

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

ADDRESS (number and street) 525 washington ave
 Check if different than previously reported. (ACC)
New jersey NJ 07310

2. **FEC IDENTIFICATION NUMBER** C00161901
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 Quarterly 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 02 01 2011 through 02 28 2011

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 David Pearl

Signature of Treasurer Electronically Filed by David Pearl Date 03 09 2011

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable 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="2011"/>		151050.71
(b) Cash on Hand at Beginning of Reporting Period	161544.96	
(c) Total Receipts (from Line 19)	10235.49	20729.74
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	171780.45	171780.45
7. Total Disbursements (from Line 31)	7500.00	7500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	164280.45	164280.45
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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**

Write or Type Committee Name

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable 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)	3800.00	4790.00
(ii) Unitemized	6435.49	15939.74
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10235.49	20729.74
(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)	10235.49	20729.74
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 Transfer (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))	10235.49	20729.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10235.49	20729.74

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	7500.00	7500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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) Shared 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))..	7500.00	7500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7500.00	7500.00

DETAILED SUMMARY PAGE
of Disbursements

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	10235.49	20729.74
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10235.49	20729.74
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 / 13
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A.	Full Name (Last, First, Middle Initial) RICHARD SILVER	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 1290 Ave. of the Americas	Transaction ID: PR1018380225592
	City State Zip Code New York NY 10104-0101	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer AXA Financial, Inc. Occupation EVP & GENERAL COUNSEL Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 300.00	P/R Deduction (\$150.00 Bi-Weekly)

B.	Full Name (Last, First, Middle Initial) JAMES SHEPHERDSON	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 1290 AVENUE OF THE AMERICAS	Transaction ID: PR1018390025592
	City State Zip Code NEW YORK NY 10104-0101	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer AXA DISTRIBUTORS, LLC Occupation SEVP - RETIREMENT SAVINGS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 225.00	P/R Deduction (\$75.00 Bi-Weekly)

C.	Full Name (Last, First, Middle Initial) CHARLES MARINO	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 1290 Avenue of Americas	Transaction ID: PR1018396625592
	City State Zip Code NEW YORK NY 10104	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer AXA Financial, Inc. Occupation EVP AND CHIEF ACTUARY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 300.00	P/R Deduction (\$150.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	375.00
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 7 / 13

(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)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A.

Full Name (Last, First, Middle Initial)

DAVID KARR

Mailing Address 40 MONUMOUNT ROAD

City State Zip Code
BALA CYNWYD PA 19004-1737

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

Name of Employer Occupation
AXA Advisors, LLC EVP --BM---Philadelphia

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR1018399625592

Amount of Each Receipt this Period

165.00

P/R Deduction (\$165.00 Monthly)

B.

Full Name (Last, First, Middle Initial)

TED BEAL, Sr

Mailing Address 333 Thornall Street
8th

City State Zip Code
Edison NJ 08837-2220

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

Name of Employer Occupation
AXA Advisors EVP Branch Manager

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR1018409025592

Amount of Each Receipt this Period

150.00

P/R Deduction (\$150.00 Monthly)

C.

Full Name (Last, First, Middle Initial)

JOHN PASSANANTI

Mailing Address 1415 W 22nd Stree
Suite 330

City State Zip Code
Oakbrook IL 60523

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

Name of Employer Occupation
AXA Advisors, LLC EVP--Chicago Branch

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 330.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 1

Transaction ID: PR1018411325592

Amount of Each Receipt this Period

165.00

P/R Deduction (\$165.00 Monthly)

SUBTOTAL of Receipts This Page (optional)

480.00

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

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NAME OF COMMITTEE (In Full)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A.	Full Name (Last, First, Middle Initial) JEFFREY GREEN	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 4251 Crums Mill Road	Transaction ID: PR1745984525592
	City State Zip Code Harrisburg PA 17112-2824	Amount of Each Receipt this Period 330.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$330.00 Bi-Weekly)
	Name of Employer AXA Advisors Occupation SVP - AXA NETWORK Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 660.00	

B.	Full Name (Last, First, Middle Initial) RICHARD DZIADZIO	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 1290 Avenue of the Americas	Transaction ID: PR1774717325592
	City State Zip Code New York NY 10104-0101	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$200.00 Bi-Weekly)
	Name of Employer AXA Financial, Inc. Occupation EVP & CFO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) KEVIN MURRAY	Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 1290 Avenue of the Americas	Transaction ID: PR1904689325592
	City State Zip Code New York NY 10104-0101	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	P/R Deduction (\$150.00 Bi-Weekly)
	Name of Employer AXA Financial, Inc. Occupation EVP & CHIEF INFORMATION OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	680.00
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 9 / 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial)
GARY HIRSCHKRON
 Mailing Address **1290 Avenue of the Americas**
 City **New York** State **NY** Zip Code **10104-0101**
 Date of Receipt **02 / 28 / 2011**
Transaction ID: PR1908083325592
 Amount of Each Receipt this Period **150.00**
 P/R Deduction (\$150.00 Bi-Weekly)
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **AXA Partners** Occupation **SVP - AXA Partners**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date **300.00**

