

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) 1290 Avenue of the Americas New York NY 10104 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00161901 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff (d) 30-Day Post-Election Report for the: General, Runoff, Special

5. Covering Period 05 01 2009 through 05 31 2009

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 James Zemaite

Signature of Treasurer Electronically Filed by James Zemaite Date 10 28 2009

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 FE6AN026 FEC FORM 3X (Rev. 12/2004)

A. Form/Schedule : **F3XA**

Due to FEC Notice requiring a transaction to be moved from Schedule A to Schedule B.

Transaction ID :

**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: 

|   |   |
|---|---|
| M | M |
| 0 | 5 |

|   |   |
|---|---|
| D | D |
| 0 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To: 

|   |   |
|---|---|
| M | M |
| 0 | 5 |

|   |   |
|---|---|
| D | D |
| 3 | 1 |

|   |   |   |   |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

|   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |   |   |   |   |   |   |  |           |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|-----------|
| 6. (a) Cash on Hand<br>January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table> | Y                       | Y                                 | Y | Y | 2 | 0 | 0 | 9 |  | 164156.02 |
| Y   | Y                       | Y                                 | Y |   |   |   |   |   |  |           |
| 2   | 0                       | 0                                 | 9 |   |   |   |   |   |  |           |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....  | 177382.00               |                                   |   |   |   |   |   |   |  |           |
| (c) Total Receipts (from Line 19) .....   | 12020.25                | 71411.23                          |   |   |   |   |   |   |  |           |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....  | 189402.25               | 235567.25                         |   |   |   |   |   |   |  |           |
| 7. Total Disbursements (from Line 31) .....   | 5969.16                 | 52134.16                          |   |   |   |   |   |   |  |           |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | 183433.09               | 183433.09                         |   |   |   |   |   |   |  |           |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | 0.00                    |                                   |   |   |   |   |   |   |  |           |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>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<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  |                               |                                   |
| (i) Itemized (use Schedule A) .....  | 8320.25                       | 37179.91                          |
| (ii) Unitemized .....  | 3700.00                       | 33231.32                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 12020.25                      | 70411.23                          |
| (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) .....     | 12020.25                      | 70411.23                          |
| 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                          | 1000.00                           |
| 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)) .....                          | 12020.25                      | 71411.23                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 12020.25                      | 71411.23                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

| <b>II. DISBURSEMENTS</b>   | <b>COLUMN A<br/>Total This Period</b> | <b>COLUMN B<br/>Calendar Year-to-Date</b> |
|--|---------------------------------------|---|
| 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.....         | 2500.00                               | 48500.00                                  |
| 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 .....                                  | 3469.16                               | 3634.16                                   |
| (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)) .....                           | 3469.16                               | 3634.16                                   |
| 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))..       | 5969.16                               | 52134.16                                  |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 5969.16                               | 52134.16                                  |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 12020.25                      | 70411.23                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 3469.16                       | 3634.16                           |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 8551.09                       | 66777.07                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 0.00                          | 0.00                              |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(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: PAGE 7 / 35  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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)**

|  |  |
|--|--|
| <p><b>A.</b> Full Name (Last, First, Middle Initial)<br/>PAUL CASTAGNA</p> <p>Mailing Address <b>120 MONTGOMERY STREET<br/>SUITE 120</b></p> <p>City <b>SAN FRANCISCO</b> State <b>CA</b> Zip Code <b>94104-4303</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer <b>AXA Advisors, LLC</b> Occupation <b>District Manager</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">0.00</span></p> | <p>Date of Receipt<br/> <span style="border: 1px solid black; padding: 2px;">05 / 29 / 2009</span></p> <p><b>Transaction ID: 30769244</b></p> <p>Amount of Each Receipt this Period<br/> <span style="border: 1px solid black; padding: 2px;">0.00</span></p> <p><b>[MEMO ITEM]</b><br/>                     Refund(s) on Schedule B<br/>                     Totaling \$3469.16 This changes the YTD Total to \$0-.00</p> |
|--|--|

|  |  |
|--|--|
| <p><b>B.</b> Full Name (Last, First, Middle Initial)<br/>ALVIN FENICHEL</p> <p>Mailing Address <b>1290 Ave. of the Americas</b></p> <p>City <b>New York</b> State <b>NY</b> Zip Code <b>10104-0101</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer <b>AXA Financial, Inc.</b> Occupation <b>SVP &amp; CHIEF ACCOUNTANT</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">385.00</span></p> | <p>Date of Receipt<br/> <span style="border: 1px solid black; padding: 2px;">05 / 31 / 2009</span></p> <p><b>Transaction ID: PR1018371121922</b></p> <p>Amount of Each Receipt this Period<br/> <span style="border: 1px solid black; padding: 2px;">70.00</span></p> <p>P/R Deduction (\$70.00 Bi-Weekly)</p> |
|--|--|

|   |  |
|---|--|
| <p><b>C.</b> Full Name (Last, First, Middle Initial)<br/>PATRICIA MACISAAC</p> <p>Mailing Address <b>525 WASHINGTON BOULEVARD</b></p> <p>City <b>JERSEY CITY</b> State <b>NJ</b> Zip Code <b>07310-1606</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer <b>AXA Financial, Inc.</b> Occupation <b>SVP - IT</b></p> <p>Receipt For:<br/> <input type="checkbox"/> Primary   <input type="checkbox"/> General<br/> <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">275.00</span></p> | <p>Date of Receipt<br/> <span style="border: 1px solid black; padding: 2px;">05 / 31 / 2009</span></p> <p><b>Transaction ID: PR1018375121922</b></p> <p>Amount of Each Receipt this Period<br/> <span style="border: 1px solid black; padding: 2px;">50.00</span></p> <p>P/R Deduction (\$50.00 Bi-Weekly)</p> |
|---|--|

|  |  |
|--|--|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <span style="border: 1px solid black; padding: 2px;">120.00</span> |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <span style="border: 1px solid black; padding: 2px;"> </span>      |

