



Gobierno de Puerto Rico

Departamento de Hacienda

Planilla de Contribución sobre Ingresos de Individuos Confirmación de Radicación Electrónica

Individual Income Tax Return
Confirmation of Electronic Filing

Año 2016 - Tax Year 2016

Nombre del Contribuyente	Ricardo A Rossello Nevares
Taxpayer Name	
Número de Seguro Social del Contribuyente	[REDACTED]
Taxpayer Social Security Number	
Nombre del Cónyuge	Beatriz Rivera
Spouse Name	
Número de Seguro Social del Cónyuge	[REDACTED]
Spouse Social Security Number	
Número de Confirmación	[REDACTED]
Confirmation Number	
Fecha y Hora de Radicación	16/04/2017 10:26:02 AM
Date and Time of Filing	
Fecha de Pago	
Payment Date	
Cantidad Pagada Electrónicamente	
Amount Paid Electronically	
Número de Ruta / Tránsito	
Routing Number	
Número de Cuenta	
Account Number	
Balance Pendiente de Pago	
Amount Due	
Contribución Pagada en Exceso	11,682
Amount Overpaid	
<input checked="" type="checkbox"/> Acreditar a Contribución Estimada del Próximo Año	11,682
Credit to Estimated Tax for Next Year	
<input checked="" type="checkbox"/> Aportación al Fondo Especial para el Estuario de la Bahía de San Juan	
Amount to be Contributed to the San Juan Bay Estuary Special Fund	
<input checked="" type="checkbox"/> Aportación al Fondo Especial para la Universidad de Puerto Rico	
Amount to be Contributed to the University of Puerto Rico Special Fund	
<input checked="" type="checkbox"/> Cantidad a Reintegar	
Refund Amount	
<input type="checkbox"/> Mediante cheque por correo - Via check by mail	
<input type="checkbox"/> Mediante depósito directo - Via direct deposit	

UNIQUE FORM Liquidator Reviewer R G RO V1 V2 P1 P2 N D1 D2 E A M					2016 GOVERNMENT OF PUERTO RICO DEPARTMENT OF THE TREASURY INDIVIDUAL INCOME TAX RETURN FOR CALENDAR YEAR 2016 OR TAXABLE YEAR BEGINNING ON 1 January, 2016 AND ENDING ON 31 December, 2016	2016	Serial Number <input type="checkbox"/> AMENDED RETURN <input type="checkbox"/> DECEASED DURING THE YEAR: Day Month Year <input type="checkbox"/> TAXPAYER <input type="checkbox"/> SPOUSE <input type="checkbox"/> SURVIVING SPOUSE FILES ANOTHER RETURN FOR THE TAXABLE YEAR (Submit social security number and date of death of deceased spouse: Day Month Year)					
Taxpayer's Name: Ricardo A. Rossello Nevares Postal Address: Spouse's First Name and Initial: Beatriz Last Name: Rivera Second Last Name: Home Address (Town or Urbanization, Number Street): E-Mail Address: virgiliocpa@gmail.com					Taxpayer's Social Security Number Date of Birth: 7 3 1979 Sex: <input checked="" type="checkbox"/> M <input type="checkbox"/> F Spouse's Social Security Number Spouse's Date of Birth: 4 1 1985 Sex: <input checked="" type="checkbox"/> M <input type="checkbox"/> F Home Telephone: Work Telephone: (787) 721-7000 CHANGE OF ADDRESS: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No EXTENSION OF TIME: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Receipt Stamp 16/04/2017 10:16:02 AM						
Questionnaire YES NO A. <input checked="" type="checkbox"/> United States Citizen? (See instructions) B. <input checked="" type="checkbox"/> Resident of Puerto Rico during the entire year? If "No", indicate one of the following: 1. <input type="checkbox"/> Date moved to P.R. (_____) 2. <input type="checkbox"/> Date moved from P.R. (_____) C. <input type="checkbox"/> Nonresident during the entire year D. <input type="checkbox"/> Did you generate income during the period that you were not resident of PR that is not included on this return? (If you answered "Yes", indicate the amount): 1. <input type="checkbox"/> Attributable to the taxpayer \$_____ 2. <input type="checkbox"/> Attributable to the spouse \$_____ E. <input type="checkbox"/> Other excluded tax exempt income? (Submit Schedule IE Individual) F. <input type="checkbox"/> Resident individual investor? (Submit Schedule F1 Individual) G. <input type="checkbox"/> Partner of a partnership subject to tax under the Federal Internal Revenue Code? H. <input type="checkbox"/> Active military service in a combat zone during the taxable year? (Date in which you ceased in the service: _____)	H. HIGHEST SOURCE OF INCOME: 1. <input type="checkbox"/> Government, Municipalities or Public Corporations Employee 4. <input type="checkbox"/> Retired/Pensioner 2. <input type="checkbox"/> Federal Government Employee 5. <input type="checkbox"/> Self-Employed (Indicate principal industry or business) 3. <input checked="" type="checkbox"/> Private Business Employee 6. <input type="checkbox"/> Other											
	Your occupation: Specialist Physician 6210 Spouse's occupation: Estudiante 8110	I. FILING STATUS AT THE END OF THE TAXABLE YEAR: 1. <input checked="" type="checkbox"/> Married (Fill in here if you choose the optional computation and go to Schedule CO Individual) 2. <input type="checkbox"/> Individual taxpayer (Fill in and submit spouse's name and social security number if you are: <input type="checkbox"/> Married with a complete separation of property prenuptial agreement <input type="checkbox"/> Married not living with spouse) 3. <input type="checkbox"/> Married filing separately (Submit spouse's name and social security number above)										
		GO TO PAGE 2 TO DETERMINE YOUR REFUND OR PAYMENT.										
		Refund 1. AMOUNT OVERPAID (Part 3, line 29. Indicate distribution on lines A, B, C and D) ... A) To be credited to estimated tax for 2017 B) Contribution to the San Juan Bay Estuary Special Fund C) Contribution to the Special Fund for the University of Puerto Rico D) TO BE REFUNDED (if you want your refund to be deposited directly into an account, complete the Deposit Part)	01 (01) 11,682 00 (02) 11,682 00 (03) 00 (04) 00 (05) 00 (06) 00 (07) 00 (08) 00 (09) 00 (10) 00									
			Payment 2. AMOUNT OF TAX DUE (Part 3, line 29) 3. Less: Amount paid (a) With Return or Electronic Transfer through a Certified Program (b) Interests (c) Surcharges _____ and Penalties _____	(06) 00 (07) 00 (08) 00 (09) 00 (10) 00								
				Deposit Type of account <input type="checkbox"/> Checking <input type="checkbox"/> Savings Account in the name of _____ (Print complete name as it appears on your account. If married and filing jointly, include your spouse's name)	AUTHORIZATION FOR DIRECT DEPOSIT OF REFUND Routing/transit number: _____ Account number: _____							
					and							
		I hereby declare under penalty of perjury that I have examined the information included in this return, schedules and other documents attached to it, 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 ELECTRONICALLY SIGNED			Date 16/04/2017	Spouse's Signature ELECTRONICALLY SIGNED		Date 16/04/2017				
04 Specialist's Name (Print) Virgilio Vega III		Name of the Firm or Business Virgilio Vega III CPA PSC										
Specialist's Signature ELECTRONICALLY SIGNED		Date 16/04/2017	Self-employed Specialist (fill in here) <input type="checkbox"/>		Registration Number 6073							
NOTE TO TAXPAYER: Indicate if you made payments for the preparation of your return: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No. If you answered "Yes", require the Specialist's signature and registration number.												
Retention Period: Ten (10) years												
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If you choose the optional computation of tax for married individuals living together and filing a joint return, do not complete Parts 1 and 2, neither lines 14 through 20 of Part 3, and go to Schedule CO Individual.

