · · · · · · · · · · · · · · ·	
(4) Gross investment income	um ation (Commis	to this work arrive	f the foundation	had \$5 000 ar m	are in eccets
Part XV Supplementary Info			the foundation	nad \$5,000 or me	ore in assets
at any time during t	-	uctions.)			
1 Information Regarding Foundation	-				
a List any managers of the foundation wh			ibutions received by the	foundation before the cl	ose of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	section 507(a)(2).)			
NONE					
b List any managers of the foundation wh other entity) of which the foundation ha			or an equally large portio	on of the ownership of a	partnership or
NONE					
2 Information Regarding Contribute	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
	only makes contributions	to preselected charitable	organizations and does n		
	` 				
a The name, address, and telephone num	per or e-mail address of t	ine person to whom appil	cations snould be addres	seu:	
MEG KENNEDY	TUD MOTEST	TTN 00107			
7950 JONES BRANCH DR					
b The form in which applications should b					
INFORMATION AVAILABL	E AT WWW.TE	GNAFOUNDATIO	JN . ORG		
c Any submission deadlines:	n .m	0113 HOIDID 2 == :	NI 000		
INFORMATION AVAILABL					
d Any restrictions or limitations on award				other factors:	
INFORMATION AVAILABL	E AT WWW.TE	GNAFOUNDATI	JN.OKG		
	<u>-</u>				r 000 DE
623601 11-23-16					Form 990-PF (2016)

Oupplementary information				
3 Grants and Contributions Paid During the	Year or Approved for Future P	ayment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		-
Paid during the year				
SEE STATEMENT 10				
				2,417,486.
	i			
				 ,
T. 1.1			▶ 3a	2,417,486.
Total		· · · · · · · · · · · · · · · · · · ·	38	2,417,400.
b Approved for future payment				
NONE				
				
	,			
		- -		
Total			▶ 3b	0.

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Enter gross amounts unless otherwise indicated.	Unrelated	business income		ed by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue.	code	Amount	code	Amount	Tanction income
<u> </u>	_		+ +		'
b			 		
·	-		++		
d	-		 -		
e			+ +		
g Fees and contracts from government agencies	- 		+-+		
g Fees and contracts from government agencies Membership dues and assessments			++		
Interest on savings and temporary cash			+	, , , , , , , , , , , , , , , , , , , ,	
investments			14	1 732	
Dividends and interest from securities			14	1,732. 42,483.	
Net rental income or (loss) from real estate:	<u> </u>	B	+	*A**	
a Debt-financed property	2%	5.4			
b Not debt-financed property			 		
Net rental income or (loss) from personal			1 1		
property					
Other investment income			01	-4,637.	
Gain or (loss) from sales of assets other					
than inventory			18	77,082.	
Net income or (loss) from special events				·	
Gross profit or (loss) from sales of inventory					
Other revenue.					-
a					
b					
c					
d	_				
e					
Subtotal. Add columns (b), (d), and (e)	, %	0.		116,660.	<u> </u>
3 Total. Add line 12, columns (b), (d), and (e)				13	116,660
See worksheet in line 13 instructions to verify calculations.)	_ 			
Part XVI-B Relationship of Activities	to the Accom	plishment of Ex	empt F	Purposes	
Line No. Explain below how each activity for which in	come is reported in	column (e) of Part XVI-	A contribu	ted importantly to the accomp	olishment of
▼ the foundation's exempt purposes (other th					
			·		
		<u> </u>			·
				· · · · · · · · · · · · · · · · · · ·	
<u> </u>					
		<u> </u>			
					····
					
-				· -	· · · · · · · · · · · · · · · · · · ·
			-	- <u>-</u> -	·
			-		
					

	90-PF (2	016) TEGNA	FOUNDATI	ON,	INC.				09957	Pa	age 13
Part	XVII	Information Re Exempt Organ		sfers T	o and T	ransactions a	nd Relation	ships With Nonch	aritable		
1 D	rd the or	ganization directly or indi		of the foll	lowing with	any other organization	on described in s	action 501/c\ of	1	Yes	No
		other than section 501(c)						2011011 30 1(0) 01			
		from the reporting found					izationo.				,
	I) Cash	non the reporting reason			or or garmear				1a(1)		X
•	2) Other	assets							1a(2)		X
	ther trans								1-1	ď	, ,
_	1) Sales	of assets to a noncharita	ble exempt organiza	tion					16(1)		X
•	•	ases of assets from a no			on				1b(2)		Х
•	,	l of facilities, equipment,	•	ŭ					1b(3)		х
Ì	\$) Reimb	oursement arrangements							1b(4)		Х
(!	b) Loans	or loan guarantees							1b(5)		X
(6	3) Perfoi	rmance of services or me	embership or fundra	ısıng solici	itations				1b(6)		X
c S	haring of	facilities, equipment, ma	uling lists, other ass	ets, or pai	d employee	S			1c	L	X
d If	the ansv	ver to any of the above is	"Yes," complete the	following	schedule. C	Column (b) should alv	ways show the fa	ir market value of the good	ds, other ass	ets,	
						than fair market valu	e in any transact	ion or sharing arrangemen	t, show ın		
) the value of the goods,									
(a) Line	no	(b) Amount involved	(c) Name o	_		pt organization	(d) Descrip	tion of transfers, transactions, a	ind sharing arr	angemer	ıts
				N/	<u>A</u>		 				
		· · · · · ;				•					
		<u>.</u>					 				
	_		ļ							·	
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			<u>'</u>				·· · · · · · · · · · · · · · · · · ·				
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	+-						 				
	+										
	_										
	+										
	+				·						
		ndation directly or indirec 501(c) of the Code (othe					zations described	1	Yes	X] No
<u>b li</u>	"Yes," co	mplete the following sch									
		(a) Name of org	ganization		(b) 1	Type of organization	ļ	(c) Description of relati	onship		
		N/A									
							-				
					-						
						·			<u>-</u>		
	Under	penalties of perjury, I declare t	that I have examined this	s return uncl	luding accomi	nanying schedules and st	atements and to the	hest of my knowledge			
Sigr Here	and be	lief, it is true, correct, and con	nplete decleration of pr	eparer (other	r than taxpaye	er) is based on all informa	TREA	STANT SURER	May the IRS return with the shown below	e prepare (see ins	er
	1 8100	Brust/Tune preparer's as		Deann	rio orașe	Date '	Title	Check If PT	'IM		
	•	Print/Type preparer's na	anne	Frepare	er's signatui		Date	self- employed	IIA		
Paic	i	DAVID F. D	OTSON	1/5	D	7 Ahr	11/9/17	, - I	00738	401	
Pre	oarer Only	Firm's name ► DEL		LLP	τ	, , , , , , , , , , , , , , , , , , , ,	1	Firm's EIN ► 86-			

