

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5

SVB Financial Group PAC

ADDRESS (number and street) 3005 Tasman Dr

Check if different than previously reported. (ACC)

Santa Clara CA 95054

2. **FEC IDENTIFICATION NUMBER** ▼ C C00333658 **CITY** ▲ **STATE** ▲ **ZIP CODE** ▲

3. IS THIS REPORT **NEW (N)** OR **AMENDED (A)**

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input checked="" type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day **PRE-Election** Report for the:

<input type="checkbox"/> Primary (12P)	<input type="checkbox"/> General (12G)	<input type="checkbox"/> Runoff (12R)
<input type="checkbox"/> Convention (12C)	<input type="checkbox"/> Special (12S)	

Election on M M M / D D D / Y Y Y Y Y Y in the State of

(d) 30-Day **POST-Election** Report for the:

<input type="checkbox"/> General (30G)	<input type="checkbox"/> Runoff (30R)	<input type="checkbox"/> Special (30S)
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Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period M M M / D D D / Y Y Y Y Y Y 09 / 01 / 2015 through M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Rebecca Olson

Signature of Treasurer Rebecca Olson [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 15 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

SVB Financial Group PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>	<input type="text" value="16197.51"/>	<input type="text" value="16197.51"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="33054.32"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1232.49"/>	<input type="text" value="27289.30"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="34286.81"/>	<input type="text" value="43486.81"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="0.00"/>	<input type="text" value="9200.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="34286.81"/>	<input type="text" value="34286.81"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

SVB Financial Group PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1157.49	22932.49
(ii) Unitemized	75.00	3356.81
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1232.49	26289.30
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1232.49	26289.30
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	1232.49	27289.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1232.49	27289.30

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	9200.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	0.00	9200.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	9200.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1232.49	26289.30
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1232.49	26289.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
SVB Financial Group PAC

Full Name (Last, First, Middle Initial) A. Robert Curley		Date of Receipt MM / DD / YYYY 09 / 01 / 2015 Transaction ID : 11AI-911
Mailing Address 3003 Tasman Drive		Amount of Each Receipt this Period 208.30
City Santa Clara State CA Zip Code 95054	FEC ID number of contributing federal political committee. C	
Name of Employer SVB Financial Group Occupation Managing Director-Corporate Finance	Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Calendar Year	Aggregate Year-to-Date ▼ 208.30

Full Name (Last, First, Middle Initial) B. Robert Curley		Date of Receipt MM / DD / YYYY 09 / 11 / 2015 Transaction ID : 11AI-919
Mailing Address 3003 Tasman Drive		Amount of Each Receipt this Period 208.30
City Santa Clara State CA Zip Code 95054	FEC ID number of contributing federal political committee. C	
Name of Employer SVB Financial Group Occupation Managing Director-Corporate Finance	Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Calendar Year	Aggregate Year-to-Date ▼ 208.30

Full Name (Last, First, Middle Initial) C. Robert Curley		Date of Receipt MM / DD / YYYY 09 / 25 / 2015 Transaction ID : 11AI-928
Mailing Address 3003 Tasman Drive		Amount of Each Receipt this Period 208.30
City Santa Clara State CA Zip Code 95054	FEC ID number of contributing federal political committee. C	
Name of Employer SVB Financial Group Occupation Managing Director-Corporate Finance	Receipt For: 2015 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Calendar Year	Aggregate Year-to-Date ▼ 208.30

SUBTOTAL of Receipts This Page (optional).....▶	62.49
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 11
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SVB Financial Group PAC

A. Julie Haga
 Full Name (Last, First, Middle Initial)
 Mailing Address 3003 Tasman Dr
 City Santa Clara State CA Zip Code 95054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SVB Financial Group Occupation Director, IT
 Receipt For: 2015
 Primary General
 Other (specify) **▼**
 Calendar Year
 Aggregate Year-to-Date **▼** 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2015
Transaction ID : 11AI-913
 Amount of Each Receipt this Period
 50.00

B. Julie Haga
 Full Name (Last, First, Middle Initial)
 Mailing Address 3003 Tasman Dr
 City Santa Clara State CA Zip Code 95054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SVB Financial Group Occupation Director, IT
 Receipt For: 2015
 Primary General
 Other (specify) **▼**
 Calendar Year
 Aggregate Year-to-Date **▼** 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2015
Transaction ID : 11AI-921
 Amount of Each Receipt this Period
 50.00

C. Julie Haga
 Full Name (Last, First, Middle Initial)
 Mailing Address 3003 Tasman Dr
 City Santa Clara State CA Zip Code 95054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SVB Financial Group Occupation Director, IT
 Receipt For: 2015
 Primary General
 Other (specify) **▼**
 Calendar Year
 Aggregate Year-to-Date **▼** 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2015
Transaction ID : 11AI-930
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00
TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
SVB Financial Group PAC