# 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 / 35                  |
|   | <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)**

|   |   |  |
|---|---|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br><b>RICHARD SILVER</b>                        | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>1290 Ave. of the Americas</b>  | <b>Transaction ID: PR1018380221922</b>                     |
|   | City <b>New York</b> State <b>NY</b> Zip Code <b>10104-0101</b>                         | Amount of Each Receipt this Period<br><b>150.00</b>        |
|   | FEC ID number of contributing federal political committee. <b>C</b>                     | P/R Deduction (\$150.00 Bi-Weekly)                         |
|   | Name of Employer <b>AXA Financial, Inc.</b> Occupation <b>EVP &amp; GENERAL COUNSEL</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>825.00</b>   |  |

|   |  |  |
|---|--|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br><b>ALLEN ZABUSKY</b>                    | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>525 WASHINGTON BOULEVARD</b>                                    | <b>Transaction ID: PR1018383021922</b>                     |
|   | City <b>JERSEY CITY</b> State <b>NJ</b> Zip Code <b>07310-1606</b>                 | Amount of Each Receipt this Period<br><b>70.00</b>         |
|   | FEC ID number of contributing federal political committee. <b>C</b>                | P/R Deduction (\$70.00 Bi-Weekly)                          |
|   | Name of Employer <b>AXA Financial, Inc.</b> Occupation <b>SVP &amp; CONTROLLER</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>385.00</b>  |  |

|   |  |  |
|---|--|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br><b>LUIS GABRIEL CHIAPPY</b>       | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>9130 SOUTH DADELAND BLVD.<br/>SUITE 1400</b>              | <b>Transaction ID: PR1018385321922</b>                     |
|   | City <b>MIAMI</b> State <b>FL</b> Zip Code <b>33156-7818</b>                 | Amount of Each Receipt this Period<br><b>100.00</b>        |
|   | FEC ID number of contributing federal political committee. <b>C</b>          | P/R Deduction (\$100.00 Monthly)                           |
|   | Name of Employer <b>AXA Advisors, LLC</b> Occupation <b>District Manager</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>500.00</b>                                    |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>320.00</b> |
| <b>TOTAL</b> 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 9 / 35 |
|   | <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)**

|   |  |  |
|---|--|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br><b>HUGO CASTRO</b>                | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>9130 S. DADELAND BLVD<br/>SUITE 1400</b>                  | <b>Transaction ID: PR1018388721922</b>                     |
|   | City <b>MIAMI</b> State <b>FL</b> Zip Code <b>33156-7818</b>                 | Amount of Each Receipt this Period<br><b>80.00</b>         |
|   | FEC ID number of contributing federal political committee. <b>C</b>          | P/R Deduction (\$80.00 Monthly)                            |
|   | Name of Employer <b>AXA Advisors, LLC</b> Occupation <b>District Manager</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>400.00</b>                                    |  |

|   |   |  |
|---|---|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br><b>DAVE HATTEM</b>                           | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>1290 Ave. of the Americas</b>  | <b>Transaction ID: PR1018390821922</b>                     |
|   | City <b>New York</b> State <b>NY</b> Zip Code <b>10104-0101</b>                         | Amount of Each Receipt this Period<br><b>70.00</b>         |
|   | FEC ID number of contributing federal political committee. <b>C</b>                     | P/R Deduction (\$70.00 Bi-Weekly)                          |
|   | Name of Employer <b>AXA Financial, Inc.</b> Occupation <b>SVP &amp; DEP GEN COUNSEL</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>385.00</b>   |  |

|   |  |  |
|---|--|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br><b>WENDY COOPER</b>                                 | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>1290 Ave. of the Americas</b>   | <b>Transaction ID: PR1018390921922</b>                     |
|   | City <b>New York</b> State <b>NY</b> Zip Code <b>10104-0101</b>                                | Amount of Each Receipt this Period<br><b>70.00</b>         |
|   | FEC ID number of contributing federal political committee. <b>C</b>                            | P/R Deduction (\$70.00 Bi-Weekly)                          |
|   | Name of Employer <b>AXA Financial, Inc.</b> Occupation <b>SVP &amp; ASSOC. GENERAL COUNSEL</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>385.00</b>  |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>220.00</b> |
| <b>TOTAL</b> 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 10 / 35  
(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)  
CHARLES MARINO

Mailing Address 1290 Avenue of Americas

City State Zip Code  
NEW YORK NY 10104

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

Name of Employer AXA Financial, Inc. Occupation EVP AND CHIEF ACTUARY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 825.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

**Transaction ID:** PR1018396621922

Amount of Each Receipt this Period  
150.00

P/R Deduction (\$150.00 Bi-Weekly)

**B.**

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 AXA Advisors, LLC Occupation EVP --BM---Philadelphia

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 825.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

**Transaction ID:** PR1018399621922

Amount of Each Receipt this Period  
165.00

P/R Deduction (\$165.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
WILLIAM DEGNAN

Mailing Address 1290 Acenue of the Americas

City State Zip Code  
New York NY 10104-0101

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

Name of Employer AXA Financial, Inc. Occupation SVP - AT RETIREMENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

**Transaction ID:** PR1018402821922

Amount of Each Receipt this Period  
70.00

P/R Deduction (\$40.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **385.00**

**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 11 / 35                 |
|   | <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)

|           |   |   |
|-----------|---|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>DAVID KAM  | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|           | Mailing Address 1290 Ave. of the Americas   | <b>Transaction ID:</b> PR1018406221922              |
|           | City State Zip Code<br>New York NY 10104-0101   | Amount of Each Receipt this Period<br>70.00         |
|           | FEC ID number of contributing federal political committee.<br><b>C</b>  | P/R Deduction (\$70.00 Bi-Weekly)                   |
|           | Name of Employer AXA Financial, Inc. Occupation SVP & SENIOR ACTUARY<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>385.00 |   |

|           |   |   |
|-----------|---|---|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>ANNE KATCHER   | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|           | Mailing Address 1290 Avenue of the Americas   | <b>Transaction ID:</b> PR1018408221922              |
|           | City State Zip Code<br>NEW YORK NY 10104-0101   | Amount of Each Receipt this Period<br>70.00         |
|           | FEC ID number of contributing federal political committee.<br><b>C</b>  | P/R Deduction (\$70.00 Bi-Weekly)                   |
|           | Name of Employer AXA Financial, Inc. Occupation SVP & SENIOR ACTUARY<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>385.00 |   |

|           |  |   |
|-----------|--|---|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>TED BEAL, Sr  | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|           | Mailing Address 333 Thornall Street 8th  | <b>Transaction ID:</b> PR1018409021922              |
|           | City State Zip Code<br>Edison NJ 08837-2220  | Amount of Each Receipt this Period<br>150.00        |
|           | FEC ID number of contributing federal political committee.<br><b>C</b>   | P/R Deduction (\$150.00 Monthly)                    |
|           | Name of Employer AXA Advisors Occupation EVP Branch Manager<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>750.00 |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>290.00</b> |
| <b>TOTAL</b> 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 / 35                 |
|   | <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)**

