

RECEIVED  
FEC MAIL CENTER

2016 JUN -7 PM 3: 24

*Via FedEx*

June 6, 2016

Federal Election Commission  
999 E Street NW  
Washington, DC 20463

IDENTIFICATION NUMBER: C00571679

REFERENCE: YEAR-END REPORT (01/14/2015 – 12/31/2015)

To Whom It May Concern:

Enclosed please find Blucora, Inc. PAC's Form 3X Year-End Report amended per your instructions in the letter, dated May 31, 2016.

If you have any questions, please contact me at [anne.slone@blucora.com](mailto:anne.slone@blucora.com) or 319-432-6886.

Sincerely,



Anne Slone  
Corporate Counsel

Encl.

20160607 10:00:00 AM

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
FEC MAIL CENTER

2016 JUN -7 PM 3:24  
Office Use Only

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

Blucora, Inc. PAC

ADDRESS (number and street) 1,0900 NE 8th St  
Suite 800  
 Check if different than previously reported. (ACC) Bellevue WA 98004 - 4420

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C00571679

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 M M / D D / in the State of  

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

General (30G)  Runoff (30R)  Special (30S)

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

5. Covering Period 07 / 01 / 2015 through 12 / 31 / 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 Anne Slone

Signature of Treasurer  Date 06 / 06 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Blucora, Inc. PAC

Report Covering the Period: From:

MM / DD / YYYY  
07 / 01 / 2015

To:

MM / DD / YYYY  
12 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">2015</span>		0
(b) Cash on Hand at Beginning of Reporting Period.....	1,500.00	
(c) Total Receipts (from Line 19) .....	1,000.00	6,000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	2,500.00	6,000.00
7. Total Disbursements (from Line 31) .....	2,150.00	5,650.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	350.00	350.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....	0	

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

20150107 10:00:00 AM 0000000000

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Blucora, Inc. PAC

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2015 To: MM / DD / YYYY 12 / 31 / 2015

**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).....	1,000.00	6,000.00
(ii) Unitemized.....	0	0
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1,000.00	6,000.00
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	1,000.00	6,000.00
12. Transfers From Affiliated/Other Party Committees.....	0	0
13. All Loans Received.....	0	0
14. Loan Repayments Received.....	0	0
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0	0
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0	0
17. Other Federal Receipts (Dividends, Interest, etc.).....	0	0
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0	0
(b) Levin Funds (from Schedule H5).....	0	0
(c) Total Transfers (add 18(a) and 18(b))..	0	0
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1,000.00	6,000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	0	0

UNIVERSITY MICROFILMS



**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) .....	1,000.00	6,000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1,000.00	6,000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	150.00	150.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	150.00	150.00

NON-PROFIT ORGANIZATION

**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 1 OF 1
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <input type="checkbox"/> 12 <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)  
Blucora, Inc. PAC

Full Name (Last, First, Middle Initial)  
**A. Zappone, Mary S.**

Mailing Address  
10900 NE 8th St, Ste 800

City: Bellevue State: WA Zip Code: 98004

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

Name of Employer: Service Champ Occupation: President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1,000.00

Date of Receipt  
08 / 06 / 2015

Amount of Each Receipt this Period  
1000.00

Memo Item

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

Amount of Each Receipt this Period

Memo Item

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	1000.00

COPYED 1000 1 10 1 0000 1000

**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)						PAGE 1 OF 1	
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b		

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)  
Blucora, Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Connecticut Democratic Party		Date of Disbursement MM / DD / YYYY 08 / 07 / 2015	
Mailing Address 30 Arbor St. Ste 404			
City Hartford	State CT	Zip Code 06106	
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 2,000.00	
Candidate Name		Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2,000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2,000.00





**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)						PAGE 2 OF 3	
	<input checked="" type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b		

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)  
**Blucora, Inc. PAC**

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>A.</b>		<input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y	
Bank of America		<input type="checkbox"/> 09 / <input type="checkbox"/> 01 / <input type="checkbox"/> 2015	
Mailing Address			
800 5th Ave			
City	State	Zip Code	
Seattle	WA	98104	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Bank Fee		<input type="checkbox"/> 001	
Candidate Name		14.00	
Office Sought:	Disbursement For:	<input type="checkbox"/> Memo Item	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼		
<input type="checkbox"/> President			
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>B.</b>		<input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y	
Bank of America		<input type="checkbox"/> 10 / <input type="checkbox"/> 01 / <input type="checkbox"/> 2015	
Mailing Address			
800 5th Ave			
City	State	Zip Code	
Seattle	WA	98104	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Bank Fee		<input type="checkbox"/> 001	
Candidate Name		14.00	
Office Sought:	Disbursement For:	<input type="checkbox"/> Memo Item	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼		
<input type="checkbox"/> President			
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
<b>C.</b>		<input type="checkbox"/> M M / <input type="checkbox"/> D D / <input type="checkbox"/> Y Y Y Y	
Bank of America		<input type="checkbox"/> 11 / <input type="checkbox"/> 02 / <input type="checkbox"/> 2015	
Mailing Address			
800 5th Ave			
City	State	Zip Code	
Seattle	WA	98104	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Bank Fee		<input type="checkbox"/> 001	
Candidate Name		14.00	
Office Sought:	Disbursement For:	<input type="checkbox"/> Memo Item	
<input type="checkbox"/> House	<input type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify) ▼		
<input type="checkbox"/> President			
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....▶	42.00
TOTAL This Period (last page this line number only).....▶	



