

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 AXA Equitable Life Insurance Company Political Action Committee (AXA PAC)

ADDRESS (number and street) 1290 Avenue of the Americas New York NY 10104

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 01 / 01 / 2017 through 01 / 31 / 2017

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Andrew, Steven, , Sutter

Type or Print Name of Treasurer

Signature of Treasurer Andrew, Steven, , Sutter [Electronically Filed] Date 02 / 19 / 2017

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

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

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2017"/> | <input type="text" value="95092.46"/> | <input type="text" value="95092.46"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="95092.46"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="17668.00"/> | <input type="text" value="17668.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="112760.46"/> | <input type="text" value="112760.46"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="0.00"/> | <input type="text" value="0.00"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="112760.46"/> | <input type="text" value="112760.46"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="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 PAC)

Report Covering the Period: From: / / To: / /

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 7742.00 | 7742.00 |
| (ii) Unitemized | 9926.00 | 9926.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 17668.00 | 17668.00 |
| (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) | 17668.00 | 17668.00 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 0.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.)..... | 0.00 | 0.00 |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account (from Schedule H3)..... | 0.00 | 0.00 |
| (b) Levin Funds (from Schedule H5) | 0.00 | 0.00 |
| (c) Total Transfers (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)).....▶ | 17668.00 | 17668.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 17668.00 | 17668.00 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated 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..... | 0.00 | 0.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 0.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated 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)) .. | 0.00 | 0.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 0.00 | 0.00 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| III. Net Contributions/ Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 17668.00 | 17668.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 17668.00 | 17668.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 6 OF 13 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. HATTEM, DAVE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1290 Ave. of the Americas
 City New York State NY Zip Code 10104-0101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Financial, Inc. Occupation (for Individual) SR. EXE DIR. & DEP GEN COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 768.00

Date of Receipt **01 / 31 / 2017**
Transaction ID : PR1018390845159
 Amount of Each Receipt this Period 768.00
 Memo Item
 P/R Deduction (\$384.00 Bi-Weekly)

B. KARR, DAVID, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 PLYMOUTH ROAD
 City LOWER GWYNEDD State PA Zip Code 19002-1971
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Advisors, LLC Occupation (for Individual) EVP --BM---Philadelphia
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 768.00

Date of Receipt **01 / 31 / 2017**
Transaction ID : PR1018399645159
 Amount of Each Receipt this Period 768.00
 Memo Item
 P/R Deduction (\$384.00 Bi-Weekly)

C. BEAL, TED, , , Sr
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 333 Thornall Street 8th
 City Edison State NJ Zip Code 08837-2220
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Advisors Occupation (for Individual) EVP Branch Manager
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **01 / 31 / 2017**
Transaction ID : PR1018409045159
 Amount of Each Receipt this Period 300.00
 Memo Item
 P/R Deduction (\$150.00 Bi-Weekly)

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1836.00 |
| 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 7 OF 13 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

A. LAVALLEE, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3010 CHILLINGHAM WAY
 City BALDWINVILLE State NY Zip Code 13027-8458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Financial, Inc. Occupation (for Individual) MD - Employer Sponsor Ops.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt **01 / 31 / 2017**
Transaction ID : PR1907711545159
 Amount of Each Receipt this Period 228.00
 Memo Item
 P/R Deduction (\$114.00 Bi-Weekly)

B. MOLLOY, KEVIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 110 WEST 86TH STREET Apt. 9A
 City New York State NY Zip Code 10024-4060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Financial, Inc. Occupation (for Individual) Head of Employer Sponsored
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **01 / 31 / 2017**
Transaction ID : PR1916440745159
 Amount of Each Receipt this Period 300.00
 Memo Item
 P/R Deduction (\$150.00 Bi-Weekly)

C. NIR, DROR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1633 Broadway
 City New York State NY Zip Code 10019-6708
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Advisors, LLC Occupation (for Individual) EVP---NY Metro
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt **01 / 31 / 2017**
Transaction ID : PR1926422845159
 Amount of Each Receipt this Period 330.00
 Memo Item
 P/R Deduction (\$165.00 Bi-Weekly)