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>GEORGE DIAMANTIS  | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|           | Mailing Address 3348 Peachtree Rd Suite 860  | <b>Transaction ID:</b> PR1018409321922              |
|           | City Atlanta State GA Zip Code 30326-1067  | Amount of Each Receipt this Period<br>81.25         |
|           | FEC ID number of contributing federal political committee. <b>C</b>  | P/R Deduction (\$81.25 Monthly)                     |
|           | Name of Employer AXA Advisors, LLC Occupation President--Advantage Group<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 406.25 |   |

|           |   |   |
|-----------|---|---|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>JOHN PASSANANTI  | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|           | Mailing Address 1415 W 22nd Stree Suite 330   | <b>Transaction ID:</b> PR1018411321922              |
|           | City Oakbrook State IL Zip Code 60523   | Amount of Each Receipt this Period<br>165.00        |
|           | FEC ID number of contributing federal political committee. <b>C</b>   | P/R Deduction (\$165.00 Monthly)                    |
|           | Name of Employer AXA Advisors, LLC Occupation EVP--Chicago Branch<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 825.00 |   |

|           |  |   |
|-----------|--|---|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>RONALD THOMAS   | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|           | Mailing Address 761 233RD STREET   | <b>Transaction ID:</b> PR1018411821922              |
|           | City PASADENA State MD Zip Code 21122  | Amount of Each Receipt this Period<br>50.00         |
|           | FEC ID number of contributing federal political committee. <b>C</b>  | P/R Deduction (\$50.00 Monthly)                     |
|           | Name of Employer AXA Advisors, LLC Occupation District Manager<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼ 250.00 |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>296.25</b> |
| <b>TOTAL</b> 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 13 / 35  
(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)  
**MARYBETH FARRELL**  
 Mailing Address **1290 Ave. of the Americas**  
 City **New York** State **NY** Zip Code **10104-0101**  
 Date of Receipt **05 / 31 / 2009**  
**Transaction ID: PR1018413621922**  
 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 Advisors** Occupation **EVP & VICE CHAIR - AXA ADVISORS**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date **825.00**

**B.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER CONDRON**  
 Mailing Address **1290 Ave. of the Americas**  
 City **New York** State **NY** Zip Code **10104-0101**  
 Date of Receipt **05 / 31 / 2009**  
**Transaction ID: PR1018415621922**  
 Amount of Each Receipt this Period **384.00**  
 P/R Deduction (\$384.00 Bi-Weekly)  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **AXA Financial, Inc.** Occupation **CHAIRMAN & CEO**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date **2112.00**

**C.** Full Name (Last, First, Middle Initial)  
**ROBERT WOODCOCK**  
 Mailing Address **855 ROUTE 146**  
 City **CLIFTON PARK** State **NY** Zip Code **12065-3890**  
 Date of Receipt **05 / 31 / 2009**  
**Transaction ID: PR1018417721922**  
 Amount of Each Receipt this Period **80.00**  
 P/R Deduction (\$80.00 Monthly)  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **AXA Advisors, LLC** Occupation **Branch Manager**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date **400.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **614.00**  
**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 14 / 35 |
|   | <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)**

|   |  |  |
|---|--|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br><b>CHRISTOPHER NOONAN</b>         | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>12377 MERIT DRIVE<br/>SUITE 1500</b>                      | <b>Transaction ID: PR1018418321922</b>                     |
|   | City <b>DALLAS</b> State <b>TX</b> Zip Code <b>75251-2224</b>                | Amount of Each Receipt this Period<br><b>100.00</b>        |
|   | FEC ID number of contributing federal political committee. <b>C</b>          | P/R Deduction (\$100.00 Monthly)                           |
|   | Name of Employer <b>AXA Advisors, LLC</b> Occupation <b>District Manager</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>500.00</b>                                    |  |

|   |   |  |
|---|---|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br><b>WAYNE DIX</b>                   | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>1290 Ave. of the Americas</b>                              | <b>Transaction ID: PR1018421121922</b>                     |
|   | City <b>New York</b> State <b>NY</b> Zip Code <b>10104-0101</b>               | Amount of Each Receipt this Period<br><b>70.00</b>         |
|   | FEC ID number of contributing federal political committee. <b>C</b>           | P/R Deduction (\$70.00 Bi-Weekly)                          |
|   | Name of Employer <b>AXA Advisors</b> Occupation <b>SVP - SERVICE DELIVERY</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>385.00</b>                                     |  |

|   |  |  |
|---|--|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br><b>JEFFREY GREEN</b>          | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>4251 Crums Mill Road</b>                              | <b>Transaction ID: PR1745984521922</b>                     |
|   | City <b>Harrisburg</b> State <b>PA</b> Zip Code <b>17112-2824</b>        | Amount of Each Receipt this Period<br><b>330.00</b>        |
|   | FEC ID number of contributing federal political committee. <b>C</b>      | P/R Deduction (\$330.00 Bi-Weekly)                         |
|   | Name of Employer <b>AXA Advisors</b> Occupation <b>SVP - AXA NETWORK</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>1815.00</b>                               |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>500.00</b> |
| <b>TOTAL</b> 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 15 / 35 |
|   | <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)**

|   |   |  |
|---|---|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br><b>ANTHONY SAGES</b>                           | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>1290 Avenue of the Americas</b>  | <b>Transaction ID: PR1745984721922</b>                     |
|   | City <b>New York</b> State <b>NY</b> Zip Code <b>10104-0101</b>                           | Amount of Each Receipt this Period<br><b>50.00</b>         |
|   | FEC ID number of contributing federal political committee. <b>C</b>                       | P/R Deduction (\$50.00 Monthly)                            |
|   | Name of Employer <b>AXA Advisors, LLC</b> Occupation <b>President, Northeast Division</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>250.00</b>   |  |

|   |  |  |
|---|--|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br><b>ROBERT SANSONE</b>               | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>100 Madison Street 8th fl</b>                               | <b>Transaction ID: PR1746094421922</b>                     |
|   | City <b>Syracuse</b> State <b>NY</b> Zip Code <b>13202-2723</b>                | Amount of Each Receipt this Period<br><b>80.00</b>         |
|   | FEC ID number of contributing federal political committee. <b>C</b>            | P/R Deduction (\$80.00 Monthly)                            |
|   | Name of Employer <b>AXA Advisors, LLC</b> Occupation <b>Executive Director</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>400.00</b>                                      |  |

|   |   |  |
|---|---|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br><b>RICHARD DZIADZIO</b>          | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>1290 Avenue of the Americas</b>                          | <b>Transaction ID: PR1774717321922</b>                     |
|   | City <b>New York</b> State <b>NY</b> Zip Code <b>10104-0101</b>             | Amount of Each Receipt this Period<br><b>200.00</b>        |
|   | FEC ID number of contributing federal political committee. <b>C</b>         | P/R Deduction (\$200.00 Bi-Weekly)                         |
|   | Name of Employer <b>AXA Financial, Inc.</b> Occupation <b>EVP &amp; CFO</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>1100.00</b>                                  |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>330.00</b> |
| <b>TOTAL</b> 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 16 / 35                 |
|   | <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)  
**BARBARA GOODSTEIN**