Part 1

Part 2

Part 3

1. Wages, Commissions, Allowances and Tips

ATTACH ALL YOUR WITHHOLDING STATEMENTS
(Forms 499R-2/W-2PR, 499R-2c/W-2cPR or W-2,
as applicable).

A-Income Tax Withheld

8,478	00
00	00
00	00
00	00

B-Wages, Commissions,
Allowances and Tips

48,046	00
00	00
00	00
00	00

Total of withholding statements with this return

02

1

(02)

8,478 00

0

Exempt wages under Act 135-2014

Income Tax Withheld

C- Federal Government Wages (Total of

W-2 Forms with this return

)

(01)

00

(03)

00

2. Other Income (or Losses):

- A) Total distributions from qualified retirement plans (Schedule D Individual, Part IV, line 24)
- B) Gain (or loss) from sale or exchange of capital assets (Schedule D Individual, Part V, line 34 or 35, as applicable)
- C) Interests (Schedule FF Individual, Part I, line 5)
- D) Dividends from corporations (Schedule FF Individual, Part II, line 4)
- E) Distributions from Governmental Plans (Schedule F Individual, Part II, line 3)
- F) Distributions from Individual Retirement Accounts and Educational Contribution Accounts (Schedule F Individual, Part I, line 2)
- G) Other income (Schedule F Individual, Part V, line 4 and Schedule FF Individual, Part III, line 4)
- H) Income from annuities and pensions (Schedule H Individual, Part II, line 12)
- I) Gain (or loss) from industry or business (Schedule K Individual, Part I, line 12)
- J) Gain (or loss) from farming (Schedule L Individual, Part II, line 14)
- K) Gain (or loss) from professions and commissions (Schedule M Individual, Part II, line 8)
- L) Gain (or loss) from rental business (Schedule N Individual, Part II, line 9)
- M) Dividends from Capital Investment or Tourism Fund (Submit Schedule Q1)
- N) Net long-term capital gain on Investment Funds (Submit Schedule Q1)
- O) Distributable share on profits from partnerships, special partnerships and corporations of individuals (Submit Schedule R Individual)
- P) Distributions from deferred compensation plans and/or qualified retirement plans, partial or lump-sum not due to separation from service or plan termination (Schedule F Individual, Part III or IV, line 1, as applicable)
- Q) Income from salaries, wages, compensations or public shows received by a nonresident individual (Form 480-6C)
- R) Alimony received (Payer's social security No.) (23)

3. Total Income (Add lines 1B, 1C and 2A through 2R)

48,659 00

4. Alimony Paid (Recipient's social security No.) (26) (Judgment No.) (27)

5. Adjusted Gross Income (Subtract line 4 from line 3)

48,659 00

6. Total Deductions (Schedule A Individual, Part I, line 11 or Part II, line 6)

03

9,171 00

7. Personal Exemption (Married - \$7,000; Individual taxpayer - \$3,500; Married filing separately - \$3,500)

7,000 00

8. Exemption for Dependents (Complete Schedule A1 Ind., see instructions):

A) (03)

1

x \$2,500

.....

(05)

2,500

00

Joint custody or married filing separately → B) (04) _____ x \$1,250 (06) _____

00

Total Exemption for Dependents (Add lines 8A and 8B)

2,500 00

9. Additional Personal Exemption for Veterans (\$1,500 per veteran. If both spouses are veterans, \$3,000)

00

10. Total Deductions and Exemptions (Add lines 6 through 9)

18,671 00

11. Net income before the deduction under Act 185-2014 (Subtract line 10 from line 5. If line 10 is more than line 5, enter zero)

29,988 00

12. Allowable deduction under Act 185-2014 (See instructions)

00

13. NET TAXABLE INCOME (Subtract line 12 from line 11. If line 12 is more than line 11, enter zero)

29,988 00

14. TAX (21) ☒ 1 Tax Table ☐ 2 Preferential rates (Schedule A2 Individual) ☐ 3 Nonresident alien ☐ 4 Form SC 2668

1,818 00

15. Grand Adjustment Amount (Determine adjustment if the amount indicated on line 13 or Schedule A2 Ind., line 11 is more than \$500,000) (Schedule P Ind., line 7)

00

16. REGULAR TAX BEFORE THE CREDIT (Add lines 14 and 15)

1,818 00

17. Credit for taxes paid to foreign countries, the United States, its territories and possessions (Submit Schedule C Individual) (See instructions)

00

18. NET REGULAR TAX (Subtract line 17 from line 16)

1,818 00

19. Credit of Net Alternate Basic Tax over Net Regular Tax (Schedule O Individual, Part II, line 7) (See instructions)

00

20. Credit for alternate basic tax (Schedule O Individual, Part III, line 4)

00

21. TOTAL TAX DETERMINED (Subtract line 20 from the sum of lines 18 and 19 or enter the amount from Schedule CO Individual, line 24, as applicable)

1,818 00

22. Recapture of credit claimed in excess (Schedule B Individual, Part I, line 3)

00

23. Tax credits (Schedule B Individual, Part II, line 28)

00

24. TAX LIABILITY (Subtract line 23 from the sum of lines 21 and 22. If it is less than zero, enter zero)

1,818 00

25. TAX WITHHELD, PAID AND REIMBURSABLE CREDIT:

A) Tax withheld on wages (Add lines 1A and 1C of Part 1 or lines 1A and 2A of Schedule CO Individual)

(33)

8,478

00

00

B) Other payments and withholdings (Schedule B Individual, Part III, line 22)

(34)

5,022

00

00

C) American Opportunity Tax Credit (Submit Schedule B2 Individual) (Does not apply to married filing separately)

(35)

0

0

00

D) Amount paid with automatic extension of time

(36)

0

00

00

E) Total Tax Withheld, Paid and Reimbursable Credit (Add lines 25A through 25D)

13,500 00

26. AMOUNT OF TAX DUE (If line 25E is less than line 24, enter the difference here; otherwise, enter on line 27)

00

27. Excess of Tax Withheld, Paid and Reimbursable Credit

11,682 00

28. Addition to the Tax for Failure to Pay Estimated Tax (Schedule T Individual, Part II, line 21)

00

29. BALANCE: • If line 27 is more than the sum of lines 26 and 28, you have an overpayment. Enter the difference here and on line 1 of page 1.