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 858.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 OF 13 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. MELLIN, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5460 NORTH LAKE DRIVE
 City WHITEFISH BAY State WI Zip Code 53217-5374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Advisors Occupation (for Individual) Chief Sales Office HQs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 768.00

Date of Receipt 01 / 31 / 2017
Transaction ID : PR1928263345159
 Amount of Each Receipt this Period 768.00
 Memo Item
 P/R Deduction (\$384.00 Bi-Weekly)

B. DI MORA, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 120 Madison Street
 City Syracuse State NY Zip Code 13202-2821
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Advisors Occupation (for Individual) EVP---Syracuse Branch
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 01 / 31 / 2017
Transaction ID : PR1937997245159
 Amount of Each Receipt this Period 330.00
 Memo Item
 P/R Deduction (\$165.00 Bi-Weekly)

C. MICUS, DILLAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14851 N. Scottsdale Rd Suite 103
 City Scottsdale State AZ Zip Code 85254-2790
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Advisors, LLC Occupation (for Individual) EVP--Scottsdale AZ
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 330.00

Date of Receipt 01 / 31 / 2017
Transaction ID : PR2247853645159
 Amount of Each Receipt this Period 330.00
 Memo Item
 P/R Deduction (\$165.00 Bi-Weekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 1428.00
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 9 OF 13 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

A. BROOKS, KERMIT, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 313 WEST 118TH STREET
 PH G
 City New York State NY Zip Code 10026-1057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Financial, Inc. Occupation (for Individual) ASSOCIATE GENERAL COUNSEL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2017
Transaction ID : PR2463744245159
 Amount of Each Receipt this Period
 228.00
 Memo Item
 P/R Deduction (\$114.00 Bi-Weekly)

B. RAJU, ROBIN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4 BRIGHTON LANE
 City NEW CITY State NY Zip Code 10956-1424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Financial, Inc. Occupation (for Individual) Business CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2017
Transaction ID : PR2463744445159
 Amount of Each Receipt this Period
 228.00
 Memo Item
 P/R Deduction (\$114.00 Bi-Weekly)

C. SOLASH, TODD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 20 PINE ST
 Apt. 2801
 City New York State NY Zip Code 10005-1433
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Financial, Inc. Occupation (for Individual) RETIREMENT SAVINGS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2017
Transaction ID : PR2491845845159
 Amount of Each Receipt this Period
 228.00
 Memo Item
 P/R Deduction (\$114.00 Bi-Weekly)

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 684.00 |
| TOTAL This Period (last page this line number only)..... | |

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

| | | |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 OF 13 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | <input type="checkbox"/> 17 |

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

A. NITZAN, ANDREA, , Andrea,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 68 VALLEY VIEW TERRACE

| | | |
|------------------|-------------|------------------------|
| City MONTVALE | State NJ | Zip Code 07645-1041 |
|------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) AXA Financial | Occupation (for Individual) Executive Vice President - Finance |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01 | | 31 | | 2017 |

Transaction ID : PR2563949445159

Amount of Each Receipt this Period
400.00

Memo Item

P/R Deduction (\$200.00 Bi-Weekly)

B. RECINE, ANTHONY, , Anthony,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4 COOPER PLACE

| | | |
|------------------|-------------|------------------------|
| City Harrison | State NY | Zip Code 10528-1440 |
|------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) AXA Financial, Inc. | Occupation (for Individual) Legal/Compliance |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
228.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01 | | 31 | | 2017 |

Transaction ID : PR2635067445159

Amount of Each Receipt this Period
228.00

Memo Item

P/R Deduction (\$114.00 Bi-Weekly)

C. BROWN, PRISCILLA, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 730 THOMAS ROAD

| | | |
|----------------------|-------------|------------------------|
| City PHILADELPHIA | State PA | Zip Code 19118-4601 |
|----------------------|-------------|------------------------|

