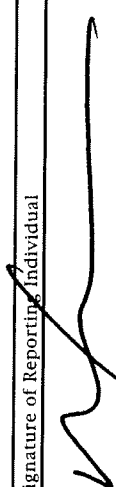

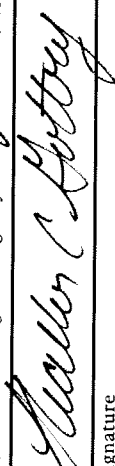


Executive Branch Personnel Public Financial Disclosure Report

Form AP-1, revised:
OMB No. 3209-0001

SF 278 (Rev. 03/2000)
5 C.F.R. Part 2634
U.S. Office of Government Ethics

Date of Appointment, Candidacy Election, or Nomination (Month, Day, Year) 01/20/2009		Reporting Status (Check Appropriate Boxes) <input checked="" type="checkbox"/> Incumbent <input type="checkbox"/> New Entrant, Nominee, or Candidate		Termination Date (If Applicable) (Month, Day, Year)		Termination Filer <input type="checkbox"/>		Fee for Late Filing Any individual who is required to file this report and does so more than 30 days after the date the report is required to be filed, or, if an extension is granted, more than 30 days after the last day of the filing extension period, shall be subject to a \$200 fee.	
Reporting Individual's Name Last Name: Axelrod First Name and Middle Initial: David M		Department or Agency (If Applicable): White House		Telephone No. (Include Area Code): 202-456-1414		Reporting Periods Incumbents: The reporting period is the preceding calendar year except Part II of Schedule C and Part I of Schedule D where you must also include the filing year up to the date you file. Part II of Schedule D is not applicable.		Termination Filers: The reporting period begins at the end of the period covered by your previous filing and ends at the date of termination. Part II of Schedule D is not applicable.	
Position for Which Filing Title of Position: Assistant to the President and Senior Advisor		Address (Number, Street, City, State, and ZIP Code): 1600 Pennsylvania Ave., NW, Washington, D.C. 20500		Title of Position(s) and Date(s) Held:		Nominees, New Entrants and Candidates for President and Vice President: Schedule A--The reporting period for income (BLOCK C) is the preceding calendar year and the current calendar year up to the date of filing. Value assets as of any date you choose that is within 31 days of the date of filing.		Schedule B--Not applicable.	
Location of Present Office (or forwarding address)		Name of Congressional Committee Considering Nomination:		Do You Intend to Create a Qualified Diversified Trust? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Schedule C, Part I (Liabilities)-- The reporting period is the preceding calendar year and the current calendar year up to any date you choose that is within 31 days of the date of filing.		Schedule C, Part II (Agreements or Arrangements)-- Show any agreements or arrangements as of the date of filing.	
Presidential Nominees Subject to Senate Confirmation		Signature of Reporting Individual: 		Date (Month, Day, Year): 5/14/10		Schedule D-- The reporting period is the preceding two calendar years and the current calendar year up to the date of filing.		Agency Use Only 5/17/10	
Other Review (If desired by agency)		Signature of Other Reviewer: 		Date (Month, Day, Year): 6/11/10		OGE Use Only			
Agency Ethics Official's Opinion On the basis of information contained in this report, I conclude that the filer is in compliance with applicable laws and regulations (subject to any comments in the box below).		Signature of Designated Agency Ethics Official/Reviewing Official: 		Date (Month, Day, Year): 6-13-10					
Office of Government Ethics Use Only		Signature:		Date (Month, Day, Year):					
Comments of Reviewing Officials (If additional space is required, use the reverse side of this sheet)									
(Check box if filing extension granted & indicate number of days _____) <input type="checkbox"/>									
(Check box if comments are continued on the reverse side) <input type="checkbox"/>									

