

Filing status: ☐ Single ☒ Married filing jointly ☐ Married filing separately ☐ Head of household ☐ Qualifying widow(er)

Your first name and initial

Last name

Your social security number

BENJAMIN J.

HOCHSTER

0 6 3 9 8 7 9 1 9

Your standard deduction: ☐ Someone can claim you as a dependent ☐ You were born before January 2, 1954 ☐ You are blind

If joint return, spouse's first name and initial

Last name

Spouse's social security number

RONIT

HOCHSTER

9 6 6 8 4 1 5 7 3

Spouse standard deduction: ☐ Someone can claim your spouse as a dependent ☐ Spouse was born before January 2, 1954☐ Spouse is blind ☐ Spouse itemizes on a separate return or you were dual-status alien☒ Full-year health care coverage or exempt (see inst.)

Home address (number and street). If you have a P.O. box, see instructions.

Apt. no.

Presidential Election Campaign

13 NACHAL KATLAV ST.

11

(see inst.) ☐ You ☐ Spouse

City, town or post office, state, and ZIP code. If you have a foreign address, attach Schedule 6.

If more than four dependents, see inst. and ☒ here ☐

BET SHEMESH

Dependents (see instructions):

(1) First name		(2) Social security number	(3) Relationship to you	(4) <input checked="" type="checkbox"/> if qualifies for (see inst.):	
Last name				Child tax credit	Credit for other dependents
YOAV HOCHSTER		0 6 3 9 8 9 6 8 7	SON	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Yael HOCHSTER		0 6 3 9 8 9 6 9 2	DAUGHTER	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SHIRA HOCHSTER		0 6 3 9 8 9 6 9 0	DAUGHTER	<input checked="" type="checkbox"/>	<input type="checkbox"/>
GILAD HOCHSTER		0 6 3 9 8 9 6 8 3	SON	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Spouse's signature. If a joint return, both must sign.

Date

Spouse's occupation

If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Preparer's name

Preparer's signature

PTIN

Firm's EIN

Check if:

Firm's name

Phone no.

☐ 3rd Party Designee
☐ Self-employed

Firm's address

Paid Preparer Use Only

For Disclosure, Privacy Act, and Paperwork Reduction Act Notice, see separate instructions.

Cat. No. 11320B

Form 1040 (2018)

Form 1040 (2018)

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

**Standard
Deduction for—**

- Single or married
filing separately,
\$12,000
- Married filing
jointly or Qualifying
widow(er),
\$24,000
- Head of
household,
\$18,000
- If you checked
any box under
Standard
deduction,
see instructions.

Refund

Direct deposit?
See instructions.

Amount You Owe

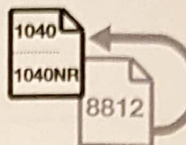
1	Wages, salaries, tips, etc. Attach Form(s) W-2	2a		b	Taxable interest
2a	Tax-exempt interest	3a		b	Ordinary dividends
3a	Qualified dividends	4a		b	Taxable amount
4a	IRAs, pensions, and annuities	5a		b	Taxable amount
5a	Social security benefits				
6	Total income. Add lines 1 through 5. Add any amount from Schedule 1, line 22				
7	Adjusted gross income. If you have no adjustments to income, enter the amount from line 6; otherwise, subtract Schedule 1, line 36, from line 6				
8	Standard deduction or itemized deductions (from Schedule A)				
9	Qualified business income deduction (see instructions)				
10	Taxable income. Subtract lines 8 and 9 from line 7. If zero or less, enter -0-				
11	a Tax (see inst.) 5472 (check if any from: 1 <input type="checkbox"/> Form(s) 8814 2 <input type="checkbox"/> Form 4972 3 <input type="checkbox"/>)				
12	b Add any amount from Schedule 2 and check here				
13	a Child tax credit/credit for other dependents 0 b Add any amount from Schedule 3 and check here <input checked="" type="checkbox"/>				
14	Subtract line 12 from line 11. If zero or less, enter -0-				
15	Other taxes. Attach Schedule 4				
16	Total tax. Add lines 13 and 14				
17	Federal income tax withheld from Forms W-2 and 1099				
18	Refundable credits: a EIC (see inst.) b Sch. 8812 2800 c Form 8863				
19	Add any amount from Schedule 5				
20a	Add lines 16 and 17. These are your total payments				
21	If line 18 is more than line 15, subtract line 15 from line 18. This is the amount you overpaid				
22	Amount of line 19 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>				
23	Routing number <input type="checkbox"/> c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings				
24	Account number				
25	Amount of line 19 you want applied to your 2019 estimated tax 21				
26	Amount you owe. Subtract line 18 from line 15. For details on how to pay, see instructions				
27	Estimated tax penalty (see instructions) 23				