Mailing Address **1290 Avenue of the Americas**

City **New York** State **NY** Zip Code **10104-0101**

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

Name of Employer **AXA Financial, Inc.** Occupation **EVP - CHIEF MARKETING & INNOVATION OFF**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt **05 / 31 / 2009**

**Transaction ID: PR1904689221922**

Amount of Each Receipt this Period **150.00**

P/R Deduction (\$150.00 Bi-Weekly)

**B.** Full Name (Last, First, Middle Initial)  
**KEVIN MURRAY**

Mailing Address **1290 Avenue of the Americas**

City **New York** State **NY** Zip Code **10104-0101**

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

Name of Employer **AXA Financial, Inc.** Occupation **EVP & CHIEF INFORMATION OFFICER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **825.00**

Date of Receipt **05 / 31 / 2009**

**Transaction ID: PR1904689321922**

Amount of Each Receipt this Period **150.00**

P/R Deduction (\$150.00 Bi-Weekly)

**C.** Full Name (Last, First, Middle Initial)  
**GEORGE PAPAZICOS**

Mailing Address **1290 AVENUE OF THE AMERICAS**

City **NEW YORK** State **NY** Zip Code **10104-0101**

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

Name of Employer **AXA Financial, Inc.** Occupation **SVP - TAX PLANNING**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **05 / 31 / 2009**

**Transaction ID: PR1907711321922**

Amount of Each Receipt this Period **40.00**

P/R Deduction (\$40.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **340.00**

**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 17 / 35                 |
|   | <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)**

|   |   |  |  |
|---|---|--|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>KENNETH BARNETT II       |  | Date of Receipt  |
|   | Mailing Address 6455 Shiloh Rd.<br>STE D                            |  | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>0 5 / 3 1 / 2 0 0 9 |
|   | City  | State                                      | Zip Code   |
|   | Alpharetta  | GA   | 30005-8353   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |  | <b>Transaction ID:</b> PR1907711421922   |
| Name of Employer<br>AXA Advisors  |   | Occupation<br>AVP--ADVISORS LEARNING GROUP | Amount of Each Receipt this Period   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>385.00         | <input type="text"/><br>70.00  |
|   |   |  | P/R Deduction (\$70.00 Bi-Weekly)  |

|   |   |                                      |  |
|---|---|--------------------------------------|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>SUSAN LAVALLEE           |                                      | Date of Receipt  |
|   | Mailing Address 100 MADISON STREET                                  |                                      | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>0 5 / 3 1 / 2 0 0 9 |
|   | City  | State                                | Zip Code   |
|   | SYRACUSE  | NY                                   | 13202-2723   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                                      | <b>Transaction ID:</b> PR1907711521922   |
| Name of Employer<br>AXA Financial, Inc.   |   | Occupation<br>SVP - SERVICE DELIVERY | Amount of Each Receipt this Period   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>385.00   | <input type="text"/><br>70.00  |
|   |   |                                      | P/R Deduction (\$70.00 Bi-Weekly)  |

|   |   |  |  |
|---|---|--|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>ANTOINE NAJJAR           |  | Date of Receipt  |
|   | Mailing Address 525 WASHINGTON BOULEVARD                            |  | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>0 5 / 3 1 / 2 0 0 9 |
|   | City  | State                                      | Zip Code   |
|   | JERSEY CITY   | NJ   | 07310-1606   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |  | <b>Transaction ID:</b> PR1908082821922   |
| Name of Employer<br>AXA Financial, Inc.   |   | Occupation<br>MANAGING DIRECTOR - AXA TECH | Amount of Each Receipt this Period   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>385.00         | <input type="text"/><br>70.00  |
|   |   |  | P/R Deduction (\$70.00 Bi-Weekly)  |

|  |                                       |
|--|---------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text"/><br><b>210.00</b> |
| <b>TOTAL</b> 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: PAGE 18 / 35  
(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 |

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)  
GARY HIRSCHKRON

Mailing Address 1290 Avenue of the Americas

City State Zip Code  
New York NY 10104-0101

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 ▼ 825.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** PR1908083321922

Amount of Each Receipt this Period  
150.00

P/R Deduction (\$150.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
W. ALLEN JOHNSON

Mailing Address 3348 Peachtree Rd NE  
Bldg 200 Suite 860

City State Zip Code  
Atlanta GA 30326-1032

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

Name of Employer AXA Advisors Occupation VP-ADVANTAGE GROUP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** PR1909067921922

Amount of Each Receipt this Period  
40.00

P/R Deduction (\$40.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
WINDY LAWRENCE

Mailing Address 1290 Avenue of the Americas

City State Zip Code  
New York NY 10104-0101

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

Name of Employer AXA Financial, Inc. Occupation VP & COUNSEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2009

**Transaction ID:** PR1914008721922

Amount of Each Receipt this Period  
40.00

P/R Deduction (\$40.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **230.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|   |   |              |
|---|---|--------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)   | PAGE 19 / 35 |
|   | <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)**

|   |   |   |
|---|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>ROBERT BJORNSTI          | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|   | Mailing Address 1290 Avenue of the Americas                         | <b>Transaction ID:</b> PR1914009321922              |
|   | City State Zip Code<br>New York NY 10104-0101                       | Amount of Each Receipt this Period<br>40.00         |
|   | FEC ID number of contributing federal political committee. <b>C</b> |   |
| Name of Employer<br>AXA Financial, Inc.   | Occupation<br>VP - LAW  |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>220.00                                  | P/R Deduction (\$40.00 Bi-Weekly)                   |

|   |   |   |
|---|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>JAMES MULLERY            | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|   | Mailing Address 1290 Avenue of the Americas                         | <b>Transaction ID:</b> PR1916397521922              |
|   | City State Zip Code<br>New York NY 10104-0101                       | Amount of Each Receipt this Period<br>70.00         |
|   | FEC ID number of contributing federal political committee. <b>C</b> |   |
| Name of Employer<br>AXA Advisors  | Occupation<br>SENIOR VICE PRESIDENT - ANNUITY                       |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>385.00                                  | P/R Deduction (\$70.00 Bi-Weekly)                   |

|   |   |   |
|---|---|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>KEVIN MOLLOY             | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|   | Mailing Address 1290 Avenue of the Americas                         | <b>Transaction ID:</b> PR1916440721922              |
|   | City State Zip Code<br>New York NY 10104-0101                       | Amount of Each Receipt this Period<br>70.00         |
|   | FEC ID number of contributing federal political committee. <b>C</b> |   |
| Name of Employer<br>AXA Financial, Inc.   | Occupation<br>SVP - DISTRIBUTION FINANCE                            |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>385.00                                  | P/R Deduction (\$70.00 Bi-Weekly)                   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>180.00</b> |
| <b>TOTAL</b> 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 20 / 35                 |
|   | <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)  
**MICHAEL MCCARTHY**  
 Mailing Address **6 Ayer Court**  
 City **West Chester** State **PA** Zip Code **19382-6793**  
 Date of Receipt **05 / 31 / 2009**  
**Transaction ID: PR1919303921922**  
 Amount of Each Receipt this Period **70.00**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **AXA Distributors, LLC** Occupation **SVP--NATIONAL SALES MANAGER**  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **385.00**  
 P/R Deduction (\$70.00 Bi-Weekly)

