FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response	: 0.5						

	tion 1(b).	iliue. See		Filed							ies Exchang mpany Act o		f 1934			hours	per re	esponse:	0.5
1. Name and Address of Reporting Person* Newsome Kenneth					2. Issuer Name and Ticker or Trading Symbol TREDEGAR CORP [TG]									ationship call app Direc	licable)	ng Pe	erson(s) to Is		
(Last) (First) (Middle) 1100 BOULDERS PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 04/01/2022											Officer (give title below)		Other (s below)	pecify
(Street) RICHM(l	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person										
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or E	Benefic	ially	Own	ed			
Date				2. Transac Date (Month/Da	Execution Date			ution Date, Transaction Disposition Code (Instr. 5)		Disposed C	Securities Acquired (A) isposed Of (D) (Instr. 3,			Securit Benefic	neficially ned Following		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									v	Amount	(A) (D)	or Pric	е	Transa	ed ction(s) 3 and 4)			(Instr. 4)	
Tredegar Common Stock 04/0				04/01/2	2022		A		1,826	A	\$12	2.32	.32 29,770			D			
		Tal	ble II -								osed of, convertib				Owned	d			
1. Title of Derivative Security (Instr. 3)	ve Conversion Date Execution Date, Trans. or Exercise (Month/Day/Year) if any Code		Transa Code (5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
		Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	or Number of Shares									

Explanation of Responses:

Patricia A. Thomas, Attorney-04/05/2022

In-Fact

** Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).