

Part 3	5. Adjusted Gross Income (From line 5, page 1) (02) ... (01)		0	00
	6. STANDARD DEDUCTION: If you checked box 1 in Part 1 enter \$3,150, box 2 enter \$2,100, box 3 enter \$2,730, box 4 enter \$2,100. If you checked box 5 and your spouse claimed itemized deductions enter zero. If your spouse did not itemize enter \$1,575 (02)		0	00
	7. Total itemized deductions (Schedule A Individual, Part I, line 17) (03)		0	00
	8. Standard or itemized deductions (Enter the larger of line 6 or 7) (04)		0	00
	9. Total additional deductions (Schedule A Individual, Part II, line 12) (05)		0	00
	10. Telephone service payment for communication with military personnel in combat zone (See instructions) (06)		0	00
	11. PERSONAL EXEMPTION: If you checked box 1 enter \$3,000, box 2 enter \$1,300, box 3 enter \$3,000, box 4 enter \$1,300, box 5 enter \$1,500 (07)		0	00
	12. EXEMPTION FOR DEPENDENTS (Complete Schedule A1 Individual, see instructions)			
	A) Non university: Category (N) (10) 0 x \$2,500 (11)		0	00
	B) University student: Category (U) (14) 0 x \$2,500 (15)		0	00
	C) Disabled, blind or age 65 or older: Category (I) (18) 0 x \$2,500 (19)		0	00
	D) Total Exemption for Dependents (Add lines 12A through 12C) (20)		0	00
	13. Total Deductions and Exemptions (Add lines 8, 9, 10, 11 and 12D) (21)		0	00
	14. NET TAXABLE INCOME (Subtract line 13 from line 5. If line 13 is larger than line 5, enter zero) (30)		0	00
Part 4	15. TAX AS PER: (01) <input type="radio"/> 1 Tax Table <input type="radio"/> 2 Special tax on capital gains <input type="radio"/> 3 Nonresident alien (02)		0	00
	16. Gradual Adjustment Amount (Determine this adjustment if the amount indicated on line 14 is larger than \$75,000) (Schedule P Individual, line 7) (03)		0	00
	17. Excess of Alternate Basic Tax over Regular Tax (Schedule O Individual, Part II, line 7) (See instructions) (04)		0	00
	18. Tax on interest subject to withholding (Schedule F Individual, Part I, line 6) (05)		0	00
	19. Special tax on corporate dividends and partnerships distributions subject to withholding (Schedule F Individual, Part II, line 4A) (06)		0	00
	20. Tax on dividends from Capital Investment or Tourism Fund (Submit Schedule Q1) (07)		0	00
	21. Tax on IRA or Educational Contribution Accounts distributions of income from sources within P.R. (Schedule F Individual, Part VII, line 2) (08)		0	00
	22. Tax on IRA distributions to Government pensioners (Schedule F Individual, Part VII, line 3) (09)		0	00
	23. Tax on distributions and transfers from Governmental Plans (Schedule F Individual, Part V, line 3) (10)		0	00
	24. Special tax on net income from Film or Infrastructure Projects, and from businesses with tax exemption decree under Act 135 of 1997 (Schedule K Individual, Part II, line 10 or Schedule N Individual, Part II, line 8) (11)		0	00
	25. Income tax from Major League Baseball teams and the U.S. National Basketball Association (Schedule F Individual, Part VI, line 2) (12)		0	00
	26. TOTAL TAX DETERMINED (Add lines 15 through 25 or enter the amount from Schedule CO Individual, line 28, as applicable) (13)		103,312	00
	27. Recapture of credit claimed in excess (Schedule B Individual, Part I, line 3) (14)		0	00
	28. Credit for Salaried Taxpayers (See instructions) (15)		0	00
	29. Tax credits (Schedule B Individual, Part II, line 24) (16)		0	00
	30. TAX LIABILITY (Add lines 26 and 27 and subtract line 28 or 29, whichever applies. If it is less than zero, enter zero) (17)		103,312	00
	31. TAX WITHHELD, PAID AND REIMBURSABLE CREDITS:			
	A) Tax withheld on wages (Add lines 1A and 1C of Part 2 or lines 1A and 2A of Schedule CO Individual) (18)		9,146	00
	B) Tax withheld on annuities and pensions (Schedule H Individual, Part II, line 13) (19)		0	00
	C) Other payments and withholdings (Schedule B Individual, Part III, line 17) (20)		112,345	00
	D) Compensatory Credit for Low Income Pensioners (See instructions) (21)		0	00
	E) Employment Credit (See instructions) (22)		0	00
	F) American Opportunity Tax Credit (Submit Schedule B2 Individual) (23)		0	00
	G) Total Tax Withheld, Paid and Reimbursable Credits (Add lines 31A through 31F) (24)		121,491	00
	32. AMOUNT OF TAX DUE (If line 31G is smaller than line 30, enter the difference here, otherwise, enter on line 37) (25)		0	00
	33. Less: Amount paid with automatic extension of time (26)		0	00
	34. BALANCE OF TAX DUE (If line 32 is larger than line 33, enter the difference here, otherwise, enter on line 37) (27)		0	00
	35. Addition to the Tax for Failure to Pay Estimated Tax (Schedule T Individual, Part IV, line 34) (28)		0	00
	36. Special Additional Tax (See instructions) (29)		5,166	00
	37. Less: Excess of Tax Withheld, Paid and Reimbursable Credits (30)		18,179	00
	38. Less: Amount paid (a) With Return or Electronic Transfer through a Certified Program (31)		0	00
(b) Other Electronic Transfers (Transaction No. _____) (32)		0	00	
(c) Interest (33)		0	00	
(d) Surcharges 0 and Penalties 0 (34)		0	00	
39. BALANCE OF TAX DUE (Subtract lines 37, 38(a) and 38(b) from lines 34 through 36 and enter the difference here. If it is less than zero, enter the difference on line 40) (35)		0	00	
40. AMOUNT OVERPAID (Subtract lines 31G and 33 from lines 30, 35 and 36. Indicate distribution on line A, B or C) (36)		13,013	00	
A) To be credited to estimated tax for 2010 (37)		13,013	00	
B) Contribution to the San Juan Bay Estuary Special Fund (38)		0	00	
C) TO BE REFUNDED (If you want your refund to be deposited directly into an account, complete Part 5) (40)		0	00	