**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 **05 / 31 / 2009**  
**Transaction ID: PR1923670621922**  
 Amount of Each Receipt this Period **165.00**  
 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 **825.00**  
 P/R Deduction (\$165.00 Monthly)

**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 **05 / 31 / 2009**  
**Transaction ID: PR1926422621922**  
 Amount of Each Receipt this Period **165.00**  
 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 **825.00**  
 P/R Deduction (\$165.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... **400.00**  
**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 21 / 35 |
|   | <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)

|   |  |   |   |
|---|--|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>DROR NIR        |   | Date of Receipt   |
|   | Mailing Address 1633 Broadway                              |   | <input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2009"/> |
|   | City   | State   | Zip Code  |
|   | New York   | NY  | 10019-6708  |
|   | FEC ID number of contributing federal political committee. |   | <input type="text" value="C"/>  |
| Name of Employer<br>AXA Advisors, LLC   |  | Occupation<br>EVP---NY Metro                                    | <b>Transaction ID:</b> PR1926422821922  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><input type="text" value="825.00"/> | Amount of Each Receipt this Period<br><input type="text" value="165.00"/>                             |
|   |  |   | P/R Deduction (\$165.00 Monthly)  |

|   |  |   |   |
|---|--|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>RYAN BECK       |   | Date of Receipt   |
|   | Mailing Address 2825 E. Cottonwood Pkwy Suite 430          |   | <input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2009"/> |
|   | City   | State   | Zip Code  |
|   | Salt Lake City   | UT  | 84121-7055  |
|   | FEC ID number of contributing federal political committee. |   | <input type="text" value="C"/>  |
| Name of Employer<br>AXA Advisors  |  | Occupation<br>EVP---BM Salt Lake City                           | <b>Transaction ID:</b> PR1926905221922  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><input type="text" value="825.00"/> | Amount of Each Receipt this Period<br><input type="text" value="165.00"/>                             |
|   |  |   | P/R Deduction (\$165.00 Monthly)  |

|   |  |   |   |
|---|--|---|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>TIMOTHY MACKIE  |   | Date of Receipt   |
|   | Mailing Address 5435 Corporate Drive Suite 100             |   | <input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2009"/> |
|   | City   | State   | Zip Code  |
|   | Troy   | MI  | 48098-2608  |
|   | FEC ID number of contributing federal political committee. |   | <input type="text" value="C"/>  |
| Name of Employer<br>AXA Advisors  |  | Occupation<br>EVP--BM Great Lakes Branch                        | <b>Transaction ID:</b> PR1926905321922  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br><input type="text" value="500.00"/> | Amount of Each Receipt this Period<br><input type="text" value="100.00"/>                             |
|   |  |   | P/R Deduction (\$100.00 Monthly)  |

|  |                                     |
|--|-------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text" value="430.00"/> |
| <b>TOTAL</b> 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 22 / 35                 |
|   | <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)**

|   |   |  |
|---|---|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br><b>JAMES MELLIN</b>              | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>111 E. Kilbourn St<br/>Suite 800</b>                     | <b>Transaction ID: PR1928263321922</b>                     |
|   | City <b>Milwaukee</b> State <b>WI</b> Zip Code <b>53202-6633</b>            | Amount of Each Receipt this Period<br><b>165.00</b>        |
|   | FEC ID number of contributing federal political committee. <b>C</b>         | P/R Deduction (\$165.00 Monthly)                           |
|   | Name of Employer <b>AXA Advisors</b> Occupation <b>EVP Wisconsin Branch</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>825.00</b>                                   |  |

|   |  |  |
|---|--|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br><b>NELIDA GARCIA</b>  | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>1290 Avenue of the Americas</b>   | <b>Transaction ID: PR1928263821922</b>                     |
|   | City <b>New York</b> State <b>NY</b> Zip Code <b>10104-0101</b>  | Amount of Each Receipt this Period<br><b>40.00</b>         |
|   | FEC ID number of contributing federal political committee. <b>C</b>                                      | P/R Deduction (\$40.00 Bi-Weekly)                          |
|   | Name of Employer <b>AXA Financial, Inc.</b> Occupation <b>SVP - CORPORATE SOURCING &amp; PROCUREMENT</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>220.00</b>  |  |

|   |  |  |
|---|--|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br><b>MICHAEL LUCEY</b>            | Date of Receipt<br>MM / DD / YYYY<br><b>05 / 31 / 2009</b> |
|   | Mailing Address <b>325 Essjay Street<br/>Suite 308</b>                     | <b>Transaction ID: PR1930937521922</b>                     |
|   | City <b>Williamsville</b> State <b>NY</b> Zip Code <b>14221-8243</b>       | Amount of Each Receipt this Period<br><b>50.00</b>         |
|   | FEC ID number of contributing federal political committee. <b>C</b>        | P/R Deduction (\$50.00 Monthly)                            |
|   | Name of Employer <b>AXA Advisors</b> Occupation <b>VP---Buffalo Branch</b> |  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><b>250.00</b>                                  |  |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>255.00</b> |
| <b>TOTAL</b> 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 23 / 35 |
|   | <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)

|           |   |                                   |   |
|-----------|---|-----------------------------------|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>L JAY COLE               |                                   | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|           | Mailing Address 3161 W. White Oaks Drive<br>Suite 102               |                                   | <b>Transaction ID:</b> PR1930937921922              |
|           | City Springfield  | State IL                          | Zip Code 62704-7406                                 |
|           | FEC ID number of contributing federal political committee. <b>C</b> |                                   | Amount of Each Receipt this Period<br>60.00         |
|           | Name of Employer AXA Advisors                                       | Occupation EVP---Midwest Division | P/R Deduction (\$60.00 Monthly)                     |

|   |                                    |
|---|------------------------------------|
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>300.00 |
|---|------------------------------------|