SCHEDULE A

Reporting Individual's Name
 Axelrod, David M

Assets and Income	Valuation of Assets at close of reporting period												Type	Amount								Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria							
	None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000		Capital Gains	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000			\$100,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000			
BLOCK A	Valuation of Assets at close of reporting period												BLOCK B								BLOCK C									
<p>For you, your spouse, and dependent children, report each asset held for investment or the production of income which had a fair market value exceeding \$1,000 at the close of the reporting period, or which generated more than \$200 in income during the reporting period, together with such income.</p> <p>For yourself, also report the source and actual amount of earned income exceeding \$200 (other than from the U.S. Government). For your spouse, report the source but not the amount of earned income of more than \$1,000 (except report the actual amount of any honoraria over \$200 of your spouse).</p> <p>None <input type="checkbox"/></p>																														
Examples																														
1	Harris Bank - Cash (Six Accounts)																													
2	David Axelrod & Associates, Inc. -401(k) & Profit Charles Schwab Money Market Fund - SWMXX																													
3	David Axelrod & Associates, Inc. -401(k) & Profit Schwab S & P Index Fund - SWPPX**																													
4	David Axelrod & Associates, Inc. -401(k) & Profit Schwab Institutional - ISLCX**																													
5	David Axelrod & Associates, Inc. -401(k) & Profit Vanguard Inter Term Bond - VBILX																													
6	David Axelrod & Associates, Inc. -401(k) & Profit Vanguard Small Cap Index - NAESX																													

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

Prior Editions Cannot Be Used. ** In 2009, ISLCX shares converted by Schwab to SWPPX as part of its consolidation of mutual funds.

SCHEDULE A continued
(Use only if needed)

Assets and Income BLOCK A	Valuation of Assets at close of reporting period BLOCK B												Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. BLOCK C										Date (Mo., Day, Yr.) Only if Honoraria				
	Valuation of Assets at close of reporting period BLOCK B												Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. BLOCK C														
	Valuation of Assets at close of reporting period BLOCK B												Income: type and amount. If "None (or less than \$201)" is checked, no other entry is needed in Block C for that item. BLOCK C														
	None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)	Date (Mo., Day, Yr.) Only if Honoraria		
1 David Axelrod & Associates, Inc. -401(k) & Profit Vanguard Total Intl - VGTSX																											
2 Harris - Flagstar BK FSB Bloomfield Hills MI, Certificate of Deposit 5.05% dtd 8/06/2010																											
3 Harris - Highland Bk St Michael, MN Certificate of Deposit 4.30% dtd 10/27/2010																											
4 Harris - RG Premiere BK P R Hato Rey Certificate of Deposit dtd 3/19/2010																											
5 Harris - Westernbank PR Certificate of Deposit 4.35% dtd 4/08/2010																											
6 Harris - Franklin Federal Tax Free Class C																											
7 Harris - Federated Capital Reserves																											
8 IRA Premiere Select - Fidelity Cash Res.																											
9 IRA (Spouse) Premiere Select - Fidelity Cash Res.																											

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

SCHEDULE A continued
 (Use only if needed)

Reporting Individual's Name Axelrod, David M		BLOCK B Valuation of Assets at close of reporting period												BLOCK C Amount												Date (Mo., Day, Yr.) Only if Honoraria	
BLOCK A Assets and Income		None (or less than \$1,001)	\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	None (or less than \$201)	\$201 - \$1,000	\$1,001 - \$2,500	\$2,501 - \$5,000	\$5,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	Over \$5,000,000	Other Income (Specify Type & Actual Amount)		
		Dividends	Rent and Royalties	Interest	Capital Gains																						
1	Fidelity - Municipal Money Market																										
2	AKP&D Media, Inc. - Note rec. for sale of stock in AKP&D Message & Media, Inc.; Chicago, IL																										
3	ASK Public Strategies, LLC; Note rec. for redemption of interest in same; Chicago, IL																										
4	Franklin Street Productions - Documentary Production; Chicago, IL (Spouse)																										
5	Confidant Solutions, Inc.; On-line personal secure data storage, Norwalk, CT																										
6	T Rowe Price Tax - Efficient - Multi Cap Growth Fund - PREFX	X																									
7	American Institute of Biological Sciences (Spouse)																										
8	The Privatebank and Trust Co. - Cash (Two Accounts)	X																									
9	ASK Public Strategies, LLC - Profit Sharing Plan Charles Schwab Money Market Fund - SWMXX																										

* This category applies only if the asset/income is solely that of the filer's spouse or dependent children. If the asset/income is either that of the filer or jointly held by the filer with the spouse or dependent children, mark the other higher categories of value, as appropriate.