Part 5	Type of account <input type="radio"/> Checking <input type="radio"/> Savings	AUTHORIZATION FOR DIRECT DEPOSIT OF REFUND	
	Routing/transit number	Account number	
	Account in the name of: _____ and _____ (Print complete name as it appears on your account. If married and filing jointly, include your spouse's name)		

I hereby declare under penalty of perjury that this return, schedules and other documents attached, has been examined by me and it is true, correct and complete. The declaration of the person that prepares this return (except the taxpayer) is based on the information available, and this information has been verified.

Taxpayer's Signature X	Date 3/13/2010	Spouse's Signature X	Date 3/13/2010
Specialist's Name (Print) 04 _____	Name of the Firm or Business _____		
Address _____	Registration Number _____	Employer Identification Number _____	Date 3/13/10
Zip Code _____	Self-employed Specialist (fill in here)	Specialist's Signature _____	

Indicate if you made payments for the preparation of your return: Yes No. If you answered "Yes", require the Specialist's signature and registration number.
Retention period: Ten (10) years

Schedule CO Individual

Rev. 01.10

OPTIONAL COMPUTATION OF TAX

2009

Taxable year beginning on _____ and ending on _____

Taxpayer's name **LUIS G FORTUÑO BURSET**

Social Security Number

Use this Schedule only if you choose the optional computation of tax for married individuals living together, filing a joint return and both working.

1. Wages, Commissions, Allowances and Tips **(15)**
ATTACH ALL YOUR WITHHOLDING STATEMENTS
 (Forms 499R-2/W-2PR, 499R-2c/W-2cPR or W-2, as applicable).