|           |   |                                  |   |
|-----------|---|----------------------------------|---|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>JOSEPH DI MORA           |                                  | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|           | Mailing Address 120 Madison Street                                  |                                  | <b>Transaction ID:</b> PR1937997221922              |
|           | City Syracuse   | State NY                         | Zip Code 13202-2821                                 |
|           | FEC ID number of contributing federal political committee. <b>C</b> |                                  | Amount of Each Receipt this Period<br>165.00        |
|           | Name of Employer AXA Advisors                                       | Occupation EVP---Syracuse Branch | P/R Deduction (\$165.00 Monthly)                    |

|   |                                    |
|---|------------------------------------|
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>825.00 |
|---|------------------------------------|

|           |   |                                     |   |
|-----------|---|-------------------------------------|---|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>DONALD SMITH             |                                     | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|           | Mailing Address 1555 Poydras Street<br>Suite 2000                   |                                     | <b>Transaction ID:</b> PR1938536421922              |
|           | City New Orleans  | State LA                            | Zip Code 70112-3701                                 |
|           | FEC ID number of contributing federal political committee. <b>C</b> |                                     | Amount of Each Receipt this Period<br>80.00         |
|           | Name of Employer AXA Advisors                                       | Occupation EVP - NEW ORLEANS BRANCH | P/R Deduction (\$144.19 Monthly)                    |

|   |                                    |
|---|------------------------------------|
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>400.00 |
|---|------------------------------------|

|  |   |        |
|--|---|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | ▶ | 305.00 |
| <b>TOTAL</b> This Period (last page this line number only) ..... | ▶ |        |

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 24 / 35                 |
|   | <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)  
M. KATHLEEN ADAMSON

Mailing Address 10840 BALLANTYNE PKWY

City State Zip Code  
CHARLOTTE NC 28277

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

Name of Employer AXA Financial, Inc. Occupation SVP - CHARLOTTE OPERATIONS CENTER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

**Transaction ID:** PR2091717421922

Amount of Each Receipt this Period 70.00

P/R Deduction (\$70.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
KIRBY NOEL

Mailing Address 413 Autumn Lake Trail

City State Zip Code  
Franklin TN 37067-2693

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

Name of Employer AXA Distributors, LLC Occupation SVP---NATIONAL SALES MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

**Transaction ID:** PR2126790821922

Amount of Each Receipt this Period 70.00

P/R Deduction (\$70.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
NICK LANE

Mailing Address 1290 Avenue of the Americas

City State Zip Code  
New York NY 10104-0101

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

Name of Employer AXA Financial, Inc. Occupation SVP - AXA ADVISORS BUSINESS PLATFORMS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

**Transaction ID:** PR2148756021922

Amount of Each Receipt this Period 70.00

P/R Deduction (\$35.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **210.00**

**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 25 / 35 |
|   | <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)  
**PATRICK WALSH**

Mailing Address **5 Revere Drive Suite 400**

City **Northbrook** State **IL** Zip Code **60062-1566**

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

Name of Employer **AXA Advisors, LLC** Occupation **VP--Chicago Branch**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 31 / 2009**

**Transaction ID: PR2163331421922**

Amount of Each Receipt this Period **50.00**

P/R Deduction (\$50.00 Monthly)

**B.** Full Name (Last, First, Middle Initial)  
**GEORGETTE GELLER**

Mailing Address **1266 East Main Street**

City **Stamford** State **CT** Zip Code **06902-3529**

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

Name of Employer **AXA Advisors** Occupation **EVP--Branch Mgr--Conn**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **05 / 31 / 2009**

**Transaction ID: PR2164789921922**

Amount of Each Receipt this Period **80.00**

P/R Deduction (\$80.00 Monthly)

**C.** Full Name (Last, First, Middle Initial)  
**BRENT ROPER**

Mailing Address **5005 LBJ Freeway Suite 900**

City **Dallas** State **TX** Zip Code **75244-6100**

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

Name of Employer **AXA Advisors, LLC** Occupation **Executive Director--Advantage Group**

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt **05 / 31 / 2009**

**Transaction ID: PR2164790021922**

Amount of Each Receipt this Period **50.00**

P/R Deduction (\$50.00 Monthly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **180.00**

**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 26 / 35  
(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)  
MARIAN SOLE

Mailing Address 89 SCOTT SWAMP ROAD

City State Zip Code  
FARMINGTON CT 06032-2805

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

Name of Employer AXA Partners Occupation SVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

**Transaction ID:** PR2170750521922

Amount of Each Receipt this Period 70.00

P/R Deduction (\$70.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
TIMOTHY MAGUIRE

Mailing Address 40 Monument road

City State Zip Code  
Bala Cynwyd PA 19004-1737

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

Name of Employer AXA Advisors Occupation EVP---Northeast Division

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

**Transaction ID:** PR2170755621922

Amount of Each Receipt this Period 80.00

P/R Deduction (\$80.00 Monthly)

**C.**

Full Name (Last, First, Middle Initial)  
MICHEL PERRIN

Mailing Address 1290 Avenue of the Americas

City State Zip Code  
New York NY 10104-0101

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

Name of Employer AXA Financial, Inc. Occupation SVP & ACTUARY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

**Transaction ID:** PR2176757621922

Amount of Each Receipt this Period 70.00

P/R Deduction (\$70.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **220.00**

**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 27 / 35                 |
|   | <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)**

|   |  |                                   |   |
|---|--|-----------------------------------|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>PETER GOLDEN                |                                   | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|   | Mailing Address 1290 Avenue of the Americas                            |                                   | <b>Transaction ID:</b> PR2176757721922              |
|   | City<br>New York   | State<br>NY                       | Zip Code<br>10104-0101                              |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |                                   | Amount of Each Receipt this Period<br>330.00        |
|   | Name of Employer<br>AXA Distributors, LLC                              | Occupation<br>Divisional VP - ADL | P/R Deduction (\$330.00 Bi-Weekly)                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1815.00                                    |                                   |   |

|   |  |                                |   |
|---|--|--------------------------------|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>ADAM BRUNNER                |                                | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|   | Mailing Address 325 Essjay Road<br>Siute 308                           |                                | <b>Transaction ID:</b> PR2176757921922              |
|   | City<br>Williamsville  | State<br>NY                    | Zip Code<br>14221-8243                              |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |                                | Amount of Each Receipt this Period<br>50.00         |
|   | Name of Employer<br>AXA Advisors                                       | Occupation<br>AVP---DM Buffalo | P/R Deduction (\$50.00 Monthly)                     |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>250.00                                     |                                |   |