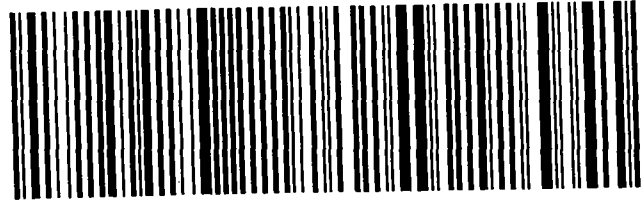
# FedEx

**FedEx**  
 TRK# 8097 0024 7697  
 0215

TUE - 07 JUN AA  
 STANDARD OVERNIGHT

**XC RDVA**

**20463**  
 DC-US  
 IAD



FID 5082558 06JUN16 CIDA 539C2/30BD/6A88

10:90  
 169L

8  
 16:00

RT 672  
 FZ



FedEx carbon-  
 envelope shipping

**dEx** Express Package US Airbill  
 FedEx Tracking Number 8097 0024 7697

6/6/2016

to Anne Stone Phone 319 373-3600

from 2ND STORY SOFTWARE

address 1425 60TH ST NE

CEDAR RAPIDS State IA ZIP 52402-1283

Internal Billing Reference

recipient's Federal Election Commission Phone

to 999 E Street NW

Hold Weekday FedEx location address REQUIRED. NOT available for FedEx First Overnight.

Hold Saturday FedEx location address REQUIRED. Available ONLY for FedEx Priority Overnight and FedEx 2Day to select locations.

Washington State DC ZIP 20463

0122041567

Form ID No. 0215 Recipient's Copy

4 Express Package Service \*To most locations. Packages up to 150 lbs. For packages over 50 lbs., use the FedEx Express Freight US Airbill.

Next Business Day	2 or 3 Business Days
<input type="checkbox"/> FedEx First Overnight <small>Earliest next business morning delivery to select locations. Friday shipments will be delivered on Monday unless Saturday Delivery is selected.</small>	<input type="checkbox"/> FedEx 2Day A.M. <small>Second business morning.* Saturday Delivery NOT available.</small>
<input type="checkbox"/> FedEx Priority Overnight <small>Next business morning.* Friday shipments will be delivered on Monday unless Saturday Delivery is selected.</small>	<input type="checkbox"/> FedEx 2Day <small>Second business afternoon.* Thursday shipments will be delivered on Monday unless Saturday Delivery is selected.</small>
<input checked="" type="checkbox"/> FedEx Standard Overnight <small>Next business afternoon.* Saturday Delivery NOT available.</small>	<input type="checkbox"/> FedEx Express Saver <small>Third business day.* Saturday Delivery NOT available.</small>

5 Packaging \*Declared value limit \$500.

FedEx Envelope\*  
  FedEx Pak\*  
  FedEx Box  
  FedEx Tube  
  Other

6 Special Handling and Delivery Signature Options Fees may apply. See the FedEx Service Guide.

Saturday Delivery  
NOT available for FedEx Standard Overnight, FedEx 2Day A.M., or FedEx Express Saver.

No Signature Required  
Package may be left without obtaining a signature for delivery.

Direct Signature  
Someone at recipient's address may sign for delivery.

Indirect Signature  
If no one is available at recipient's address, someone at a neighboring address may sign for delivery. For residential deliveries only.

Does this shipment contain dangerous goods?

No  
  Yes One box must be checked. As per attached Shipper's Declaration.  
  Yes Shipper's Declaration not required.  
  Dry Ice Dry Ice, UN 1845 \_\_\_\_\_ x \_\_\_\_\_ kg

Restrictions apply for dangerous goods — see the current FedEx Service Guide.  Cargo Aircraft Only

7 Payment Bill to:

Sender Acct. No. in Section 1 will be billed.  
  Recipient  
  Third Party  
  Credit Card  
  Cash/Check

Total Packages Total Weight

NON-HOLDING ON HOLDING

FedEx.com 1800.Go.FedEx 1800.463.3339

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked Date of Receipt

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked

USPS Priority Mail Express Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): *FedEx* Shipping Date  
*6/6/2016*  
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

PREPARER *MP*  
 (3/2015)

*6/7/2016*  
 DATE PREPARED

NOV 10 10 00 AM '16