• If line 27 is less than the sum of lines 26 and 28, you have a balance of tax due. Enter the difference here and on line 2 of page 1.

• If the difference between line 27 and the sum of lines 26 and 28 is equal to zero, enter zero here and sign your return on page 1.

11,682 00

THE AMOUNT SHOWN ON LINE 29 SHALL BE TRANSFERRED TO THE CORRESPONDING LINE OF PAGE 1.

Retention Period: Ten (10) years

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Schedule A Individual

Rev. Feb 0217

DEDUCTIONS APPLICABLE TO INDIVIDUAL TAXPAYERS**2016**Taxable year beginning on 1 January, 2016 and ending on 31 December, 2016

Social Security Number

Taxpayer's name
Ricardo A Rossello Nevares**Part I Deductions Applicable to Individual Taxpayers (See instructions)**

1. Home mortgage interest

Name of entity to which payment was made	Mortgage	Loan Number	Employer Identification Number	Amount	(10)
Principal residence: Cenlar	First		(01)	9,171	00 (05)
	Second		(02)	00	(06)
Second residence:	First		(03)	00	(07)
	Second		(04)	00	(08)

Home mortgage interest of the principal residence not reported on Form 480.7A (See instructions)

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

Loan Discounts (Points) Paid Directly by Borrower (See instructions)

a) Total home mortgage interest paid

b) Limit (Multiply the sum of Part 1, line 5 of the return and line 1, Part III of Schedule A, individual by 30% and enter here)

c) Allowable deduction for mortgage interest (Enter the smaller of lines 1(a), 1(b) or \$35,000. If the total interest does not exceed 30% of the income for any of the 3 previous years, fill in here 1) (14)(See instructions)

2. Casualty loss on your principal residence (See instructions)

3. Medical expenses (Part III, line 3)

4. Charitable contributions (Part III, line 8)

5. Loss of personal property as a result of certain casualties (See instructions)

6. Contributions to governmental pension or retirement systems

7. Contributions to individual retirement accounts (Do not exceed from \$5,000 or \$10,000 if married):

Financial Inst.	Account No.	Employer Ident. No.	Contribution
	(21)	(24)	(27) <input type="radio"/> 1 Taxpayer <input type="radio"/> 2 Spouse
	(22)	(25)	(28) <input type="radio"/> 1 Taxpayer <input type="radio"/> 2 Spouse
	(23)	(26)	(29) <input type="radio"/> 1 Taxpayer <input type="radio"/> 2 Spouse

Total contributions to individual retirement accounts

8. Contributions to health savings accounts with a high annual deductible medical plan (See instructions):

Institution	Account No.	Employer Ident. No.	Contribution
Annual Deductible (31)	Type of coverage: (33) <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	(35)	(37)
Institution	Account No.	Employer Ident. No.	Effective date

Annual Deductible (32)	Type of coverage: (34) <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	(36)	(39)
------------------------	---	------	------

Total contributions (Add the smaller amount between the contribution and the annual deductible of each account)

9. Educational Contribution Account (Schedule A1 Individual, Part II, line (21)) (See instructions)

10. Interest paid on students loans at university level (See instructions):

Financial Inst.	Loan No.	Employer Ident. No.	Amount
	(43)	(48)	
	(44)	(49)	
	(45)	(50)	
	(46)	(51)	
	(47)	(52)	

Total interest paid on students loans

11. Total deductions applicable to individual taxpayers (Add lines 1 through 10 and transfer to Part 2, line 6 of the return. If you answered "No" to question B of the questionnaire on page 1 of the return, continue with Part II)

9,171 00

Part II Computation of Allowable Amounts of Deductions to Nonresident or Part-year Resident

- Total gross income earned during the period of residence in Puerto Rico (Part 1, line 5 of the return)
- Total gross income earned during the period of nonresidence in Puerto Rico (Question C of the questionnaire on page 1 of the return)
- Total Gross Income (Add lines 1 and 2)
- Percentage of income related to the period of residence in Puerto Rico (Divide line 1 by line 3. Enter the result rounded to two decimal places)
- Total deductions applicable to individual taxpayers (Part 1, line 11)
- Total deductions attributable to the period of residence in Puerto Rico (Multiply line 5 by line 4 and transfer to Part 2, line 6 of the return)

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Taxpayer's name

Part III Medical expenses and Charitable Contributions

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Name of person or institution to whom payment was made	Employer Identification Number	(A) Medical Expenses	(B) Other Contributions	Nature of Organization	(C) Conservacion Easement and Museological Institutions	(D) Contributions to Municipalities
(01)		00 (18)	00 (35)	(49)	00	00
(02)		00 (19)	00 (36)	(50)	00	00
(03)		00 (20)	00 (37)	(51)	00	00
(04)		00 (21)	00 (38)	(52)	00	00
(05)		00 (22)	00 (39)	(53)	00	00
(06)		00 (23)	00 (40)	(54)	00	00
(07)		00 (24)	00 (41)	(55)	00	00
(08)		00 (25)	00 (42)	(56)	00	00
(09)		00 (26)	00 (43)	(57)	00	00
(10)		00 (27)	00 (44)	(58)	00	00
(11)		00 (28)	00 (45)	(59)	00	00
(12)		00 (29)	00 (46)	(60)	00	00
(13)		00 (30)	00 (47)	(61)	00	00
(14)		00 (31)	00 (48)	(62)	00	00
1. Total Columns A, B, C and D	(15)	00 (32)	00	(63)	00 (66)	00
2. Multiply the adjusted gross income (Part 1, line 5 of the return or line 6, Columns B and C of Schedule CO Individual) by 6% and enter here (See instructions)	(16)	00				
3. Allowable deduction for medical expenses (Subtract line 2 from line 1. Enter here and in Part I, line 3 of this Schedule or on Schedule CO Individual, line 7C)	(17)	00				
4. Multiply the adjusted gross income (Part 1, line 5 of the return or line 6, Columns B and C of Schedule CO Individual) by 50% and enter here (See instructions) ...	(33)	00				
5. Deduction for other contributions (Enter the smaller of lines 1B and 4)	(34)	00				
6. Multiply the adjusted gross income (Part 1, line 5 of the return or line 6, Columns B and C of Schedule CO Individual) by 30% and enter here (See instructions)	(35)	00				
7. Deduction for contributions to Conservation Easements and Museological Institutions (Enter the smaller of lines 1C and 6) ...	(36)	00				
8. Total allowable deductions for contributions (Add lines 1D, 5 and 7. Enter here and in Part I, line 4 of this Schedule or on Schedule CO Individual, line 7D)	(70)	00				

Retention Period: Ten (10) years

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Schedule A1 Individual

Rev. Feb 02 17

**DEPENDENTS AND BENEFICIARIES
OF EDUCATIONAL CONTRIBUTION ACCOUNTS****2016**Taxable year beginning on 1 January 2016 and ending on 31 December 2016

Taxpayer's name

Ricardo A Rossello Nevares

Part I Dependent's Information (See instructions)

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IMPORTANT INFORMATION

Do not include the spouse on this schedule. A married individual who lives with his/her spouse for tax purposes, should not include the spouse as part of the dependents.