|   |  |  |   |
|---|--|--|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>WALTER SMALL                |  | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|   | Mailing Address 405 Lake Valley Drive                                  |  | <b>Transaction ID:</b> PR2179363021922              |
|   | City<br>Franklin   | State<br>TN                                    | Zip Code<br>37069-4662                              |
|   | FEC ID number of contributing federal political committee.<br><b>C</b> |  | Amount of Each Receipt this Period<br>330.00        |
|   | Name of Employer<br>AXA Distributors, LLC                              | Occupation<br>Divisional VP - AXA Distributors | P/R Deduction (\$330.00 Bi-Weekly)                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>1815.00                                    |  |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>710.00</b> |
| <b>TOTAL</b> 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 28 / 35                 |
|   | <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)**

|           |  |   |
|-----------|--|---|
| <b>A.</b> | Full Name (Last, First, Middle Initial)<br>WILLIAM MILLER JR., JR.   | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|           | Mailing Address 1290 Avenue of the Americas  | <b>Transaction ID:</b> PR2179561921922              |
|           | City State Zip Code<br>New York NY 10104-0101  | Amount of Each Receipt this Period<br>70.00         |
|           | FEC ID number of contributing federal political committee. <b>C</b>  | P/R Deduction (\$70.00 Bi-Weekly)                   |
|           | Name of Employer: AXA Distributors, llc<br>Occupation: SVP--Chief Sales Officer<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>385.00 |   |

|           |   |   |
|-----------|---|---|
| <b>B.</b> | Full Name (Last, First, Middle Initial)<br>KAREN BAIN   | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|           | Mailing Address 1290 Avenue of the Americas   | <b>Transaction ID:</b> PR2180751721922              |
|           | City State Zip Code<br>New York NY 10104-0101   | Amount of Each Receipt this Period<br>40.00         |
|           | FEC ID number of contributing federal political committee. <b>C</b>   | P/R Deduction (\$40.00 Bi-Weekly)                   |
|           | Name of Employer: AXA Financial, Inc.<br>Occupation: VP - TAX PLANNING<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>220.00 |   |

|           |  |   |
|-----------|--|---|
| <b>C.</b> | Full Name (Last, First, Middle Initial)<br>MITCHELL WATERS JR, JR.   | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|           | Mailing Address 1290 Avenue of the Americas  | <b>Transaction ID:</b> PR2228713121922              |
|           | City State Zip Code<br>New York NY 10104-0012  | Amount of Each Receipt this Period<br>35.00         |
|           | FEC ID number of contributing federal political committee. <b>C</b>  | P/R Deduction (\$70.00 Bi-Weekly)                   |
|           | Name of Employer: AXA Distributors, LLC<br>Occupation: SVP - National Sales Manager<br>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼<br>Aggregate Year-to-Date ▼<br>350.00 |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>145.00</b> |
| <b>TOTAL</b> 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 29 / 35 |
|   | <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)

|   |  |   |
|---|--|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>WILLIAM MCDERMOTT               | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|   | Mailing Address 1290 Avenue of the Americas                                | <b>Transaction ID:</b> PR2228715221922              |
|   | City State Zip Code<br>New York NY 10104-0012                              | Amount of Each Receipt this Period<br>150.00        |
|   | FEC ID number of contributing federal political committee.<br>C            | P/R Deduction (\$150.00 Bi-Weekly)                  |
|   | Name of Employer AXA Financial, Inc. Occupation<br>EVP - CORPORATE MARKETS |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>825.00   |   |

|   |   |   |
|---|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>MICHAEL GREGG                          | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|   | Mailing Address 1290 AVENUE OF THE AMERICAS                                       | <b>Transaction ID:</b> PR2244556121922              |
|   | City State Zip Code<br>NEW YORK NY 10104-0101                                     | Amount of Each Receipt this Period<br>70.00         |
|   | FEC ID number of contributing federal political committee.<br>C                   | P/R Deduction (\$70.00 Bi-Weekly)                   |
|   | Name of Employer AXA Distributors, LLC Occupation<br>SVP - WHOLESALE DISTRIBUTION |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>385.00  |   |

|   |  |   |
|---|--|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>JOANNE PIETRINI-SMITH     | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|   | Mailing Address 1290 AVENUE OF THE AMERICAS                          | <b>Transaction ID:</b> PR2245177321922              |
|   | City State Zip Code<br>NEW YORK NY 10104-0101                        | Amount of Each Receipt this Period<br>70.00         |
|   | FEC ID number of contributing federal political committee.<br>C      | P/R Deduction (\$70.00 Bi-Weekly)                   |
|   | Name of Employer AXA Partners Occupation<br>SVP & COO - AXA PARTNERS |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>385.00                                   |   |

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | 290.00 |
| <b>TOTAL</b> 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 30 / 35                 |
|   | <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)

|   |   |   |
|---|---|---|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>JEFFREY COOMES           | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|   | Mailing Address 1290 AVENUE OF THE AMERICAS                         | <b>Transaction ID:</b> PR2245275321922              |
|   | City State Zip Code<br>NEW YORK NY 10104-0101                       | Amount of Each Receipt this Period<br>70.00         |
|   | FEC ID number of contributing federal political committee. <b>C</b> | P/R Deduction (\$70.00 Bi-Weekly)                   |
| Name of Employer<br>AXA Distributors, INC.  | Occupation<br>VP - WEB CONTENT STRATEGY                             |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>385.00                                  |   |

|   |   |   |
|---|---|---|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>M MICHAEL ROONEY         | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|   | Mailing Address 11845 W. OLYMPIC #1100                              | <b>Transaction ID:</b> PR2246778221922              |
|   | City State Zip Code<br>LOS ANGELES CA 90064-1149                    | Amount of Each Receipt this Period<br>165.00        |
|   | FEC ID number of contributing federal political committee. <b>C</b> | P/R Deduction (\$165.00 Monthly)                    |
| Name of Employer<br>AXA Advisors, LLC   | Occupation<br>EVP - LOS ANGELES MARKETING CENTER                    |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>825.00                                  |   |

|   |   |   |
|---|---|---|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>DILLAN MICUS             | Date of Receipt<br>MM / DD / YYYY<br>05 / 31 / 2009 |
|   | Mailing Address 14851 N. Scottsdale Rd Suite 103                    | <b>Transaction ID:</b> PR2247853621922              |
|   | City State Zip Code<br>Scottsdale AZ 85254-2790                     | Amount of Each Receipt this Period<br>165.00        |
|   | FEC ID number of contributing federal political committee. <b>C</b> | P/R Deduction (\$165.00 Monthly)                    |
| Name of Employer<br>AXA Advisors, LLC   | Occupation<br>EVP--Scottsdale AZ                                    |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>825.00                                  |   |

|  |               |
|--|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>400.00</b> |
| <b>TOTAL</b> 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 31 / 35 |
|   | <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)