Form 1040 (2018)

Go to www.irs.gov/Form1040 for instructions and the latest information.

SCHEDULE 8812
(Form 1040)

Additional Child Tax Credit



OMB No. 1545-0074

2018

Attachment
Sequence No. 47

Department of the Treasury
Internal Revenue Service (99)

▶ **Attach to Form 1040 or Form 1040NR.**
▶ **Go to www.irs.gov/Schedule8812 for instructions and the latest information.**

Name(s) shown on return

Your social security number

Part I All Filers

Caution: If you file Form 2555 or 2555-EZ, **stop here;** you cannot claim the additional child tax credit.

1 If you are required to use the worksheet in Pub. 972, enter the amount from line 10 of the Child Tax Credit and Credit for Other Dependents Worksheet in the publication. Otherwise:			
1040 filers:	Enter the amount from line 8 of your Child Tax Credit and Credit for Other Dependents Worksheet (see the instructions for Form 1040, line 12a).	1	5000
1040NR filers:	Enter the amount from line 8 of your Child Tax Credit and Credit for Other Dependents Worksheet (see the instructions for Form 1040NR, line 49).	2	0
2	Enter the amount from Form 1040, line 12a, or Form 1040NR, line 49	3	5000
3	Subtract line 2 from line 1. If zero, stop here; you cannot claim this credit	4	2800
4	Number of qualifying children under 17 with the required social security number: <u>2</u> X \$1,400. Enter the result. If zero, stop here; you cannot claim this credit TIP: The number of children you use for this line is the same as the number of children you used for line 1 of the Child Tax Credit and Credit for Other Dependents Worksheet.	5	2800
5	Enter the smaller of line 3 or line 4		
6a	Earned income (see separate instructions)	6a	72753
b	Nontaxable combat pay (see separate instructions)	6b	
7	Is the amount on line 6a more than \$2,500? <input type="checkbox"/> No. Leave line 7 blank and enter -0- on line 8. <input checked="" type="checkbox"/> Yes. Subtract \$2,500 from the amount on line 6a. Enter the result	7	70253
8	Multiply the amount on line 7 by 15% (0.15) and enter the result Next. On line 4, is the amount \$4,200 or more? <input checked="" type="checkbox"/> No. If line 8 is zero, stop here; you cannot claim this credit. Otherwise, skip Part II and enter the smaller of line 5 or line 8 on line 15. <input type="checkbox"/> Yes. If line 8 is equal to or more than line 5, skip Part II and enter the amount from line 5 on line 15. Otherwise, go to line 9.	8	10537

Part II Certain Filers Who Have Three or More Qualifying Children

9	Withheld social security, Medicare, and Additional Medicare taxes from Form(s) W-2, boxes 4 and 6. If married filing jointly, include your spouse's amounts with yours. If your employer withheld or you paid Additional Medicare Tax or tier 1 RRTA taxes, see separate instructions	9	
10	1040 filers: Enter the total of the amounts from Schedule 1 (Form 1040), line 27, and Schedule 4 (Form 1040), line 58, plus any taxes that you identified using code "UT" and entered on Schedule 4 (Form 1040), line 62.	10	
	1040NR filers: Enter the total of the amounts from Form 1040NR, lines 27 and 56, plus any taxes that you identified using code "UT" and entered on line 60.	11	
11	Add lines 9 and 10	12	
12	1040 filers: Enter the total of the amounts from Form 1040, line 17a, and Schedule 5 (Form 1040), line 72. 1040NR filers: Enter the amount from Form 1040NR, line 67.	13	
13	Subtract line 12 from line 11. If zero or less, enter -0-	14	
14	Enter the larger of line 8 or line 13 Next, enter the smaller of line 5 or line 14 on line 15.		