Wages, Commissions, Allowances and Tips

A - Income Tax Withheld

B - TAXPAYER

C - SPOUSE

9,146 00	63,992 00	0 00
0 00	0 00	0 00
0 00	0 00	0 00
0 00	0 00	0 00
1		
9,146 00 (01)	63,992 00 (30)	0 00

Total of withholding statements with this schedule

Total

2. Federal Government Wages (See instructions) 0 00 (04) 12,896 00 (31) 0 00

3. Other Income (or Losses):

A) Interest income (Schedule F Individual, Part I, line 10) (50% of the total to each spouse) (05)	2 00 (32)	2 00
B) Distributable share on special partnerships profits (Submit Schedule F Individual and Schedule R) (06)	0 00 (33)	0 00
C) Distributable share on special partnerships losses (Submit Schedule R) (07)	0 00 (34)	0 00
D) Dividends from corporations and distributions from partnerships subject to withholding (Schedule F Individual, Part II, line 1A) (50% of the total to each spouse) (08)	0 00 (35)	0 00
E) Dividends from corporations and distributions from partnerships not subject to withholding (Schedule F Individual, Part II, line 3B) (50% of the total to each spouse) (09)	44 00 (36)	44 00
F) Distributable share on profits from corporations of individuals (Submit Schedule F Individual) (10)	0 00 (37)	0 00
G) Distributions from Governmental Plans (Schedule F Individual, Part V, lines 1C and 1D) (11)	0 00 (38)	0 00
H) Miscellaneous income (Submit Schedule F Individual) (50% of the total to each spouse or as applicable. See inst.) (12)	0 00 (39)	0 00
I) Distributions from Individual Retirement Accounts and Educational Contribution Accounts (Submit Schedule F Individual) (13)	0 00 (40)	0 00
J) Dividends from Capital Investment or Tourism Fund (Submit Schedule Q1) (50% of the total to each spouse) (14)	0 00 (41)	0 00
K) Income from annuities and pensions (Schedule H Individual, Part II, line 12) (15)	0 00 (42)	0 00
L) Alimony received (Payer's social security No. _____) (16) (17)	0 00 (43)	0 00
M) Gain (or loss) from industry or business (Submit Schedule K Individual) (18)	0 00 (44)	0 00
N) Gain (or loss) from farming (Submit Schedule L Individual) (19)	0 00 (45)	0 00
O) Gain (or loss) from professions and commissions (Submit Schedule M Individual) (20)	0 00 (46)	369,250 00
P) Gain (or loss) from rental business (Submit Schedule N Individual) (50% of the total to each spouse) (21)	0 00 (47)	0 00
Q) Gain (or loss) from sale or exchange of capital assets (Submit Schedule D Individual) (50% of the total to each spouse) (22)	(500) 00 (48)	(500) 00
R) Qualified plans and Variable Annuity Contracts (Submit Schedule D Individual) (23)	0 00 (49)	0 00
S) Net long-term capital gain on Investment Funds (Submit Schedule Q1) (50% of the total to each spouse) (24)	0 00 (50)	0 00
4. Total Gross Income (Add lines 1, 2 and 3A through 3S, of Columns B and C, respectively) (25)	76,434 00 (51)	368,796 00
5. Alimony Paid (Recipient's social security No. _____) (26) (Judgment No. _____) (27)	0 00 (52)	0 00
6. Adjusted Gross Income (Subtract line 5 from line 4, of Columns B and C, respectively) (29)	76,434 00 (53)	368,796 00

7. STANDARD DEDUCTION 1,575 00 (19) 1,575 00

8. ITEMIZED DEDUCTIONS (See instructions):

A) Home mortgage interest **(17)**

Name of entity to which payment was made	Mortgage	Loan Number	Employer Identification No.	Amount
Principal residence: SE HOME FINANCE	First		201897196 (06)	88,081 00
	Second		(07)	0 00
Second residence:	First		(08)	0 00
	Second		(09)	0 00

Loan Origination Fees (Points) Paid Directly by Borrower (See instructions) (10) 0 00

