

For the year Jan. 1-Dec. 31, 2012, or other tax year beginning _____, 2012, ending _____, 20

Your first name and initial MARCO A.	Last name RUBIO	See separate instructions. Your social security number
If a joint return, spouse's first name and initial JEANETTE C.	Last name DOUSDEBES	Spouse's social security number

Home address (number and street). If you have a P.O. box, see instructions. _____ Apt. no. _____

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below.
MIAMI, FL 33144

Foreign country name _____ Foreign province/state/county _____ Foreign postal code _____

Filing Status

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

Check only one box.

Exemptions

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

b Spouse

c Dependents:

(1) First name	Last name	(2) Dependent's social security number	(3) Dependent's relationship to you	(4) <input checked="" type="checkbox"/> If child under age 17 qualifying for child tax credit
DANIELLA	RUBIO		DAUGHTER	<input checked="" type="checkbox"/>
AMANDA	RUBIO		DAUGHTER	<input checked="" type="checkbox"/>
ANTHONY	RUBIO		SON	<input checked="" type="checkbox"/>
DOMINICK M	RUBIO		SON	<input checked="" type="checkbox"/>

d Total number of exemptions claimed **6**

Boxes checked on 6a and 6b **2**

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

Dependents on 6c not entered above

Add numbers on lines above ▶ **6**

Income

7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	192,174.
8a	Taxable interest. Attach Schedule B if required	8a	271.
b	Tax-exempt interest. Do not include on line 8a	8b	
9a	Ordinary dividends. Attach Schedule B if required	9a	29.
b	Qualified dividends	9b	29.
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	711,243.
13	Capital gain or (loss). Attach Schedule D if required. If not required, check here <input type="checkbox"/>	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	34,002.
18	Farm income or (loss). Attach Schedule F	18	
19	Unemployment compensation	19	
20a	Social security benefits	20a	
b	Taxable amount	20b	
21	Other income. List type and amount ALLY FINANCIAL INC 1,244.	21	1,244.
22	Combine the amounts in the far right column for lines 7 through 21. This is your total income	22	938,963.

Adjusted Gross Income

23	Educator expenses	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	Deductible part of self-employment tax. Attach Schedule SE	27	9,524.
28	Self-employed SEP, SIMPLE, and qualified plans	28	
29	Self-employed health insurance deduction	29	
30	Penalty on early withdrawal of savings	30	
31a	Alimony paid b Recipient's SSN ▶ _____	31a	
32	IRA deduction	32	
33	Student loan interest deduction STMT 2	33	
34	Tuition and fees. Attach Form 8917	34	
35	Domestic production activities deduction. Attach Form 8903	35	
36	Add lines 23 through 35	36	9,524.
37	Subtract line 36 from line 22. This is your adjusted gross income	37	929,439.

Tax and Credits

Standard Deduction for -
People who check any box on line 39a or 39b or who can be claimed as a dependent.

All others: Single or Married filing separately, \$5,950
Married filing jointly or Qualifying widow(er), \$11,900
Head of household, \$8,700

38 Amount from line 37 (adjusted gross income) 929,439
39a Check if: You were born before January 2, 1948, Blind. Spouse was born before January 2, 1948, Blind. Total boxes checked
b If your spouse itemizes on a separate return or you were a dual-status alien, check here
40 Itemized deductions (from Schedule A) or your standard deduction (see left margin) 90,179
41 Subtract line 40 from line 38 839,260
42 Exemptions. Multiply \$3,800 by the number on line 6d 22,800
43 Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0- 816,460
44 Tax. Check if any from: a Form(s) 8814 b Form 4972 c 962 election 254,894
45 Alternative minimum tax. Attach Form 6251
46 Add lines 44 and 45 254,894
47 Foreign tax credit. Attach Form 1116 if required
48 Credit for child and dependent care expenses. Attach Form 2441 200
49 Education credits from Form 8863, line 19
50 Retirement savings contributions credit. Attach Form 8880
51 Child tax credit. Attach Schedule 8812, if required
52 Residential energy credits. Attach Form 5695
53 Other credits from Form: a 3800 b 8801 c
54 Add lines 47 through 53. These are your total credits 200
55 Subtract line 54 from line 46. If line 54 is more than line 46, enter -0- 254,694

Other Taxes

56 Self-employment tax. Attach Schedule SE 19,048
57 Unreported social security and Medicare tax from Form: a 4137 b 8919
58 Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required
59a Household employment taxes from Schedule H 6,085
b First-time homebuyer credit repayment. Attach Form 5405 if required
60 Other taxes. Enter code(s) from instructions
61 Add lines 55 through 60. This is your total tax 279,827

Payments

If you have a qualifying child, attach Schedule EIC.

62 Federal income tax withheld from Forms W-2 and 1099 31,656
63 2012 estimated tax payments and amount applied from 2011 return 200,000
64a Earned income credit (EIC)
b Nontaxable combat pay election 64b
65 Additional child tax credit. Attach Schedule 8812
66 American opportunity credit from Form 8863, line 8
67 Reserved
68 Amount paid with request for extension to file
69 Excess social security and tier 1 RRTA tax withheld
70 Credit for federal tax on fuels. Attach Form 4136
71 Credits from Form: a 2439 b Reserved c 8801 d 8885
72 Add lines 62, 63, 64a, and 65 through 71. These are your total payments 231,656

Refund

Direct deposit? See instructions.

73 If line 72 is more than line 61, subtract line 61 from line 72. This is the amount you overpaid
74a Amount of line 73 you want refunded to you. If Form 8888 is attached, check here
b Routing number Type: Checking Savings Account number
75 Amount of line 73 you want applied to your 2013 estimated tax

Amount You Owe

76 Amount you owe. Subtract line 72 from line 61. For details on how to pay, see instructions 48,698
77 Estimated tax penalty (see instructions) 527

Third Party Designee

Do you want to allow another person to discuss this return with the IRS (see instructions)? [X] Yes. Complete below. [] No
Designee's name JOAQUIN URQUIOLA Phone no. (305) 442-2200 Personal identification number (PIN)

Sign Here

Joint return? See instructions. Keep a copy for your records.

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.
Your signature Date Your occupation US SENATOR Daytime phone number
Spouse's signature. If a joint return, both must sign. Date Spouse's occupation ENTREPRENEUR
If the IRS sent you an Identity Protection PIN, enter it here

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date Check self-employed if PTIN P00845218
Firm's name GOLDSTEIN SCHECHTER KOCH Firm's EIN 65 0209137
2121 PONCE DE LEON BLVD. STE #1100 Phone no. (305) 442-2200
Firm's address CORAL GABLES, FL 33134

210002 01-11-13

* INTEREST NOT INCL 3,761.
* PENALTY NOT INCL 7,445. ** TOTAL DUE

59,904.