Firm's address ► 7900 TYSONS ONE PLACE, SUITE 800 MCLEAN, VA 22102

FORM 990-PF INTERE	ST ON SAVINO	GS AND T	EMPOR	ARY C	ASH]	INVESTMENTS	S7	PATEMENT 1
SOURCE		RE'	(A) VENUE BOOK			(B) INVESTMENT INCOME	N	(C) ADJUSTED IET INCOME
NORTHERN TRUST			1,7	32.		1,732.		0.
TOTAL TO PART I, LI	NE 3		1,7	32.		1,732.		0,
FORM 990-PF	DIVIDENDS	AND INT	EREST	FROM	SECU	JRITIES	Si	PATEMENT 2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	S	REV	A) ENUE BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOME
NORTHERN TRUST	42,483.		0.	4	2,483	3. 42,48	3.	0.
TO PART I, LINE 4	42,483.		0.	4	2,483	3. 42,48	3.	0.
FORM 990-PF		OTHER	INCO	ME			S	PATEMENT 3
DESCRIPTION			RE	(A) VENUE BOOK		(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOME
NORTHERN TRUST ACCR NORTHERN TRUST UNRE		-			839.	0		0.
TOTAL TO FORM 990-P	F, PART I,	LINE 11		-4,	637.	0	- -	0.
		=					====	
FORM 990-PF	····	LEG	AL FE	ES	· · · · · · · · · · · · · · · · · · ·		Sī	TATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOK			EST-	(C) ADJUSTED NET INCOM		(D) CHARITABLE PURPOSES
LEGAL FEES		1,53	6.		0 .	•	0.	1,536.
TO FM 990-PF, PG 1,	LN 16A	1,53	6.		0 -		0.	1,536.

FORM 990-PF C	THER PROFES	SIONAL FEES	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT EXPENSES	38,439.	38,439.	0.	0.	
TO FORM 990-PF, PG 1, LN 16C	38,439. 38,439.		0.	0.	
FORM 990-PF	OTHER E	XPENSES	S	ratement 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
R&M - PC HARDWARE/SOFTWARE SUPPLIES	47,516. 41.	0.	0.	47,516.	
TO FORM 990-PF, PG 1, LN 23	47,557.	0.	0.	47,557.	

FORM 990-PF CORF	PORATE STOCK	STATEMENT 7	
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE	
INVESTMENT IN CORPORATE STOCK	2,229,714.	2,229,792.	
TOTAL TO FORM 990-PF, PART II, LINE	10B 2,229,714.	2,229,792.	

FORM 990-PF EXPLANATION CONCERNING PART VII-A, LINE 12 STATEMENT 8

EXPLANATION

THE FOUNDATION TREATED DISTRIBUTIONS TO A DONOR ADVISED FUND AS A QUALIFYING DISTRIBUTION. THE DISTRIBUTIONS WILL BE CONTRIBUTED OR GIFTED TO OR FOR THE USE OF A CORPORATION, TRUST OR COMMUNITY CHEST, FUND OR FOUNDATION ORGANIZED AND OPERATED EXCLUSIVELY FOR RELIGIOUS, CHARITABLE, SCIENTIFIC, LITERARY OR EDUCATIONAL PURPOSES, OR TO FOSTER NATIONAL OR INTERNATIONAL AMATEUR SPORTS COMPETITION (BUT ONLY IF NO PART OF ITS ACTIVITIES INVOLVE THE PROVISION OF ATHLETIC FACILITIES OR EQUIPMENT), OR FOR THE PREVENTION OF CRUELTY TO CHILDREN OR ANIMALS.

FORM 990-PF	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			STATEMENT 9	
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	
GRACIA MARTORE 7950 JONES BRANCH MCLEAN, VA 22107	DRIVE	CHAIRMAN & PRE	SIDENT 0.	0.	0.
TODD MAYMAN 7950 JONES BRANCH MCLEAN, VA 22107	DRIVE	SECRETARY 0.00	0.	0.	0.
AKIN HARRISON 7950 JONES BRANCH MCLEAN, VA 22107	DRIVE	ASSISTANT SECR	ETARY 0.	0.	0 .
MICHAEL HART 7950 JONES BRANCH MCLEAN, VA 22107	DRIVE	TREASURER 0.00	0.	0.	0.
KEVIN POLCHOW 7950 JONES BRANCH MCLEAN, VA 22107	DRIVE	ASSISTANT TREA	SURER 0.	0.	0.
TOTALS INCLUDED OF	N 990-PF, PAGE 6	, PART VIII	0.	0.	0.