Do not complete Schedule B if you are a new entrant, nominee, or Vice Presidential or Presidential Candidate

Reporting Individual's Name
Axelrod, David M

SCHEDULE B

Page Number
5 of 8

Part I: Transactions

Report any purchase, sale, or exchange by you, your spouse, or dependent children during the reporting period of any real property, stocks, bonds, commodity futures, and other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss.

Do not report a transaction involving property used solely as your personal residence, or a transaction solely between you, your spouse, or dependent child. Check the "Certificate of divestiture" block to indicate sales made pursuant to a certificate of divestiture from OGE.

None

Example	Identification of Assets	Transaction Type (X)			Date (Mo., Day, Yr.)	Amount of Transaction (X)													
		Purchase	Sale	Exchange		\$1,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,001	\$250,001 - \$500,000	\$500,001 - \$1,000,000	Over \$1,000,000*	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000	Certificate of Divestiture		
1	Central Airlines Common	x			2/1/99			x											
2																			
3																			
4																			
5																			

* This category applies only if the underlying asset is solely that of the filer's spouse or dependent children. If the underlying asset is either held by the filer or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, as appropriate.

Part II: Gifts, Reimbursements, and Travel Expenses

For you, your spouse and dependent children, report the source, a brief description, and the value of: (1) gifts (such as tangible items, transportation, lodging, food, or entertainment) received from one source totaling more than \$260, and (2) travel-related cash reimbursements received from one source totaling more than \$260. For conflicts analysis, it is helpful to indicate a basis for receipt, such as personal friend, agency approval under 5 U.S.C. § 4111 or other statutory authority, etc. For travel-related gifts and reimbursements, include travel itinerary, dates, and the nature of expenses provided. Exclude anything given to you by

the U.S. Government; given to your agency in connection with official travel; received from relatives; received by your spouse or dependent child totally independent of their relationship to you; or provided as personal hospitality at the donor's residence. Also, for purposes of aggregating gifts to determine the total value from one source, exclude items worth \$104 or less. See instructions for other exclusions.

None

Source (Name and Address)		Brief Description	Value
Examples	Nat'l Assn. of Rock Collectors, NY, NY Frank Jones, San Francisco, CA	Airline ticket, hotel room & meals incident to national conference 6/15/99 (personal activity unrelated to duty) Leather briefcase (personal friend)	\$500 \$300
1			
2			
3			
4			
5			

Do not complete Schedule B if you are a new entrant, nominee, or Vice Presidential or Presidential Candidate

Reporting Individual's Name
Axelrod, David M

SCHEDULE B continued (Use only if needed)

Part I: Transactions

1	Identification of Assets	Transaction Type (X)			Date (Mo., Day, Yr.)	Amount of Transaction (X)											Certificate of Divestiture										
		Purchase	Sale	Exchange		\$15,001 -	\$15,000	\$50,001 -	\$50,000	\$100,001 -	\$100,000	\$250,001 -	\$250,000	\$500,001 -	\$500,000	\$1,000,001 -		\$1,000,000*	\$5,000,001 -	\$5,000,000	\$25,000,001 -	\$25,000,000	\$50,000,001 -	\$50,000,000	Over \$50,000,000		
2																											
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16																											

*This category applies only if the underlying asset is solely that of the filer's spouse or dependent children. If the underlying asset is either held by the filer or jointly held by the filer with the spouse or dependent children, use the other higher categories of value, as appropriate.

Reporting Individual's Name
Axelrod, David M

SCHEDULE C

Page Number

7 of 8

Part I: Liabilities

Report liabilities over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent children. Check the highest amount owed during the reporting period. **Exclude** a mortgage on your personal residence unless it is rented out; loans secured by automobiles, household furniture or appliances; and liabilities owed to certain relatives listed in instructions. See instructions for revolving charge accounts.