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

| | |
|--|------------------------------------|
| Name of Employer (for Individual) AXA Financial, Inc. | Occupation (for Individual) CMO |
|--|------------------------------------|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
640.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 01 | | 31 | | 2017 |

Transaction ID : PR2636331045159

Amount of Each Receipt this Period
640.00

Memo Item

P/R Deduction (\$320.00 Bi-Weekly)

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 1268.00 |
| 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 OF 13 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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

A. AGARWAL, SARAS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 151 CARRIAGE WAY
 City PRINCETON State NJ Zip Code 08540-7320
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Financial, Inc. Occupation (for Individual) Marketing
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2017
Transaction ID : PR2636331145159
 Amount of Each Receipt this Period
 228.00
 Memo Item
 P/R Deduction (\$114.00 Bi-Weekly)

B. KOZLOWSKI, KENNETH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 70 PINES LAKE DRIVE EAST
 City WAYNE State NJ Zip Code 07470-5005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Financial, Inc. Occupation (for Individual) Fund Mgmt Grp.
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2017
Transaction ID : PR26363311445159
 Amount of Each Receipt this Period
 228.00
 Memo Item
 P/R Deduction (\$114.00 Bi-Weekly)

C. RITCHEY, SHARON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address ONE COLUMBUS PLACE
 APT S43E
 City New York State NY Zip Code 10019-8215
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Financial, Inc. Occupation (for Individual) COO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2017
Transaction ID : PR2637608845159
 Amount of Each Receipt this Period
 300.00
 Memo Item
 P/R Deduction (\$300.00 Bi-Weekly)

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 756.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | | |
|---|------------------------------|-----------------------------------|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | PAGE 12 OF 13 |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. O'BOYLE, JAMES, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 22 PETERBUSH DR.
 City MONROE State NY Zip Code 10950-3016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Financial, Inc. Occupation (for Individual) MD - Operations and Technology
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2017
Transaction ID : PR2637724945159
 Amount of Each Receipt this Period
 228.00
 Memo Item
 P/R Deduction (\$114.00 Bi-Weekly)

B. ROSADO, PAMELA, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 45-50 PEARSON STREET APT. 12A
 City LONG ISLAND CITY State NY Zip Code 11101-4374
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Financial, Inc. Occupation (for Individual) Law-Litigation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2017
Transaction ID : PR2642149345159
 Amount of Each Receipt this Period
 228.00
 Memo Item
 P/R Deduction (\$114.00 Bi-Weekly)

C. DIMODUGNO, LOUIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1675 MAIN STREET
 City SOUTH WINDSOR State CT Zip Code 06074-1008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) AXA Financial, Inc. Occupation (for Individual) Data Analytics
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 31 / 2017
Transaction ID : PR2642149445159
 Amount of Each Receipt this Period
 228.00
 Memo Item
 P/R Deduction (\$114.00 Bi-Weekly)

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 684.00 |
| 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 13 OF 13
(check only one)

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

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
KENNEDY, KEVIN, , ,

Mailing Address 1019 BRICK HOUSE FARM LANE

| | | |
|------------------------|-------------|------------------------|
| City NEWTOWN SQUARE | State PA | Zip Code 19073-2783 |
|------------------------|-------------|------------------------|

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

| | |
|--|---|
| Name of Employer (for Individual) AXA Distributors, LLC | Occupation (for Individual) Key Account Management |
|--|---|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
228.00

Date of Receipt
MM / DD / YYYY
01 / 31 / 2017

Transaction ID : PR2642164045159

Amount of Each Receipt this Period
228.00

Memo Item

P/R Deduction (\$114.00 Bi-Weekly)

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

| | | |
|------|-------|----------|
| City | State | Zip Code |
|------|-------|----------|

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

| | |
|-----------------------------------|-----------------------------|
| Name of Employer (for Individual) | Occupation (for Individual) |
|-----------------------------------|-----------------------------|

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 228.00 |
| TOTAL This Period (last page this line number only)..... | 7742.00 |