A. Christie Ma
 Full Name (Last, First, Middle Initial)
 Mailing Address 3003 Tasman Dr
 City Santa Clara State CA Zip Code 95054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SVB Financial Group Occupation Attorney
 Receipt For: 2015
 Primary General
 Other (specify) Calendar Year
 Aggregate Year-to-Date **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2015
Transaction ID : 11AI-914
 Amount of Each Receipt this Period
 20.00

B. Christie Ma
 Full Name (Last, First, Middle Initial)
 Mailing Address 3003 Tasman Dr
 City Santa Clara State CA Zip Code 95054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SVB Financial Group Occupation Attorney
 Receipt For: 2015
 Primary General
 Other (specify) Calendar Year
 Aggregate Year-to-Date **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2015
Transaction ID : 11AI-922
 Amount of Each Receipt this Period
 20.00

C. Christie Ma
 Full Name (Last, First, Middle Initial)
 Mailing Address 3003 Tasman Dr
 City Santa Clara State CA Zip Code 95054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SVB Financial Group Occupation Attorney
 Receipt For: 2015
 Primary General
 Other (specify) Calendar Year
 Aggregate Year-to-Date **360.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2015
Transaction ID : 11AI-931
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
SVB Financial Group PAC

A. Robert Marks
 Full Name (Last, First, Middle Initial)
 Mailing Address 3003 Tasman Dr
 City Santa Clara State CA Zip Code 95054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SVB Financial Group Occupation EUS Manager
 Receipt For: 2015
 Primary General
 Other (specify) Calendar Year

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2015
Transaction ID : 11AI-915
 Amount of Each Receipt this Period
 25.00
 Aggregate Year-to-Date ▼
 420.00

B. Robert Marks
 Full Name (Last, First, Middle Initial)
 Mailing Address 3003 Tasman Dr
 City Santa Clara State CA Zip Code 95054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SVB Financial Group Occupation EUS Manager
 Receipt For: 2015
 Primary General
 Other (specify) Calendar Year

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2015
Transaction ID : 11AI-923
 Amount of Each Receipt this Period
 25.00
 Aggregate Year-to-Date ▼
 420.00

C. Robert Marks
 Full Name (Last, First, Middle Initial)
 Mailing Address 3003 Tasman Dr
 City Santa Clara State CA Zip Code 95054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SVB Financial Group Occupation EUS Manager
 Receipt For: 2015
 Primary General
 Other (specify) Calendar Year

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 25 / 2015
Transaction ID : 11AI-932
 Amount of Each Receipt this Period
 25.00
 Aggregate Year-to-Date ▼
 420.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SVB Financial Group PAC

A. Megan Scheffel
 Full Name (Last, First, Middle Initial)
 Mailing Address 1313 N. Quintana St
 City Arlington State VA Zip Code 22205
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SVB Financial Group Occupation Sr. Market Manager
 Receipt For: 2015
 Primary General
 Other (specify) **▼** Calendar Year
 Aggregate Year-to-Date **▼** 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2015
Transaction ID : 11AI-925
 Amount of Each Receipt this Period
 750.00

B. Robert Vogelsang
 Full Name (Last, First, Middle Initial)
 Mailing Address 3005 Tasman Dr
 City Santa Clara State CA Zip Code 95054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SVB Financial Group Occupation Senior Advisor
 Receipt For: 2015
 Primary General
 Other (specify) **▼** Calendar Year
 Aggregate Year-to-Date **▼** 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 01 / 2015
Transaction ID : 11AI-918
 Amount of Each Receipt this Period
 20.00

C. Robert Vogelsang
 Full Name (Last, First, Middle Initial)
 Mailing Address 3005 Tasman Dr
 City Santa Clara State CA Zip Code 95054
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SVB Financial Group Occupation Senior Advisor
 Receipt For: 2015
 Primary General
 Other (specify) **▼** Calendar Year
 Aggregate Year-to-Date **▼** 360.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 11 / 2015
Transaction ID : 11AI-927
 Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional).....▶	790.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 11
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SVB Financial Group PAC

A. Robert Vogelsang
Full Name (Last, First, Middle Initial)

Mailing Address 3005 Tasman Dr

City Santa Clara State CA Zip Code 95054

FEC ID number of contributing federal political committee. **C**

Name of Employer SVB Financial Group Occupation Senior Advisor

Receipt For: 2015
 Primary General
 Other (specify) Calendar Year

Aggregate Year-to-Date **360.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 25 / 2015

Transaction ID : 11AI-935

Amount of Each Receipt this Period
20.00

B.
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....	20.00
TOTAL This Period (last page this line number only).....	1157.49