Submit this Schedule with your return in order to consider the exemption for dependents.

Fill in the oval for joint custody if the dependent is subject to this condition. The exemption will be \$1,250 for each taxpayer.

	First Name, Initial (01)	Last Name	Second Last Name	Joint Custody	Date of Birth Day / Month / Year	Relationship	Category * (N)(U)(I)	Social Security Number
(01)	Claudia B	Rossello	Rivera	0 0 0	21/06/2014	Daughter	N	
(02)				0 0 0				
(03)				0 0 0				
(04)				0 0 0				
(05)				0 0 0				
(06)				0 0 0				
(07)				0 0 0				
(08)				0 0 0				
(09)				0 0 0				
(10)				0 0 0				
(11)				0 0 0				
(12)				0 0 0				
(13)				0 0 0				
(14)				0 0 0				
(15)				0 0 0				
(16)				0 0 0				
(17)				0 0 0				
(18)				0 0 0				
(19)				0 0 0				
(20)				0 0 0				

* See instructions.

Retention Period: Ten (10) years

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Part II **Beneficiaries of Educational Contribution Accounts** (See instructions)

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Schedule B Individual
Rev. Feb 02 17

RECAPTURE OF CREDITS CLAIMED IN EXCESS,
TAX CREDITS, AND OTHER PAYMENTS
AND WITHHOLDINGS

2016

Taxable year beginning on 1 January 2016 and ending on 31 December 2016

Taxpayer's name

Ricardo A Rossello Nevares

Part I Recapture of Credits Claimed in Excess

Name of entity: Employer identification No: Creditfor:	(01)	Column A	Column B	Column C
		(02)	(03)	(05)
Tourism Development	100	100	100	100
Solid Waste Disposal	200	200	200	200
Capital Investment Fund	300	300	300	300
Theatrical District of Santurce	400	400	400	400
Film Industry Development	500	500	500	500
Housing Infrastructure	600	600	600	600
Construction or Rehabilitation of Rental Housing Projects for Low or Moderate Income Families	700	700	700	700
Acquisition of an Exempt Business in the Process of Closing its Operations in Puerto Rico	800	800	800	800
Conservation Easement	900	900	900	900
Economic Incentives (Research and Development)	1000	1000	1000	1000
Economic Incentives (Strategic Projects)	1100	1100	1100	1100
Economic Incentives (Industrial Investment)	1200	1200	1200	1200
Green Energy Incentives (Research and Development)	1300	1300	1300	1300
Other:	1400	1400	1400	1400
1. Total credit claimed in excess			(07)	00
2. Recapture of credit claimed in excess paid in previous year, if applicable			(08)	00
3. Recapture in excess paid this year (Transfer to Part 3, line 22 of the return. See instructions)			(09)	00
4. Excess of credit due to next year, if applicable (Subtract lines 2 and 3 from line 1. See instructions)			(10)	00

Part II Tax Credits (Do not include estimated tax payments. Include such payments in Part III of this Schedule)

A. CREDITS SUBJECT TO MORATORIUM

1. Credit attributable to losses or for investment in the Capital Investment Fund (See instructions)	(11)	00
2. Credit for construction investment in urban centers (Act 212-2002, as amended) (See instructions)	(12)	00
3. Credit for merchants affected by urban centers revitalization (Act 212-2002, as amended) (See instructions)	(13)	00
4. Credit for purchases of products manufactured in Puerto Rico and Puerto Rican agricultural products (Submit Schedule B1 Individual)	(14)	00
5. Credit for the establishment of an eligible conservation easement or donation of eligible land (Act 183-2001, as amended) (See instructions)	(15)	00
6. Credit for the purchase of tax credits (Complete Part IV) (See instructions)	(16)	00
7. Other credits subject to moratorium not included on the preceding lines	(17)	00
8. Credits carried from previous years (Submit detail)	(18)	00
9. Total credits subject to moratorium (Add lines 1 through 8)	(19)	00
10. 50% of the tax determined (Multiply the amount in Part 3, line 21 of the return by .50)	(20)	00
11. Total credits subject to moratorium to be claimed (Enter the smaller of line 9 or 10)	(21)	00

B. CREDITS NOT SUBJECT TO MORATORIUM

12. Credit for investment in Tourism Development (Act 78-1993) or Farming (Act 225-1995) (See instructions)	(22)	00
13. Credit for: <input checked="" type="checkbox"/> 1 Section 4(a) of Act 8 of 1987 and/or <input checked="" type="checkbox"/> 2 Section 3(b) of Act 135-1997 (See instructions)	(24)	00
14. Credit for investment in film industry development (Act 27-2011): <input checked="" type="checkbox"/> 1 Film Project and/or <input checked="" type="checkbox"/> 2 Infrastructure Project (See inst.)	(26)	00
15. Credit for the purchase or transmission of television programming made in Puerto Rico (Section 1051.14) (See instructions)	(27)	00
16. Credit for contributions to former governors foundations	(28)	00
17. Credit for payments of Membership Certificates by Ordinary and Extraordinary Members of Employees-Owned Special Corporations (See instructions)	(29)	00
18. Credit to investors who acquire an exempt business that is in the process of closing its operations in Puerto Rico (Act 109-2001) (See inst.)	(30)	00
19. Credit for contributions to Santa Catalina's Palace Patronage (See instructions)	(31)	00
20. Credit for investment Act 73-2008 (See instructions)	(32)	00
21. Credit for investment Act 83-2010 (See instructions)	(33)	00
22. Credit for the purchase of tax credits (Complete Part IV) (See instructions)	(34)	00
23. Other credits not subject to moratorium not included on the preceding lines	(35)	00
24. Credits carried from previous years (Submit detail)	(36)	00
25. Total credits not subject to moratorium to be claimed (Add lines 12 through 24)	(37)	00
26. Total tax credits (Add lines 11 and 25)	(38)	00
27. Total tax determined (Part 3, line 21 of the return)	(39)	00
28. Credit to be claimed (Enter the smaller of line 26 or 27. Transfer to page 2, Part 3, line 23 of the return)	(40)	00
29. Carryforward credits (Subtract line 28 from the sum of lines 9 and 25)	(41)	00

Retention Period: Ten (10) years

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Part III Other Payments and Withholdings

