Mackay Todd C Form 4 February 21, 2019

# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB APPROVAL

Number: 3235-0287

Synings: January 31,

Expires: 2005
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0.5

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Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations

may continue.

See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

02/20/2019

Stock

| 1. Name and Address of Reporting Person * Mackay Todd C |                     | Person * 2. Issuer<br>Symbol   | 2. Issuer Name <b>and</b> Ticker or Trading Symbol |                |        |  | 5. Relationship of Reporting Person(s) to Issuer |                  |              |  |  |
|---|---------------------|--------------------------------|--|----------------|--------|--|--|------------------|--------------|--|--|
| ~ · ·   |                     | BLUCORA, INC. [BCOR]           |  |                |        | (Check all applicable)   |  |                  |              |  |  |
| (Last)  | (First) (N          | Middle) 3. Date of             | f Earliest Tr                                      | ansaction      |        |  |  |                  |              |  |  |
|   | ,                   | (Month/Day/Year)               |  |                |        | Director   |  | Owner            |              |  |  |
| 6333 N. ST  | 6TH 02/20/2         | 02/20/2019                     |  |                |        | _X_ Officer (give title Other (specify below)  Interim CEO HD Vest |  |                  |              |  |  |
| FLOOR   |                     |                                |  |                |        |  |  |                  |              |  |  |
|   | 4. If Ame           | 4. If Amendment, Date Original |  |                |        | 6. Individual or Joint/Group Filing(Check                          |  |                  |              |  |  |
|   | Filed(Mor           | Filed(Month/Day/Year)          |  |                |        | Applicable Line)   |  |                  |              |  |  |
|   |                     |                                |  |                |        |  | _X_ Form filed by                                |                  |              |  |  |
| IRVING, TX 75038  |                     |                                |  |                |        |  | Form filed by More than One Reporting Person     |                  |              |  |  |
| (City)  | (State)             | (Zip) Tabl                     | e I - Non-D  | erivative      | Secur  | ities Acq  | uired, Disposed o                                | f, or Beneficial | ly Owned     |  |  |
| 1.Title of  | 2. Transaction Date | 2A. Deemed                     | 3.   | 4. Securi      | ties A | cquired  | 5. Amount of                                     | 6. Ownership     | 7. Nature of |  |  |
| Security  | (Month/Day/Year)    | Execution Date, if             | ution Date, if Transaction                         |                | ispose | d of (D)   | Securities                                       | Form: Direct     | Indirect     |  |  |
| (Instr. 3) any  |                     | •                              | Code   |                | 4 and  | 5)   | Beneficially                                     | (D) or           | Beneficial   |  |  |
|   |                     | (Month/Day/Year)               | (Instr. 8)   |                |        |  | Owned  | Indirect (I)     | Ownership    |  |  |
|   |                     |                                |  |                |        |  | Following  | (Instr. 4)       | (Instr. 4)   |  |  |
|   |                     |                                |  |                | (A)    |  | Reported<br>Transaction(s)                       |                  |              |  |  |
|   |                     |                                |  |                | or     |  | (Instr. 3 and 4)                                 |                  |              |  |  |
|   |                     |                                | Code V   | Amount         | (D)    | Price  | (1113ti. 3 and 4)                                |                  |              |  |  |
| Common  | 02/20/2010          |                                | E  | <b>400</b> (1) | D      | \$   | 37.084   | D                |              |  |  |

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

F

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 control number.

SEC 1474

(9-02)

D

37,084

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

499 (1) D

#### Edgar Filing: Mackay Todd C - Form 4

| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transacti<br>Code<br>(Instr. 8) |                                   |                     | ate             | 7. Title<br>Amoun<br>Under | int of<br>lying<br>ities | 8. Price of Derivative Security (Instr. 5) | 9. Nu<br>Deriv<br>Secur<br>Bene |
|---|---|---|---|---------------------------------------|-----------------------------------|---------------------|-----------------|----------------------------|--------------------------|--|---------------------------------|
|   | Derivative<br>Security                      |   |   |                                       | Securities<br>Acquired            |                     |                 | (Instr.                    | 3 and 4)                 |  | Owne<br>Follo                   |
|   |   |   |   |                                       | (A) or<br>Disposed                |                     |                 |                            |                          |  | Repo<br>Trans                   |
|   |   |   |   |                                       | of (D)<br>(Instr. 3,<br>4, and 5) |                     |                 |                            |                          |  | (Instr                          |
|   |   |   |   |                                       | 4, and 3)                         |                     |                 |                            | Amount                   |  |                                 |
|   |   |   |   |                                       |                                   | Date<br>Exercisable | Expiration Date | Title                      | or<br>Number<br>of       |  |                                 |
|   |   |   |   | Code V                                | (A) (D)                           |                     |                 |                            | Shares                   |  |                                 |

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Mackay Todd C 6333 N. STATE HWY 161 6TH FLOOR IRVING, TX 75038

Interim CEO HD Vest

### **Signatures**

/s/ Wendy Walton, as Attorney-in-Fact for Todd C. Mackay

02/21/2019

\*\*Signature of Reporting Person

Date

## **Explanation of Responses:**

- \* 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).

This transaction represents the withholding by the Issuer of shares to pay taxes in connection with the vesting of restricted stock units.

(1) The timing and amount of the transaction were determined by the terms of the applicable restricted stock unit award and were not within the control of the Reporting Person.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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