## Edgar Filing: BLUCORA, INC. - Form 4

BLUCORA,	INC.											
Form 4												
January 16, 2	015											
FORM	4		CECUD			ID EVO	TTAN				PPROVAL	
	UNITE	DSTATES				ND EXC D.C. 205		NGE (	COMMISSION	OMB Number:	3235-0287	
Check thi if no long	or									Expires:	January 31,	
subject to	STATE	ATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							2005 ed average			
Section 1				SECUI	RI	TIES				burden hou	•	
Form 4 or Form 5			~ • •			~	-			response	0.5	
obligation								-	e Act of 1934,			
may conti See Instru	nue. Section 1		of the In	•		•			f 1935 or Section 40	n		
1(b).												
(Print or Type R	esponses)											
1. Name and Address of Reporting Person *2. IssueEMANS ERIC MICHAELSymbol				. Issuer Name <b>and</b> Ticker or Trading				3	5. Relationship of Reporting Person(s) to Issuer			
U.S.			•	BLUCORA, INC. [BCOR]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of	Earliest T	rai	nsaction			(ence	k all applicable	·)	
(M			(Month/D	(Month/Day/Year)					Director	10% Owner		
	TH STREET, S	SUITE	01/14/20	)15					X Officer (give below)	title Other below)	er (specify	
800									· · · · · · · · · · · · · · · · · · ·	Financial Offic	er	
	(Street)		4. If Ame	ndment, D	ate	e Original			6. Individual or Jo	int/Group Filin	1g(Check	
				ed(Month/Day/Year)					Applicable Line)			
									_X_ Form filed by C Form filed by M			
BELLEVUE	, WA 98004								Person		porting	
(City)	(State)	(Zip)	Table	e I - Non-	De	rivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction I	Date 2A. Dee	emed	3.		4. Securit	ies Ac	quired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye	on Date, if Transaction(A) or Disposed of Code (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					of		Form: Direct			
(Instr. 3)							5)	Beneficially Owned	(D) or Beneficia Indirect (I) Ownersh	Ownership		
		(ivionitii	Dujitout	(Insu: 0)	,	(111501-5),	i una c	<i>,</i> )		(Instr. 4)	(Instr. 4)	
							(A)		Reported			
							or		Transaction(s) (Instr. 3 and 4)			
2				Code V	V	Amount	(D)	Price	(msu. 5 anu 4)			
Common Stock	01/14/2015			А		19,082	А	\$0	77,824	D		

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

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.

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

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) of Disposed of (D (Instr. 3, 4, and 5)	Expiration I (Month/Day r )	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (E	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (Right to Buy)	\$ 12.97	01/14/2015		A	164,745	<u>(1)</u>	01/14/2022	Common Stock	164,745	

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
I B	Director	10% Owner	Officer	Other				
EMANS ERIC MICHAEL 10900 NE 8TH STREET SUITE 800 BELLEVUE, WA 98004			Chief Financial Officer					
Signatures								
/s/ Eric Emans, CFO, Treasure Person	r, and Rep	oorting	01/16/2015					
**Signature of Reporting	Person		Date					
Explanation of Re	snon	666.						

## **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).

(1) The option vests according to the following schedule: 33.33% vests on January 2, 2016, and approximately 16.67% vests at the end of each six-month period thereafter, such that the option will be fully vested on January 2, 2018.

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.