1. Estimated tax payments for 2016	(42)	00
2. Tax paid in excess in prior years credited to estimated tax	(43)	5,000 00
3. Payment with original return (See instructions)	(44)	00
4. Tax withheld to nonresidents (Form 480.6C)		
(a) Dividends subject to 15% under Section 1062.08	(45)	00
(b) Dividends subject to preferential rate under special Act	(46)	00
(c) Royalties subject to special rate under incentives acts	(47)	00
(d) Other withholdings	(48)	00 (49)
5. Tax withheld to nonresidents on IRA distributions (Form 480.7)	(50)	00
6. Tax withheld on interests		
(a) Form 480.6B	(51)	00
(b) Form 480.7	(52)	00
(c) Form 480.7B	(53)	00 (54)
7. Dividends from corporations (Form 480.6B)	(55)	22 00
8. Dividends subject to preferential rate under special Act (Form 480.6B)	(56)	00
9. Services rendered by individuals (Form 480.6B) (Total of Informative Return <input type="checkbox"/> (57)	(58)	00
10. Payments for judicial or extrajudicial indemnification (Form 480.6B)	(59)	00
11. Tax withheld on distributable share of net profits to stockholders or partners of pass-through entities (Form 480.60-EC) on:		
(a) Interest income subject to preferential rate (See instructions)	(60)	00
(b) Eligible distribution of dividends from corporations (See instructions)	(61)	00
(c) Net income (or loss) from the entity's trade or business (See instructions)	(62)	00
(d) Net income (or loss) on partially exempt income (See instructions)	(63)	00
(e) Net income (or loss) on income subject to preferential rate (See instructions)	(64)	00
(f) Other items (See instructions)	(65)	00 (66)
12. Tax withheld on distributable share of net profits to trustees of revocable trusts or grantor trusts (Form 480.60-F) on:		
(a) Interest income subject to preferential rate (See instructions)	(67)	00
(b) Eligible distribution of dividends from corporations (See instructions)	(68)	00
(c) Total distributions from qualified retirement plans (See instructions)	(69)	00
(d) Other items (See instructions)	(70)	00 (71)
13. Tax withheld on distributable share to members of an employees-owned special corporation (Form 480.6 C-1) (See instructions):		
(a) Eligible distribution of benefits or dividends (Line 1, Part V of Form 480.6 CPT)	(72)	00
(b) Other items	(73)	00 (74)
14. Tax withheld on IRA or Educational Contribution Accounts distributions of income from sources within Puerto Rico:		
(a) Form 480.7	(75)	00
(b) Form 480.7B	(76)	00
15. Tax withheld on IRA distributions to Governmental pensioners (Form 480.7)	(77)	00
16. Tax withheld at source on distributions from deferred compensation plans (Non qualified) (Form 480.7C)	(78)	00
17. Tax withheld at source on qualified pension plans distributions (Form 480.7C)	(79)	00
18. Tax withheld at source on pension plan distributions received as an annuity or periodic payments (Form 480.7C)	(80)	00
19. Tax withheld on distributions and transfers from Governmental Plans (Form 480.7C)	(81)	00
20. Income tax withheld on income from sport teams of international associations or federations (Forms 480.6B or 480.6C)	(82)	00
21. Other payments and withholdings not included on the preceding lines:		
(a) Reported in an Informative Return (See instructions)	(83)	00
(b) Not reported in an Informative Return (Submit detail)	(84)	00
22. Total other payments and withholdings (Add lines 1 through 21. Transfer to page 2, Part 3, line 25B of the return)	(85)	5,022 00

Part IV Breakdown of the Purchase of Tax Credits

Fill in the oval corresponding to the act (or acts) under which you acquired the credit and enter the amount:

24

A. CREDITS SUBJECT TO MORATORIUM

1. <input type="checkbox"/> Solid Waste Disposal (Act 159-2011)	(01)	00
2. <input type="checkbox"/> Capital Investment Fund (Act 46-2000)	(02)	00
3. <input type="checkbox"/> Theatrical District of Santurce (Act 178-2000)	(03)	00
4. <input type="checkbox"/> Housing Infrastructure (Act 98-2001)	(04)	00
5. <input type="checkbox"/> Construction or Rehabilitation of Rental Housing Projects for Low or Moderate Income Families (Act 140-2001)	(05)	00
6. <input type="checkbox"/> Conservation Easement (Act 183-2001)	(06)	00
7. <input type="checkbox"/> Revitalization of Urban Centers (Act 212-2002)	(07)	00
8. <input type="checkbox"/> Other:	(08)	00
9. Total credit for the purchase of tax credits subject to moratorium (Transfer to Part II, line 8)	(09)	00

B. CREDITS NOT SUBJECT TO MORATORIUM

10. <input type="checkbox"/> Tourism Development (Act 78-1993)	(10)	00
11. <input type="checkbox"/> Film Industry Development (Act 27-2011)	(11)	00
12. <input type="checkbox"/> Acquisition of an Exempt Business that is in the Process of Closing its Operations in Puerto Rico (Act 109-2001)	(12)	00
13. <input type="checkbox"/> Economic Incentives (Research and Development) (Act 73-2008)	(13)	00
14. <input type="checkbox"/> Economic Incentives (Strategic Projects) (Act 73-2008)	(14)	00
15. <input type="checkbox"/> Economic Incentives (Industrial Investment) (Act 73-2008)	(15)	00
16. <input type="checkbox"/> Green Energy Incentives (Research and Development) (Act 83-2010)	(16)	00
17. <input type="checkbox"/> Other:	(17)	00
18. Total credit for the purchase of tax credits subject to moratorium (Transfer to Part II, line 22)	(18)	00

Schedule D Individual

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**CAPITAL ASSETS GAINS AND LOSSES,
TOTAL DISTRIBUTIONS FROM QUALIFIED PENSION PLANS
AND VARIABLE ANNUITY CONTRACTS**
2016Taxable year beginning on 1 January, 2016 and ending on 31 December, 2016

Taxpayer's name

Ricardo A Rossello Nevares**Part I Short-Term Capital Assets Gains and Losses (Held one year or less)**

52

Description and Location of Property	(A) Date Acquired (Day/Month/Year)	(B) Date Sold (Day/Month/ Year)	(C) Sale Price	(D) Adjusted Basis	(E) Selling Expenses	(F) Gain or Loss
			(01) 00	00	00 (04)	00
			(02) 00	00	00 (05)	00
			(03) 00	00	00 (06)	00
1. Net short-term capital gain (or loss)						(07) 00
2. Net short-term capital gain on sale of your principal residence and/or sole proprietorship business (Submit Schedule D1, D3 and/or G Individual, as applicable. See instructions)						(08) 00
3. Distributable share on net short-term capital gain (or loss) from Estates or Trusts (Submit Form 480.60 F)						(09) 00
4. Distributable share on net short-term capital gain (or loss) from Pass-through Entities (Submit Form 480.60 EC. See instructions)						(10) 00
5. Net short-term capital gain (or loss) on investment funds or attributable to direct investment and not through a Capital Investment Fund, or distributable share on net short-term capital gain (or loss) from Employees - Owned Special Corporations (Submit detail. See instructions)						(11) 00
6. Excess of deduction over the income derived from an activity that is not your principal industry or business (See instructions)						(12) 00
7. Net short-term capital gain (or loss) (Add lines 1 through 6)						(13) 00