Part III Additional Child Tax Credit

15	This is your additional child tax credit	15	2800
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1040
1040NR

Enter this amount on
Form 1040, line 17b, or
Form 1040NR, line 64.

SCHEDULE 6
(Form 1040)

Foreign Address and Third Party Designee

OMB No. 1545-0074

2018

Attachment
Sequence No. **05A**

Department of the Treasury
Internal Revenue Service

► Attach to Form 1040.

► Go to www.irs.gov/Form1040 for instructions and the latest information.

Name(s) shown on Form 1040

Your social security number

063-98-7919

BENJAMIN J. HOCHSTER

**Foreign
Address**

Foreign country name

Foreign province/county

Foreign postal code

ISRAEL

9962043

**Third Party
Designee**

Do you want to allow another person to discuss this return with the IRS (see instructions)? ☐ Yes. Complete below. ☒ No

Designee's
name ►

Phone
no. ►

Personal identification number
(PIN) ►

For Paperwork Reduction Act Notice, see your tax return instructions.

Cat. No. 71483N

Schedule 6 (Form 1040) 2018

SCHEDULE 3
(Form 1040)

Nonrefundable Credits

OMB No. 1545-0074

Department of the Treasury
Internal Revenue Service

▶ **Attach to Form 1040.**
▶ **Go to www.irs.gov/Form1040 for instructions and the latest information.**

2018
Attachment
Sequence No. **03**

Name(s) shown on Form 1040

Your social security number

BENJAMIN J HOCHSTER

063-98-7919

Nonrefundable	48	Foreign tax credit. Attach Form 1116 if required	48	5472
Credits	49	Credit for child and dependent care expenses. Attach Form 2441	49	
	50	Education credits from Form 8863, line 19	50	
	51	Retirement savings contributions credit. Attach Form 8880	51	
	52	Reserved	52	
	53	Residential energy credit. Attach Form 5695	53	
	54	Other credits from Form a <input type="checkbox"/> 3800 b <input type="checkbox"/> 8801 c <input type="checkbox"/>	54	
	55	Add the amounts in the far right column. Enter here and include on Form 1040, line 12	55	5472

For Paperwork Reduction Act Notice, see your tax return instructions.

Cat. No. 71480G

Schedule 3 (Form 1040) 2018

Foreign Tax Credit

OMB No. 1545-0121

Department of the Treasury
Internal Revenue Service (99)(Individual, Estate, or Trust)
▶ Attach to Form 1040, 1040NR, 1041, or 990-T.▶ Go to www.irs.gov/Form1116 for instructions and the latest information.2018
Attachment
Sequence No. 19

Name

BENJAMIN J HOCHSTER

Identifying number as shown on page 1 of your tax return

063-98-7919

Use a separate Form 1116 for each category of income listed below. See *Categories of Income* in the instructions. Check only one box on each Form 1116. Report all amounts in U.S. dollars except where specified in Part II below.

- ☐ a Section 951A income ☐ c Passive category income ☐ e Section 901(j) income ☐ g Lump-sum distributions
☐ b Foreign branch income ☒ d General category income ☐ f Certain income re-sourced by treaty

h Resident of (name of country) ▶ ISRAEL

Note: If you paid taxes to only one foreign country or U.S. possession, use column A in Part I and line A in Part II. If you paid taxes to more than one foreign country or U.S. possession, use a separate column and line for each country or possession.