Loan Discounts (Points) Paid Directly by Borrower (See instructions) (11) 0 00

Total home mortgage interest paid (12) 88,081 00

B) License plates paid for automobiles used for personal purposes (See instructions) (13) 0 00

C) Child care expenses (See instructions. \$1,500 - one child; \$3,000 - two or more children) (14) 0 00

D) Expenses incurred in the care of elderly persons (See instructions) (15) 0 00

E) Rent paid (Landlord's social security No. _____) (16) 0 00

F) Property tax on principal residence (18) 6160 00

G) Casually loss on your principal residence (See instructions) (20)	0	00		
H) Medical expenses (Schedule J Individual, line 4) (21)	0	00		
I) Charitable contributions (Schedule J Individual, line 11) (22)	0	00		
J) Loss of personal property as a result of certain casualties (See instructions) (23)	0	00		
K) Windmills expenses (24)	0	00		
L) Expenses incurred in the purchase of technological assistance equipment for handicapped persons, specialized treatment or chronic disease: Fill in: (25) <input type="radio"/> 1 Taxpayer <input type="radio"/> 2 Wife <input type="radio"/> 3 Others (26)	0	00		
M) Dependent's education expenses (See inst. \$1,500 - one dep.; \$3,000 - two or more dep.) (27)	3,000	00		
N) Solar equipment expenses (28)	0	00		
O) Interest paid on students loans at university level (See instructions): Financial inst. _____ Loan No. _____ Employer Ident. No. _____ Amount _____ _____ (29) _____ (31) _____ 0 _____ (30) _____ (32) _____ 0				
Total interest paid on students loans at university level (33)	0	00		
P) Contributions to the Fund for Services against Remediable Catastrophic Diseases (See instructions) (34)	0	00		
Q) Total itemized deductions (Add lines 8A through 8P) (35)	97,241	00		
R) Enter in Columns B and C, 50% of the total of line 8Q (01)	48,621	00	(41)	48,621 00
9. Standard or itemized deductions (Enter the larger of lines 7 or 8R, Columns B and C, respectively) (02)	48,621	00	(42)	48,621 00
10. Additional Deductions:				
A. Contributions to an individual retirement account (Do not exceed from \$5,000 each) Financial inst. _____ Loan No. _____ Employer Ident. No. _____ Contribution _____ STERN BANK TRI _____ (03) 660222562 (06) 5,000 STERN BANK TRI _____ (04) 660222562 (07) 5,000 _____ (05) _____ (08) 0				
Total contributions to individual retirement accounts (Distribute the amount as it corresponds to the taxpayer and spouse) (09)	5,000	00	(43)	5,000 00
B. Contributions to health savings accounts with a high annual deductible medical plan (See instructions): Institution _____ Account Number _____ Employer Ident. No. _____ Contribution _____ _____ (12) _____ (16) 0 Annual deductible (10) 0 Type of coverage: (13) <input type="radio"/> 1 Individual <input type="radio"/> 2 Individual and age 55 or older <input type="radio"/> 3 Family <input type="radio"/> 4 Family and age 55 or older Institution _____ Account Number _____ Employer Ident. No. _____ Contribution _____ _____ (14) _____ (17) 0 Annual deductible (11) 0 Type of coverage: (15) <input type="radio"/> 1 Individual <input type="radio"/> 2 Individual and age 55 or older <input type="radio"/> 3 Family <input type="radio"/> 4 Family and age 55 or older				
Total contributions (Add the smaller amount between the contribution and the annual deductible of each account. Distribute the amount as it corresponds to the taxpayer and his spouse) (18)	0	00	(44)	0 00
C. Contributions to governmental pension or retirement systems (19)	0	00	(45)	0 00
D. Deduction for Veterans (See Instructions) (20)	0	00	(46)	0 00