Part II Long-Term Capital Assets Gains and Losses (Held more than one year)

53

Description and Location of Property	Fill in if you Prepaid	(A) Date Acquired (Day/Month/Year)	(B) Date Sold (Day/Month/ Year)	(C) Sale Price	(D) Adjusted Basis	(E) Selling Expenses	(F) Gain or Loss (Act 132-2010 and Act 216-2011. See inst.)	(G) Gain or Loss
AAA Portfolio UBS	○	04/09/2012	21/10/2016	6,155 (14) 00	6,155 00	00	(17) 00	(23) 00
UBS	○	04/09/2012	21/10/2016	39,945 (15) 00	39,703 00	00	(18) 00	(21) 242 00
	○			(16) 00	00	00	(19) 00	(22) 00
8. Net long-term capital gain (or loss)							(23) 242 00	
9. Net long-term capital gain (or loss) on sale of your principal residence and/or sole proprietorship business (Submit Schedule D1, D3 and/or G Individual, as applicable. See instructions)							(24) 00	
10. Distributable share on net long-term capital gain (or loss) from Estates or Trusts (Submit Form 480.60 F)							(25) 00	
11. Distributable share on net short-term capital gain (or loss) from Pass-through Entities (Submit Form 480.60 EC. See instructions)							(26) 00	
12. Lump-sum distributions from variable annuity contracts - Taxpayer (See instructions)							(27) 00	
13. Lump-sum distributions from variable annuity contracts - Spouse (See instructions)							(28) 00	
14. Net long-term capital gain (or loss) on investment funds or attributable to direct investment and not through a Capital Investment Fund, or distributable share on net long-term capital gain (or loss) from Employees - Owned Special Corporations (Submit detail. See instructions)							(29) 00	
15. Excess of deduction over the income derived from an activity that is not your principal industry or business (See instructions)							(30) 00	
16. Net long-term capital gain (or loss) (Add lines 8 through 15)							(31) 242 00	

Part III Long-Term Capital Assets Gains and Losses Realized under Special Legislation (See instructions)

53

Description and Location of Property	Fill in if you Prepaid	(A) Date Acquired (Day/Month/Year)	(B) Date Sold (Day/Month/Year)	(C) Sale Price	(D) Adjusted Basis	(E) Selling Expenses	(F) Gain or Loss
	○			(01) 00	00	00	00
17. Net long-term capital gain (or loss) under Act:				(Decree No. _____)	(02) 00		00
Description and Location of Property	Fill in if you Prepaid	(A) Date Acquired (Day/Month/Year)	(B) Date Sold (Day/Month/Year)	(C) Sale Price	(D) Adjusted Basis	(E) Selling Expenses	(F) Gain or Loss
	○			(03) 00	00	00	00
18. Net long-term capital gain (or loss) under Act:				(Decree No. _____)	(04) 00		00
Description and Location of Property	Fill in if you Prepaid	(A) Date Acquired (Day/Month/Year)	(B) Date Sold (Day/Month/Year)	(C) Sale Price	(D) Adjusted Basis	(E) Selling Expenses	(F) Gain or Loss
	○			(05) 00	00	00	00
19. Net long-term capital gain (or loss) under Act:				(Decree No. _____)	(06) 00		00

Retention Period: Ten (10) years

PRSoft, Inc. (www.prsoft.com)

Part IV**Total Distributions from Qualified Pension Plans**

Description	Fill in if you Prepaid	Distribution Date (Day/Month/Year)	(A) Total Distribution	(B) Basis	(C) Taxable Amount
20. Taxable at 20% - Taxpayer	00	(07)	(11) 00	00	00 (15) 00
21. Taxable at 20% - Spouse	00	(08)	(12) 00	00	00 (16) 00
22. Taxable at 10% - Taxpayer	00	(09)	(13) 00	00	00 (17) 00
23. Taxable at 10% - Spouse	00	(10)	(14) 00	00	00 (18) 00
24. Total distributions from qualified pension plans (Total of Columns C. Transfer this amount to Part 1, line 2A of the return or line 3A, Columns B and C of Schedule CO Individual, as applicable)				(19) 00	00

Part V**Net Capital Gains or Losses for Determination of the Adjusted Gross Income**

54

Gains or Losses	Column A	Column B	Column C	Column D	Column E
	Short-Term	Long-Term	Under Special Legislation	Under Special Legislation	Under Special Legislation
25. Enter the gains determined on lines 7, 16 and 17 through 19 in the corresponding Column	(01) 00	242 00	00	00	00
26. Enter the losses determined on lines 7, 16 and 17 through 19 in the corresponding Column	(02) 00	(03) 00	(05) 00	(07) 00	(09) 00
27. If one or more of Columns B through E reflect a loss on line 26, add them and apply the total proportionally to the gains in the other Columns (See instructions)		00	00	00	00
28. Subtract line 27 from line 25. If any Column reflected a loss on line 26, enter zero here		242 00	00	00	00
29. Apply the loss from line 26, Column A proportionally to the gains in Columns B through E (See instructions)		00	00	00	00
30. Subtract line 29 from line 28					
31. Add the total of Columns B through E, line 30. However, if line 25 does not reflect any gain in Columns B through E, you must enter the total amount of line 26, Columns A through E	(04) 242 00	(06) 00	(08) 00	(10) 00	(12) 00
32. Net capital gain (or loss) for the current year (Add line 25, Column A and line 31. If the result is more than zero, continue with line 33. If the result is less than zero, do not complete lines 33 and 34 and go to line 35)					242 00
33. Less: Net capital loss carryover (Enter in Column D the total net capital loss not used in previous years (Part VI, line 37). Enter in Column E the smaller between the amount of line 33, Column D or the result of line 32 by 80%. This is the deductible amount)				(09) 00	(11) 00
34. Net capital gain (Subtract line 33, Column E from line 32. Enter the result here and in Part 1, line 2B of the return or on line 3B of Schedule CO Individual, as applicable. If line 32 is more than zero, complete Part VII)					242 00
35. If line 32 is a net loss, enter here and in Part 1, line 2B of the return or on line 3B of Schedule CO Individual, as applicable, the smaller of the following amounts: a) the net loss indicated on line 32, or b)(\$1,000)					(16) 00
36. Capital loss available for next year (If line 32 is more than zero, subtract line 33, Column E from line 33, Column D. If line 32 is less than zero, add lines 32 and 33D less line 35)					00

