

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.
HollyFrontier Corporation PAC

ADDRESS (number and street)
 Check if different than previously reported. (ACC)
 TX

2. FEC IDENTIFICATION NUMBER ▼ 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: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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 Douglas S. Aron

Signature of Treasurer Douglas S. Aron [Electronically Filed] Date / /

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)

Page 2

Write or Type Committee Name

HollyFrontier Corporation 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="2016"/>	<input type="text" value="119495.46"/>	<input type="text" value="119495.46"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="119495.46"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="6031.46"/>	<input type="text" value="6031.46"/>
(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="125526.92"/>	<input type="text" value="125526.92"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9500.00"/>	<input type="text" value="9500.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="116026.92"/>	<input type="text" value="116026.92"/>
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)

Page 3

Write or Type Committee Name

HollyFrontier Corporation 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).....	2291.42	2291.42
(ii) Unitemized	3740.04	3740.04
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6031.46	6031.46
(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)	6031.46	6031.46
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	0.00
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))..... ▶	6031.46	6031.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6031.46	6031.46

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.....	7000.00	7000.00
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	2500.00	2500.00
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)) ..	9500.00	9500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9500.00	9500.00

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)	6031.46	6031.46
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6031.46	6031.46
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)
HollyFrontier Corporation PAC

Full Name (Last, First, Middle Initial)
A. Anthony Conetta

Mailing Address 11924 S. Cedar Avenue

City Jenks State OK Zip Code 74037

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

Name of Employer HollyFrontier Corporation Occupation VP, Refinery Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **248.36**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 26 / 2016

Transaction ID : SA11AI.7205

Amount of Each Receipt this Period
248.36

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

Mailing Address 2828 N. Harwood

City Dallas State TX Zip Code 75201

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

Name of Employer HollyFrontier Corporation Occupation VP Controller

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **421.35**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 26 / 2016

Transaction ID : SA11AI.7212

Amount of Each Receipt this Period
421.35

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

Mailing Address 754 Laguna

City Irving State TX Zip Code 75039

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

Name of Employer HollyFrontier Corporation Occupation VP, Lubricants & Asphalt

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **203.02**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 26 / 2016

Transaction ID : SA11AI.7215

Amount of Each Receipt this Period
203.02

SUBTOTAL of Receipts This Page (optional).....▶	872.73
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 7 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)
HollyFrontier Corporation PAC

Full Name (Last, First, Middle Initial)
A. Michael McKee

Mailing Address 2706 Chrysler Avenue

City Roswell State NM Zip Code 88201

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

Name of Employer HollyFrontier Corporation Occupation VP, Refinery Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **384.62**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2016
Transaction ID : SA11AI.7231

Amount of Each Receipt this Period
384.62

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

Mailing Address 4300 Hanover

City Dallas State TX Zip Code 75225

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

Name of Employer HollyFrontier Corporation Occupation VP, General Counsel

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **542.30**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2016
Transaction ID : SA11AI.7232

Amount of Each Receipt this Period
542.30

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

Mailing Address 134 Santa Rosa Way

City Irving State TX Zip Code 75062

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

Name of Employer HollyFrontier Corporation Occupation Sr. Manger, Corp Health & Safety

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **228.49**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2016
Transaction ID : SA11AI.7236

Amount of Each Receipt this Period
228.49

SUBTOTAL of Receipts This Page (optional).....▶	1155.41
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 8 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"/> 17
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NAME OF COMMITTEE (In Full)
HollyFrontier Corporation PAC

Full Name (Last, First, Middle Initial)
A. Mark Plake

Mailing Address 6227 Prospect Avenue

City Dallas State TX Zip Code 75214

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

Name of Employer HollyFrontier Corporation Occupation VP, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
263.28

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 26 / 2016
Transaction ID : SA11AI.7237

Amount of Each Receipt this Period
263.28

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

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

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

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).....▶	263.28
TOTAL This Period (last page this line number only).....▶	2291.42

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HollyFrontier Corporation PAC

Full Name (Last, First, Middle Initial)

A. American Fuel & Petrochemical Manufacturers Association PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		26		2016

Mailing Address 1667 K Street NW
Suite 700

Transaction ID : SB23.7182

City Washington State DC Zip Code 20006

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
PAC donation

Category/ Type

Candidate Name

American Fuel & Petrochemical Manufacturers Association PAC

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. JOHN CORNYN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		26		2016

Mailing Address 6850 AUSTIN CENTER BLVD STE 180

Transaction ID : SB23.7188

City AUSTIN State TX Zip Code 78731

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
candidate contribution

Category/ Type

Candidate Name

JOHN CORNYN

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: TX District: 00

Full Name (Last, First, Middle Initial)

C. MARCO RUBIO FOR PRESIDENT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		06		2016

Mailing Address PO BOX 558701

Transaction ID : SB23.7190

City MIAMI State FL Zip Code 33255

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
candidate contribution

Category/ Type

Candidate Name

MARCO RUBIO FOR PRESIDENT

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District: 00

SUBTOTAL of Disbursements This Page (optional)..... ▶

6000.00

TOTAL This Period (last page this line number only)..... ▶

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HollyFrontier Corporation PAC

Full Name (Last, First, Middle Initial)

A. CEDRIC L. RICHMOND

Mailing Address 1631 ELYSIAN FIELDS
SUITE 150

City NEW ORLEANS State LA Zip Code 70116

Purpose of Disbursement
candidate contribution

Candidate Name
CEDRIC L. RICHMOND

Office Sought: House
 Senate
 President
State: LA District: 02

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		26		2016

Transaction ID : SB23.7185

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1000.00

7000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HollyFrontier Corporation PAC

Full Name (Last, First, Middle Initial)

A. Wyoming Republican Party

Mailing Address P. O. Box 984

City Cheyenne State WY Zip Code 82003

Purpose of Disbursement
party contribution

Candidate Name

Wyoming Republican Party

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 27 / 2016

Transaction ID : SB29.7181

Amount of Each Disbursement this Period

2500.00

Category/
Type

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2500.00

2500.00