E. Ordinary and necessary expenses (Schedule I Individual, line 8) (21)	0	00	(47)	0 00
F. Automobile loan interest (Do not exceed from a total of \$1,200. See instructions): Financial inst. _____ Loan No: _____ Employer Identification No. (22) _____				
_____ (23)	0	00	(48)	0 00
G. Young people who work (See instructions) (24)	0	00	(49)	0 00
H. Educational Contribution Account (Schedule A1 Individual, Part II, line (10)) (See instructions) (25)	750	00	(50)	750 00
I. Acquisition and installation of a computer used by dependents (See instructions) (26)	0	00	(51)	0 00
J. Contributions to the Endowment Fund of the University of Puerto Rico (27)	0	00	(52)	0 00
K. Total Additional Deductions (Add lines 10A through 10J, Columns B and C, respectively) (28)	5,750	00	(53)	5,750 00
(29) Telephone service payment for communication with military personnel in combat zone (See instructions)..	0	00	(54)	0 00
32. PERSONAL EXEMPTION (30)	1,500	00	(55)	1,500 00
13. EXEMPTION FOR DEPENDENTS (Complete Schedule A1 Individual, see instructions)				
A) Non university: Category (N) (31) 3 x \$2,500 (34)	7,500	00		
B) University student: Category (U) (32) 0 x \$2,500 (35)	0	00		
C) Disabled, blind or age 65 or older: Category (I) (33) 0 x \$2,500 (36)	0	00		
D) Total exemption for dependents (Add lines 13A through 13C) (37)	7,500	00		
E) Enter 50% of the total of line 13D in Columns B and C (38)	3,750	00	(56)	3,750 00
14. Total Deductions and Exemptions (Add lines 9, 10K, 11, 12 and 13E, Columns B and C, respectively) (39)	59,621	00	(57)	59,621 00
15. NET TAXABLE INCOME (Subtract line 14 from line 6. If line 14 is larger than line 6, enter zero) (40)	16,813	00	(58)	309,175 00
16. TAX AS PER: (01) <input checked="" type="radio"/> 1 Tax Table <input type="radio"/> 2 Special tax on capital gains <input type="radio"/> 3 Nonresident alien (02)	1,177	00	(14)	93,538 00
17. Gradual Adjustment Amount (Determine this adjustment if the amount indicated on line 15 is larger than \$37,500 in Columns B or C) (Schedule P Individual, line 7) (03)	0	00	(15)	5,978 00
18. Excess of Alternate Basic Tax over Regular Tax (Schedule O Individual, Part II, line 7) (04)	2,619	00	(16)	0 00
19. Tax on interest subject to withholding (Schedule F Individual, Part I, line 6) (05)	0	00	(17)	0 00
20. Special tax on corporate dividends and partnerships distributions subject to withholding (Schedule F Individual, Part II, line 4A) (06)	0	00	(18)	0 00
21. Tax on dividends from Capital Investment or Tourism Fund (Submit Schedule Q1) (07)	0	00	(19)	0 00
22. Tax on IRA or Educational Contribution Accounts distributions of income from sources within P.R. (Schedule F Individual, Part VII, line 2) (08)	0	00	(20)	0 00
23. Tax on IRA distributions to Government pensioners (Schedule F Individual, Part VII, line 3) (09)	0	00	(21)	0 00
24. Tax on distributions and transfers from Governmental Plans (Schedule F Individual, Part V, line 3) (10)	0	00	(22)	0 00
25. Special tax on net income from Film or Infrastructure Projects, and from businesses with a tax exemption decree under Act 135 of 1997 (Schedule K Individual, Part II, line 10 or Schedule N Individual, Part II, line 8) (11)	0	00	(23)	0 00
26. Income tax from Major League Baseball teams and the U.S. National Basketball Association (Schedule F Individual, Part VI, line 2) (12)	0	00	(24)	0 00
27. Tax Determined Individually (Add lines 16 through 26, Columns B and C, respectively) (13)	3,796	00	(25)	99,516 00
28. TOTAL TAX DETERMINED (Add the amounts in Columns B and C of line 27 and transfer it to Part 4, line 26 of the Long Form) (26)				103,312 00

Continue in Part 4 , line 26 of the Long Form.