Part VI**Determination of the Net Capital Loss Carryover**

Year	(A) Accumulated Capital Loss	(B) Amount Used	(C) Capital Loss Carryforward (Column A - Column B)	Expiration Date
(18)	(25) 00 (31)	00 (39)	00 (47)	
(19)	(26) 00 (31)	00 (40)	00 (48)	
(20)	(27) 00 (31)	00 (41)	00 (49)	
(21)	(28) 00 (31)	00 (42)	00 (50)	
(22)	(29) 00 (36)	00 (43)	00 (51)	
(23)	(30) 00 (37)	00 (44)	00 (52)	
(24)	(31) 00 (38)	00 (45)	00 (53)	
37. Total net capital loss carryover. (Transfer this amount to Part V, line 33, Column D of this Schedule)		(46) 00	00	

Retention Period: Ten (10) years

PRSoft, Inc. (www.prsoft.com)

Taxpayer's name Ricardo A Rossello Nevares							Social Security Number		
Part VII Determination of the Net Long-Term Capital Gain - For Each Tax Rate									
	Column A	Column B	Column C	Column D	Column E	Column F	Column G		
	Short-Term	Long-Term (15%)	Special Legislation (____%)	Special Legislation (____%)	Special Legislation (____%)	Total Long-Term (Sum of Columns B through E)	Total Net Capital Gain (Sum of Columns A and F)		
1. Net Capital Gain (In the case of short-term gains, transfer the amount on line 25 of Column A, Part V. In the case of long-term gains, transfer the amount on line 30, Columns B through E, Part V, as it corresponds)	(54) 00	(57) 242 00	(61) 00	(65) 00	(69) 00	(73) 00	(79) 242 00	(54) 242 00	
2. Allowable amount as net capital loss not used in previous years claimed on Schedule D Individual (Transfer the amount included on line 33, Column E, Part V)(The amount entered on this line cannot exceed 80% of the amount reflected on line 1, Column G of this Part)	(55) 00								
3. Subtract in Column A line 2 from line 1 (If the result is more than zero, this is the net short-term capital gain. Therefore, enter zero on line 5 of Columns B through E. If the result is less than zero, continue on line 4)	(56) 00								
4. Proportion of the gains according to each tax rate (Divide the amount on line 1, Columns B through E, by the total long-term gains indicated on line 1 of Column F. Enter the result rounded to two decimal places). Add the percentages in Columns B through E and enter the total in Column F. The total shall be 100%		ELECTRONICALLY FILED	ELECTRONICALLY FILED	ELECTRONICALLY FILED	ELECTRONICALLY FILED	ELECTRONICALLY FILED	ELECTRONICALLY FILED		
5. Capital loss carryforward attributable to long-term transactions (Columns B through E) (Multiply line 3 - Column A by line 4 of each Column)	(58) 00	(62) 100 %	(66) %	(70) %	(74) %	(78) 100 %			
6. Net long-term capital gain -	(59) 00	(63) 00	(67) 00	(71) 00	(75) 00	(79) 00			
(a) Net Long-Term Capital Gain subject to 15% (Column B – Subtract line 5 from line 1. Transfer the result to Column D, line 4(a) of Schedule A2 Individual)	(60) 242 00					(76) 242 00			
(b) Net Long-Term Capital Gain subject to the tax rate provided by Special Legislation (Columns C through E – Subtract line 5 from line 1. Transfer the result to Columns F through H, as it corresponds, line 4(a) of Schedule A2 Individual)	(64) 00	(68) 00	(72) 00	(76) 00	(80) 00				
7. Total net long-term capital gain (Column F - Add lines 6(a) and 6(b). Transfer this result to Column A – line 4(a) of Schedule A2 Individual)						(78) 242 00			
8. Net capital gain (If line 3 is more than zero, add lines 3 and 7 and enter the result here. Otherwise, enter here the amount on line 7. This amount must be the same amount reported on line 34, Part V of this Schedule)						(80) 242 00			

Retention Period: Ten (10) years

PRSoft, Inc. (www.prsoft.com)

Schedule FF Individual

Rev. Feb 02 17

INTERESTS, DIVIDENDS AND MISCELLANEOUS INCOME
2016

Taxpayer's name

Ricardo A Rossello Nevares

Social Security Number

Part I	Interests		31	Column A Eligible interest subject to withholding (Section 1023.05(b)) (10%)	Column B Interest from IRA subject to withholding from financial institutions (17%)	Column C Interest subject to withholding from financial institutions (Section 1023.04)(10%)	Column D Interest from financial institutions, including interest from IRA, not subject to withholding	Column E Interest from IRA distributions to Government Pensioners (10%)	Column F	Column G
	Payer's name	Employer Identification Number							Account Number	Other interest subject to withholding %
(01)			00		00	00		00	00	00
(02)			00		00	00		00	00	00
(03)			00		00	00		00	00	00
(04)			00		00	00		00	00	00
(05)			00		00	00		00	00	00
(06)			00		00	00		00	00	00
(07)			00		00	00		00	00	00
(08)			00		00	00		00	00	00
(09)			00		00	00		00	00	00
(10)			00		00	00		00	00	00
1. Interest:										
a) Subtotal of Columns A, C, D, F and G	(11)		00							
b) Total from Schedule F Individual, Part I, Columns C, D and E				(15)	00	(26)	00	(31)	00	
c) Total (Add lines 1(a) and 1(b))				00	(16)	00	(27)	00	(32)	00
2. Less: Expenses related to the purchase of investments (See instructions)	(12)		00	(17)	00	(22)	00	(28)	00	(37)
3. Less: Interest exemption (See instructions)	(13)				(18)	00	(23)	00	(29)	00
4. Total interests (Subtracts lines 2 and 3 from line 1(c), Columns A through G. Transfer the amounts from line 4, Columns A through C, E and F to line 4, Columns A, C, E and F through H, as applicable, of Schedule A2 Individual)	(14)		00	(19)	00	(24)	00	(30)	00	(35)
5. Add line 4, Columns A through G. Transfer to Part I, line 2C of the return or to line 3C of Schedule CO Individual, as applicable										

Retention Period: Ten (10) years

PRSoft, Inc. (www.prsoft.com)

Part II Corporate Dividends

34

Payer's name	Employer Identification Number	Account Number	Column A	Column B	Column C	Column D
			Subject to withholding (15%)	Subject to withholding (____%)	Subject to withholding (____%)	Not subject to withholding
Transferred from 480.6B	(01)		149 00	00	00	00
Transferred from 480.6A	(02)		00	00	00	222 00
	(03)		00	00	00	00
	(04)		00	00	00	00
	(05)		00	00	00	00
	(06)		00	00	00	00
	(07)		00	00	00	00
	(08)		00	00	00	00
	(09)		00	00	00	00
	(10)		00	00	00	00
1. Dividends distributed amount			149 00	(15)	00	(21) 222 00
2. Less: Expenses related to the purchase of investments (See instructions)			00	(16)	00	(22) 00
3. Subtotal (Subtract line 2 from line 1, Columns A through D. Transfer the total of Columns A through C to line 4(f), Columns A, D, and F through H, as applicable, of Schedule A2 Individual)			149 00	(17)	00	(23) 222 00
4. Total (Add line 3, Columns A through D and transfer to Part 1, line 2D of the return or line 3D of Schedule CO Individual)			371 00			