|   |   |                                    |  |
|---|---|------------------------------------|--|
| <b>A.</b>   | Full Name (Last, First, Middle Initial)<br>RICHARD FRASER           |                                    | Date of Receipt  |
|   | Mailing Address 100 MADISON ST                                      |                                    | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>0 5 / 3 1 / 2 0 0 9 |
|   | City  | State                              | Zip Code   |
|   | SYRACUSE  | NY                                 | 13202-2723   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |                                    | <b>Transaction ID:</b> PR2258541521922   |
| Name of Employer<br>AXA Financial, Inc.   |   | Occupation<br>IO - IT              | Amount of Each Receipt this Period   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>220.00 | <input type="text"/><br>40.00  |
|   |   |                                    | P/R Deduction (\$40.00 Bi-Weekly)  |

|   |   |  |  |
|---|---|--|--|
| <b>B.</b>   | Full Name (Last, First, Middle Initial)<br>PETER ROSCHKE            |  | Date of Receipt  |
|   | Mailing Address 525 WASHINGTON BOULEVARD                            |  | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>0 5 / 3 1 / 2 0 0 9 |
|   | City  | State  | Zip Code   |
|   | JERSEY CITY   | NJ   | 07310-1606   |
|   | FEC ID number of contributing federal political committee. <b>C</b> |  | <b>Transaction ID:</b> PR2258558221922   |
| Name of Employer<br>AXA Financial, Inc.   |   | Occupation<br>SOLUTIONS DELIVERY DIRECTOR-IT | Amount of Each Receipt this Period   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |   | Aggregate Year-to-Date ▼<br>220.00           | <input type="text"/><br>40.00  |
|   |   |  | P/R Deduction (\$40.00 Bi-Weekly)  |

|   |  |                                       |  |
|---|--|---------------------------------------|--|
| <b>C.</b>   | Full Name (Last, First, Middle Initial)<br>SUZANNE VAN STAVEREN-ANGHELUSIU |                                       | Date of Receipt  |
|   | Mailing Address 1290 AVENUE OF THE AMERICAS                                |                                       | <input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y<br>0 5 / 3 1 / 2 0 0 9 |
|   | City   | State                                 | Zip Code   |
|   | NEW YORK   | NY                                    | 10104-0101   |
|   | FEC ID number of contributing federal political committee. <b>C</b>        |                                       | <b>Transaction ID:</b> PR2258558321922   |
| Name of Employer<br>AXA Financial, Inc.   |  | Occupation<br>SVP - CORPORATE MARKETS | Amount of Each Receipt this Period   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  | Aggregate Year-to-Date ▼<br>285.00    | <input type="text"/><br>70.00  |
|   |  |                                       | P/R Deduction (\$70.00 Bi-Weekly)  |

|  |                                |
|--|--------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <input type="text"/><br>150.00 |
| <b>TOTAL</b> 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: PAGE 32 / 35  
(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)  
MICHAEL PETERS

Mailing Address 325 ESSJAY ROAD  
SUITE 308

City State Zip Code  
WILLIAMSVILLE NY 14221-8243

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

Name of Employer AXA Advisors, LLC Occupation VP - BUFFALO NY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

**Transaction ID:** PR2260148621922

Amount of Each Receipt this Period 50.00

P/R Deduction (\$50.00 Monthly)

**B.**

Full Name (Last, First, Middle Initial)  
JANET ELIE

Mailing Address 80 SCOTT SWAMP ROAD

City State Zip Code  
FARMINGTON CT 06032-2847

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

Name of Employer AXA Distributors, LLC Occupation RVP - ADL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1815.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

**Transaction ID:** PR2263126121922

Amount of Each Receipt this Period 330.00

P/R Deduction (\$330.00 Bi-Weekly)

**C.**

Full Name (Last, First, Middle Initial)  
CHRISTOPHER WINANS

Mailing Address 1290 AVENUE OF THE AMERICAS

City State Zip Code  
NEW YORK NY 10104-0101

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

Name of Employer AXA Financial, Inc. Occupation SVP - EXTERNAL AFFAIRS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 385.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 9

**Transaction ID:** PR2364190921922

Amount of Each Receipt this Period 70.00

P/R Deduction (\$70.00 Bi-Weekly)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 450.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

|   |                              |                              |
|---|------------------------------|------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:             | PAGE 33 / 35                 |
|   | (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)  
**MARY FERNALD**

Mailing Address **10840 BALLANTYNE COMMONS PARKWAY**

City **CHARLOTTE** State **NC** Zip Code **28277-2492**

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

Name of Employer **AXA Financial, Inc.** Occupation **SVP - CHIEF UNDERWRITING OFFICER**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **385.00**

Date of Receipt **05 / 31 / 2009**

**Transaction ID: PR2369237021922**

Amount of Each Receipt this Period **70.00**

P/R Deduction (\$70.00 Bi-Weekly)

**B.**

Full Name (Last, First, Middle Initial)  
**STEVEN QUACKENBUSH**

Mailing Address **1290 AVENUE OF THE AMERICAS**

City **NEW YORK** State **NY** Zip Code **10104-0101**

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

Name of Employer **AXA Financial, Inc.** Occupation **SVP - CORPORATE MARKETS**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **05 / 31 / 2009**

**Transaction ID: PR2380030021922**

Amount of Each Receipt this Period **70.00**

P/R Deduction (\$70.00 Bi-Weekly)

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional) .....           | <b>140.00</b>  |
| <b>TOTAL</b> This Period (last page this line number only) ..... | <b>8320.25</b> |

**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 34 / 35

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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)

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

A.

Full Name (Last, First, Middle Initial)

Friends Of Maria

Mailing Address PO Box 12740

City State Zip Code  
Seattle WA 98111

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
Sen. Maria Cantwell

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: WA District:

Transaction ID: 30726756

Date of Disbursement

05 / 19 / 2009

Amount of Each Disbursement this Period

2500.00

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

2500.00

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

2500.00

**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 35 / 35

|                              |   |                              |                              |                             |                              |
|------------------------------|---|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 checked="" 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)

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

A.

Full Name (Last, First, Middle Initial)

PAUL CASTAGNA

Mailing Address 120 MONTGOMERY STREET  
SUITE 120

City State Zip Code  
SAN FRANCISCO CA 94104-4303

Purpose of Disbursement  
Amended Transaction due to FEC Notice - October 21, 2009

Candidate Name

010  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 30766067

Date of Disbursement

05 / 29 / 2009

Amount of Each Disbursement this Period

3469.16

Amended Transaction due  
to FEC Notice - October  
21, 2009

SUBTOTAL of Disbursements This Page (optional) ▶

3469.16

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

3469.16