B. Full Name (Last, First, Middle Initial)
JOEL ALBERT
 Mailing Address **2399 Highway 34 Suite C-2**
 City **Manasquan** State **NJ** Zip Code **08736-1500**
 Date of Receipt **02 / 28 / 2011**
Transaction ID: PR1923670625592
 Amount of Each Receipt this Period **165.00**
 P/R Deduction (\$165.00 Monthly)
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **AXA Advisors** Occupation **EVP--Manasquan Branch**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date **330.00**

C. Full Name (Last, First, Middle Initial)
ROSS FERRIN
 Mailing Address **1675 Broadway Suite 1700**
 City **Denver** State **CO** Zip Code **80202-4675**
 Date of Receipt **02 / 28 / 2011**
Transaction ID: PR1926422625592
 Amount of Each Receipt this Period **165.00**
 P/R Deduction (\$165.00 Monthly)
 FEC ID number of contributing federal political committee. **C**
 Name of Employer **AXA Advisors** Occupation **EVP---Denver**
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date **330.00**

SUBTOTAL of Receipts This Page (optional) ► **480.00**
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 / 13
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A.	Full Name (Last, First, Middle Initial) DROR NIR		Date of Receipt
	Mailing Address 1633 Broadway		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	New York	NY	10019-6708
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1926422825592
Name of Employer AXA Advisors, LLC		Occupation EVP---NY Metro	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="330.00"/>	<input type="text" value="165.00"/>
			P/R Deduction (\$165.00 Monthly)

B.	Full Name (Last, First, Middle Initial) RYAN BECK		Date of Receipt
	Mailing Address 2825 E. Cottonwood Pkwy Suite 430		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Salt Lake City	UT	84121-7055
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1926905225592
Name of Employer AXA Advisors		Occupation EVP---BM Salt Lake City	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="330.00"/>	<input type="text" value="165.00"/>
			P/R Deduction (\$165.00 Monthly)

C.	Full Name (Last, First, Middle Initial) ROBERT WRIGHT, JR.		Date of Receipt
	Mailing Address 1290 AVENUE OF THE AMERICAS		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	NEW YORK	NY	10104-0101
	FEC ID number of contributing federal political committee. C		Transaction ID: PR1928264525592
Name of Employer AXA Advisors, LLC		Occupation EVP - WEALTH MANAGEMENT	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	<input type="text" value="150.00"/>
			P/R Deduction (\$150.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="480.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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NAME OF COMMITTEE (In Full)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A.	Full Name (Last, First, Middle Initial) JOSEPH DI MORA		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 120 Madison Street		Transaction ID: PR1937997225592
	City Syracuse	State NY	Zip Code 13202-2821
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 165.00
	Name of Employer AXA Advisors	Occupation EVP---Syracuse Branch	P/R Deduction (\$165.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		

B.	Full Name (Last, First, Middle Initial) PETER GOLDEN		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 1290 Avenue of the Americas		Transaction ID: PR2176757725592
	City New York	State NY	Zip Code 10104-0101
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 330.00
	Name of Employer AXA Distributors, LLC	Occupation Divisional VP - ADL	P/R Deduction (\$330.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00		

C.	Full Name (Last, First, Middle Initial) M MICHAEL ROONEY		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 11845 W. OLYMPIC #1100		Transaction ID: PR2246778225592
	City LOS ANGELES	State CA	Zip Code 90064-1149
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 165.00
	Name of Employer AXA Advisors, LLC	Occupation EVP - LOS ANGELES MARKETING CENTER	P/R Deduction (\$165.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		

SUBTOTAL of Receipts This Page (optional)	▶	660.00
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 12 / 13
	<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)
AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A.	Full Name (Last, First, Middle Initial) DILLAN MICUS		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 14851 N. Scottsdale Rd Suite 103		Transaction ID: PR2247853625592
	City Scottsdale	State AZ	Zip Code 85254-2790
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 165.00
	Name of Employer AXA Advisors, LLC	Occupation EVP--Scottsdale AZ	P/R Deduction (\$165.00 Monthly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00		

B.	Full Name (Last, First, Middle Initial) JANET ELIE		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 80 SCOTT SWAMP ROAD		Transaction ID: PR2263126125592
	City FARMINGTON	State CT	Zip Code 06032-2847
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 330.00
	Name of Employer AXA Distributors, LLC	Occupation RVP - ADL	P/R Deduction (\$330.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00		

C.	Full Name (Last, First, Middle Initial) DAVID O'LEARY		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 1290 AVENUE OF THE AMERICAS		Transaction ID: PR2491183425592
	City NEW YORK	State NY	Zip Code 10104-0101
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
	Name of Employer AXA Advisors	Occupation EVP - FINANCIAL PROTECTION	P/R Deduction (\$150.00 Bi-Weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	645.00
TOTAL This Period (last page this line number only)	3800.00

**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 13 / 13

<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

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)

AXA Equitable Life Insurance Company Political Action Committee (AXA Equitable PAC)

A. Full Name (Last, First, Middle Initial) Schock For Congress <hr/> Mailing Address PO Box 10555 <hr/> City Peoria State IL Zip Code 61612 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Aaron Schock <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 18 <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33029496 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 1 1
	Amount of Each Disbursement this Period 2500.00 <hr/> Category/Type 011
B. Full Name (Last, First, Middle Initial) The Financial Services Roundtable PAC <hr/> Mailing Address 805 Fifteenth St., NW Suite 600 <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 33029498 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00 <hr/> Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

7500.00

TOTAL This Period (last page this line number only) ►

7500.00