Part III Miscellaneous Income

Payer's name	Employer Identification Number	Account Number	Column A	Column B
			Miscellaneous Income	Income from Prizes and Contests
	(24)		00	00
	(25)		00	00
	(26)		00	00
	(27)		00	00
	(28)		00	00
1. Amount received			00	(32) 00
2. Less: Expenses related to the production of these income (See instructions)			00	(33) 00
3. Subtotal (Subtract line 2 from line 1)			00	(34) 00
4. Total miscellaneous income (Add the total of line 3, Columns A and B. Transfer to Part 1, line 2G of the return or line 3G of Schedule CO Individual, as applicable)			00	(35) 00

Schedule IE Individual

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EXCLUDED AND EXEMPT INCOME**2016**

Taxpayer's name

Taxable year beginning on 1 January, 2016 and ending on 31 December, 2016

Fill in one: (01)

Social Security Number

Ricardo A Rosello Nevares 1 Taxpayer 2 Spouse**Part I****Exclusions from Gross Income****28**Items Considered for the Home
Mortgage Interest LimitationItems subject to
Alternate Basic Tax

1. Life insurance	(02)	00
2. Donations, legacies and inheritances	(03)	00
3. Compensation for injuries or sickness	(04)	00
4. Benefits from federal social security for old-age and survivors	(05)	00
5. Income derived from discharge of debts (See instructions)	(06)	00
6. Child support payments	(07)	00
7. Amounts paid by an employer as reimbursement of expenses related to trips, meals, lodging, entertainment and others	(08)	00
8. Other exclusions (Submit detail)	(09)	00
9. Total (Add lines 1 through 8)	(15)	00

Part II**Exemptions from Gross Income**

1. Fringe benefits paid by the employer in relation to a cafeteria plan	(16)	00
2. Interest upon the following instruments:		
A) Obligations from the United States Government, any of its states, territories or political subdivisions	(17)	00
B) Obligations from the Government of Puerto Rico	(18)	3,025
C) Certain Mortgages (See instructions)	(19)	00
D) Deposits in Puerto Rico interest bearing accounts up to \$2,000 (\$4,000 for married filing jointly) (Schedule FF Individual)	(20)	00
E) Other interest subject to alternate basic tax reported in a Form 480.6D	(21)	00
F) Other interest not subject to alternate basic tax reported in a Form 480.6D	(22)	00
G) Other interest subject to alternate basic tax not reported in a Form 480.6D (Submit detail)	(23)	00
H) Other interest not subject to alternate basic tax not reported in a Form 480.6D (Submit detail)	(24)	00
3. Dividends:		
A) Subject to alternate basic tax reported in a Form 480.6D	(25)	00
B) Not subject to alternate basic tax reported in a Form 480.6D	(26)	2,068
C) Subject to alternate basic tax not reported in a Form 480.6D (Submit detail)	(27)	00
D) Not subject to alternate basic tax not reported in a Form 480.6D (Submit detail)	(28)	00
4. Expenses of priests or ministers (See instructions)	(29)	00
5. Recapture of bad debts, prior taxes, surcharges and other items	(30)	00
6. Stipends received by certain physicians during the internship period (Form 499R-2/W-2PR)	(31)	00
7. Prizes from the Lottery of Puerto Rico and the Additional Lottery	(32)	00
8. Income from pensions or annuities, up to the applicable limitation (Schedule H Individual, Part II, line 8)	(33)	00
9. Christmas Bonus, Summer Bonus and Medicine Bonus	(34)	00
10. Gain from the sale or exchange of principal residence by certain individuals and qualified property (Schedule D1 and/or D3 Individual)	(35)	00
11. Certain income related to the operation of an employees-owned special corporation (See instructions)	(36)	00
12. Cost of living allowance (COLA) (Federal Form W-2)	(37)	00
13. Unemployment compensation	(38)	00
14. Compensation received from active military service in a combat zone (Federal Form W-2)	(39)	00
15. Compensation received by an eligible researcher or scientist (See instructions)	(40)	00
16. Rents from the Historic Zone	(41)	00
17. Compensation to citizens and aliens nonresidents of Puerto Rico for the production of film projects	(42)	00
18. Income from overtime worked by a Puerto Rico Police member (Form 499R-2/W-2PR)	(43)	00
19. Income from sources outside of Puerto Rico (Nonresidents or part-year residents)	(44)	00
20. Remuneration received by employees of foreign governments or international organizations	(45)	00
21. Income from buildings rented to the Government of Puerto Rico for public hospitals, health or convalescent homes, public schools (Contractual force at November 22, 2010) and residential rent under Act 122-2010	(46)	00
22. Income derived by the taxpayer from the resale of personal property or services which acquisition was subject to tax under Section 307(a)(1) or Section 2101 of the Internal Revenue Code of 1994	(47)	00
23. Accumulated Gain in Nonqualified Options	(48)	00
24. Distributions or amounts Previously Notified as Deemed Eligible Distributions under Section 1023.06(j) and 1023.25	(49)	00
25. Distributions from Non-Deductible Individual Retirement Accounts	(50)	00
26. Special Compensation Paid due to a Liquidation or Close of Businesses under Article 10 of Act No. 80 of May 30, 1976	(51)	00
27. Salaries from overtime during Emergency Situations (Form 499R-2/W-2PR)	(52)	00
28. Income from copyrights up to \$10,000 under Act 516-2004	(53)	00
29. Income received by designers and translators up to \$6,000 under Act 516-2004	(54)	00
30. Distributable share on exempt income from pass-through entities (Forms 480.60 EC, 480.60 F. See instructions)	(55)	00
31. Income derived by young people from wages, services rendered, self-employment or new business with special agreement (Act 135-2014) (See instructions)	(56)	00
32. Other payments subject to alternate basic tax reported in a Form 480.6D	(57)	00
33. Other payments not subject to alternate basic tax reported in a Form 480.6D	(58)	00
34. Other exemptions subject to alternate basic tax not reported in a Form 480.6D (Submit detail)	(59)	00
35. Other exemptions not subject to alternate basic tax not reported in a Form 480.6D (Submit detail)	(60)	00
36. Total (Add lines 1 through 35)	(61)	5,093

Part III**Total**

- Total of items considered for the home mortgage interest limitation (Add line 9 of Part I and line 36 of Part II, first column)
- Total of items subject to alternate basic tax (Add line 9 of Part I and line 36 of Part II, second column)

(62)	5,093	00
(63)	00	00

Retention Period: Ten (10) years

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