Form **1040** U.S. Individual Income Tax Return **2009** (99) IRS Use Only - Do not write or staple in this space.

Label (See instructions on page 14.) Use the IRS label. Otherwise, please print or type.

LABEL HERE

For the year Jan. 1-Dec. 31, 2009, or other tax year beginning , 2009, ending , 20 — OMB No. 1545-0074

Your first name and initial	Last name	Your social security number
MARCO A.	RUBIO	[redacted]
If a joint return, spouse's first name and initial	Last name	Spouse's social security number
JEANETTE C.	DOUSDEBES	[redacted]
Home address (number and street). If you have a P.O. box, see page 14.	Apt. no.	You must enter your SSN(s) above.
[redacted]		
City, town or post office, state, and ZIP code. If you have a foreign address, see page 14.		Checking a box below will not change your tax or refund.
MIAMI, FL 33144		

Presidential Election Campaign ▶ Check here if you, or your spouse if filing jointly, want $3 to go to this fund (see page 14) ▶ ☐ You ☐ Spouse

Filing Status Check only one box.

1 ☐ Single
2 ☒ Married filing jointly (even if only one had income)
3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶
4 ☐ Head of household (with qualifying person). If the qualifying person is a child but not your dependent, enter this child's name here. ▶
5 ☐ Qualifying widow(er) with dependent child (see page 16)

Exemptions

6a ☒ **Yourself.** If someone can claim you as a dependent, **do not** check box 6a
b ☒ **Spouse**

Boxes checked on 6a and 6b: 2

c **Dependents:**

(1) First name Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) ✓ if qualifying child for child tax credit (see page 17)
DANIELLA RUBIO	[redacted]	DAUGHTER	X
AMANDA RUBIO		DAUGHTER	X
ANTHONY RUBIO		SON	X
DOMINICK M RUBIO		SON	X

No. of children on 6c who:
- lived with you: 4
- did not live with you due to divorce or separation (see page 18):

Dependents on 6c not entered above:

If more than four dependents, see page 17 and check here ▶ ☐

d Total number of exemptions claimed — Add numbers on lines above ▶: 6

Income

Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

If you did not get a W-2, see page 22.

Enclose, but do not attach, any payment. Also, please use Form 1040-V.

7	Wages, salaries, tips, etc. Attach Form(s) W-2		7	115,769.
8a	**Taxable** interest. Attach Schedule B if required		8a	
b	**Tax-exempt** interest. **Do not** include on line 8a	8b		
9a	Ordinary dividends. Attach Schedule B if required		9a	23.
b	Qualified dividends (see page 22)	9b 23.		
10	Taxable refunds, credits, or offsets of state and local income taxes		10	
11	Alimony received		11	
12	Business income or (loss). Attach Schedule C or C-EZ		12	
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐		13	
14	Other gains or (losses). Attach Form 4797		14	
15a	IRA distributions 15a	b Taxable amount	15b	
16a	Pensions and annuities 16a	b Taxable amount	16b	
17	Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E		17	201,739.
18	Farm income or (loss). Attach Schedule F		18	
19	Unemployment compensation in excess of $2,400 per recipient (see page 27)		19	
20a	Social security benefits 20a	b Taxable amount (see page 27)	20b	
21	Other income. List type and amount (see page 29)		21	
22	Add the amounts in the far right column for lines 7 through 21. This is your **total income** ▶		22	317,531.

Adjusted Gross Income

23	Educator expenses (see page 29)	23		
24	Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ	24		
25	Health savings account deduction. Attach Form 8889	25		
26	Moving expenses. Attach Form 3903	26		
27	One-half of self-employment tax. Attach Schedule SE	27	[redacted]	
28	Self-employed SEP, SIMPLE, and qualified plans	28		
29	Self-employed health insurance deduction (see page 30)	29		
30	Penalty on early withdrawal of savings	30		
31a	Alimony paid b Recipient's SSN ▶	31a		
32	IRA deduction (see page 31)	32		
33	Student loan interest deduction (see page 34) STMT 2	33		
34	Tuition and fees deduction. Attach Form 8917	34		
35	Domestic production activities deduction. Attach Form 8903	35		
36	Add lines 23 through 31a and 32 through 35		36	
37	Subtract line 36 from line 22. This is your **adjusted gross income** ▶		37	317,531.