None

Examples	Creditors (Name and Address)	Type of Liability	Date Incurred	Interest Rate	Term if applicable	Category of Amount or Value (x)														
						\$10,001 - \$15,000	\$15,001 - \$50,000	\$50,001 - \$100,000	\$100,001 - \$250,000	\$250,001 - \$500,000	\$500,001 - \$1,000,000	\$1,000,001 - \$5,000,000	\$5,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	\$50,000,001 - \$25,000,000	\$25,000,001 - \$50,000,000	Over \$50,000,000			
1	First District Bank, Washington, DC John Jones, 123 JSt., Washington, DC	Mortgage on rental property, Delaware Promissory note	1991 1999	8% 10%	25 yrs. on demand			x												
2																				
3																				
4																				
5																				

* This category applies only if the liability is solely that of the filer's spouse or dependent children. If the liability is that of the filer or a joint liability of the filer with the spouse or dependent children, mark the other higher categories, as appropriate.

Part II: Agreements or Arrangements

Report your agreements or arrangements for: (1) continuing participation in an employee benefit plan (e.g. pension, 401k, deferred compensation); (2) continuation of payment by a former employer (including severance payments); (3) leaves of absence; and (4) future employment. See instructions regarding the reporting of negotiations for any of these arrangements or benefits. None

Example	Status and Terms of any Agreement or Arrangement	Parties	Date
1	ASK Public Strategies, LLC - Membership redemption agreement; five annual installment payments of \$200,000 beginning on December 31, 2009	Doe Jones & Smith, Hometown, State	7/85
2	David Axelrod & Associates, Inc. dba AKP&D Message and Media - Stock purchase agreement; annual installment payments beginning December 31, 2009 of \$350,000, \$650,000, \$400,000 and \$600,000, respectively	Eric Sedler and John Kupper remaining members	12/08
3	ASK Public Strategies, LLC - Profit Sharing Plan; sold interest in business on 12/31/2008 as indicated above; interest in Profit Sharing Plan assets were left in the plan; no future contributions will be made since no longer an active participant	Newly formed S-Corporation, AKP&D Media, Inc.; owned by John Kupper, John Del Ceccato & Larry Grisolano	12/08
4	David Axelrod & Associates, Inc. dba AKP&D Message and Media - Profit Sharing Plan; sold interest in business on December 31, 2008 as indicated above; no future contributions will be made since no longer an active participant	ASK Public Strategies, LLC	1/02
5		David Axelrod & Associates, Inc.	8/85
6			

SCHEDULE D

Part I: Positions Held Outside U.S. Government

Report any positions held during the applicable reporting period, whether compensated or not. Positions include but are not limited to those of an officer, director, trustee, general partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise or any non-profit organization or educational institution. Exclude positions with religious, social, fraternal, or political entities and those solely of an honorary nature. None

Examples	Organization (Name and Address)		Type of Organization	Position Held	From (Mo., Yr.) To (Mo., Yr.)		
	Nat'l Assn. of Rock Collectors, NY, NY	Doe Jones & Smith, Hometown, State			6/92	7/85	Present
1	Franklin Street Productions		Documentary productions	Sole-proprietor; dormant	12/2002	3/2009	
2							
3							
4							
5							
6							

Part II: Compensation in Excess of \$5,000 Paid by One Source

Report sources of more than \$5,000 compensation received by you or your business affiliation for services provided directly by you during any one year of the reporting period. This includes the names of clients and customers of any corporation, firm, partnership, or other business enterprise, or any other non-profit organization when you directly provided the services generating a fee or payment of more than \$5,000. You need not report the U.S. Government as a source. None

Examples	Source (Name and Address)		Brief Description of Duties
	Doe Jones & Smith, Hometown, State	Metro University (client of Doe Jones & Smith), Moneytown, State	
1			Legal services in connection with university construction
2			
3			
4			
5			
6			