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Tax and Credits	38	Amount from line 37 (adjusted gross income)	38	317,531.
Standard Deduction for - • People who check any box on line 39a, 39b, or 40b or who can be claimed as a dependent	39a	Check { You were born before January 2, 1945. Blind. / Spouse was born before January 2, 1945. Blind. } Total boxes checked ▶ 39a		
	b	If your spouse itemizes on a separate return or you were a dual-status alien, see page 35 and check here ▶ 39b		
• All others: Single or Married filing separately, $5,700 Married filing jointly or Qualifying widow(er), $11,400 Head of household, $8,350	40a	**Itemized deductions** (from Schedule A) or your **standard deduction** (see left margin)	40a	67,087.
	b	If you are increasing your standard deduction by certain real estate taxes, new motor vehicle taxes, or a net disaster loss, attach Schedule L and check here (see page 35) ▶ 40b		
	41	Subtract line 40a from line 38	41	250,444.
	42	**Exemptions.** If line 38 is $125,100 or less and you did not provide housing to a Midwestern displaced individual, multiply $3,650 by the number on line 6d. Otherwise, see page 37	42	17,958.
	43	**Taxable income.** Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	232,486.
	44	**Tax.** Check if any tax is from: a [ ] Form(s) 8814 b [ ] Form 4972	44	54,537.
	45	**Alternative minimum tax.** Attach Form 6251	45	3,178.
	46	Add lines 44 and 45 ▶	46	57,715.
	47	Foreign tax credit. Attach Form 1116 if required		
	48	Credit for child and dependent care expenses. Attach Form 2441		
	49	Education credits from Form 8863, line 29		
	50	Retirement savings contributions credit. Attach Form 8880		
	51	Child tax credit (see page 42)		
	52	Credits from Form: a [ ] 8396 b [ ] 8839 c [ ] 5695		
	53	Other credits from Form: a [ ] 3800 b [ ] 8801 c [ ]		
	54	Add lines 47 through 53. These are your **total credits**	54	
	55	Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- ▶	55	57,715.
Other Taxes	56	Self-employment tax. Attach Schedule SE	56	
	57	Unreported social security and Medicare tax from Form: a [ ] 4137 b [ ] 8919	57	
	58	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	58	
	59	Additional taxes: a [ ] AEIC payments b [X] Household employment taxes. Attach Schedule H	59	2,896.
	60	Add lines 55 through 59. This is your **total tax** ▶	60	60,611.
Payments	61	Federal income tax withheld from Forms W-2 and 1099	61	17,438.
	62	2009 estimated tax payments and amount applied from 2008 return	62	15,000.
	63	Making work pay and government retiree credits. Attach Schedule M	63	
If you have a qualifying child, attach Schedule EIC.	64a	**Earned income credit (EIC)**	64a	
	b	Nontaxable combat pay election 64b		
	65	Additional child tax credit. Attach Form 8812	65	
	66	Refundable education credit from Form 8863, line 16	66	
	67	First-time homebuyer credit. Attach Form 5405	67	
	68	Amount paid with request for extension to file (see page 72)	68	
	69	Excess social security and tier 1 RRTA tax withheld (see page 72) STMT 5	69	734.
	70	Credits from Form: a [ ] 2439 b [ ] 4136 c [ ] 8801 d [ ] 8885	70	
	71	Add lines 61, 62, 63, 64a, and 65 through 70. These are your **total payments** ▶	71	33,172.
Refund	72	If line 71 is more than line 60, subtract line 60 from line 71. This is the amount you **overpaid**	72	
Direct deposit? See page 73 and fill in 73b, 73c, and 73d, or Form 8888.	73a	Amount of line 72 you want **refunded to you**. If Form 8888 is attached, check here ▶ [ ]	73a	
	b	Routing number ▶ c Type: [ ] Checking [ ] Savings ▶ d Account number		
	74	Amount of line 72 you want applied to your 2010 estimated tax ▶ 74		
Amount You Owe	75	**Amount you owe.** Subtract line 71 from line 60. For details on how to pay, see page 74 ▶	75	27,968.
	76	Estimated tax penalty (see page 74) 76 529.		

Third Party Designee Do you want to allow another person to discuss this return with the IRS (see page 75)? [X] Yes. Complete the following. [ ] No

Designee's name ▶ JOAQUIN URQUIOLA Phone no. ▶ [redacted] Personal identification number (PIN) ▶ [redacted]

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Joint return? See page 15. Keep a copy for your records.

Your signature | Date | Your occupation: ATTORNEY | Daytime phone number

Spouse's signature. If a joint return, **both** must sign | Date | Spouse's occupation: HOMEMAKER

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Paid Preparer's Use Only

Preparer's signature | Date | Check if self-employed [ ] | Preparer's SSN or PTIN [redacted]

Firm's name (or yours if self-employed), address, and ZIP code: GOLDSTEIN SCHECHTER KOCH, 2121 PONCE DE LEON BLVD., SUITE #1100, CORAL GABLES, FL 33134 | EIN | Phone no. [redacted]

9-10002
10-20-09

** INTEREST NOT INCLUDED 90.
** PENALTY NOT INCLUDED 137.

**** TOTAL DUE 28,195.