Part I Taxable Income or Loss From Sources Outside the United States (for category checked above)

		Foreign Country or U.S. Possession			Total (Add cols. A, B, and C.)
		A	B	C	
i Enter the name of the foreign country or U.S. possession ▶ ISRAEL					
1a Gross income from sources within country shown above and of the type checked above (see instructions): SALARY					
		72753			1a
b Check if line 1a is compensation for personal services as an employee, your total compensation from all sources is \$250,000 or more, and you used an alternative basis to determine its source (see instructions) <input type="checkbox"/>					
Deductions and losses (Caution: See instructions.):					
2 Expenses definitely related to the income on line 1a (attach statement)					
3 Pro rata share of other deductions not definitely related:					
a Certain itemized deductions or standard deduction (see instructions)					
b Other deductions (attach statement)					
c Add lines 3a and 3b					
d Gross foreign source income (see instructions)					
e Gross income from all sources (see instructions)					
f Divide line 3d by line 3e (see instructions)					
g Multiply line 3c by line 3f					
4 Pro rata share of interest expense (see instructions):					
a Home mortgage interest (use the Worksheet for Home Mortgage Interest in the instructions)					
b Other interest expense					
5 Losses from foreign sources					
6 Add lines 2, 3g, 4a, 4b, and 5					6
7 Subtract line 6 from line 1a. Enter the result here and on line 15, page 2 ▶					7

Part II Foreign Taxes Paid or Accrued (see instructions)

Country	Credit is claimed for taxes (you must check one) (j) <input checked="" type="checkbox"/> Paid (k) <input type="checkbox"/> Accrued	Foreign taxes paid or accrued								
		In foreign currency				In U.S. dollars				
		Taxes withheld at source on:				Taxes withheld at source on:				
		(l) Date paid or accrued	(m) Dividends	(n) Rents and royalties	(o) Interest	(p) Other foreign taxes paid or accrued	(q) Dividends	(r) Rents and royalties	(s) Interest	(t) Other foreign taxes paid or accrued
A	12/31/2018				28818				8016	8016
B										
C										
8 Add lines A through C, column (u). Enter the total here and on line 9, page 2 ▶										8016

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11440U

Form 1116 (2018)

Part III Figuring the Credit

9	Enter the amount from line 8. These are your total foreign taxes paid or accrued for the category of income checked above Part I	9	8016	
10	Carryback or carryover (attach detailed computation) (If your income was section 951A income (box a above Part I), leave line 10 blank.)	10		
11	Add lines 9 and 10	11	8016	
12	Reduction in foreign taxes (see instructions)	12	()	
13	Taxes reclassified under high tax kickout (see instructions)	13		
14	Combine lines 11, 12, and 13. This is the total amount of foreign taxes available for credit	14		8016
15	Enter the amount from line 7. This is your taxable income or (loss) from sources outside the United States (before adjustments) for the category of income checked above Part I (see instructions)	15	72753	
16	Adjustments to line 15 (see instructions)	16		
17	Combine the amounts on lines 15 and 16. This is your net foreign source taxable income. (If the result is zero or less, you have no foreign tax credit for the category of income you checked above Part I. Skip lines 18 through 22. However, if you are filing more than one Form 1116, you must complete line 20.)	17	72753	
18	Individuals: Enter the amount from Form 1040, line 10; or Form 1040NR, line 41. Estates and trusts: Enter your taxable income without the deduction for your exemption Caution: If you figured your tax using the lower rates on qualified dividends or capital gains, see instructions.	18	48753	
19	Divide line 17 by line 18. If line 17 is more than line 18, enter "1"	19		1
20	Individuals: Enter the total of Form 1040, line 11a, and Schedule 2 (Form 1040), line 46. If you are a nonresident alien, enter the total of Form 1040NR, lines 42 and 44. Estates and trusts: Enter the amount from Form 1041, Schedule G, line 1a; or the total of Form 990-T, lines 40, 41, and 43. Foreign estates and trusts should enter the amount from Form 1040NR, line 42 Caution: If you are completing line 20 for separate category g (lump-sum distributions), see instructions.	20		5472
21	Multiply line 20 by line 19 (maximum amount of credit)	21		5472
22	Enter the smaller of line 14 or line 21. If this is the only Form 1116 you are filing, skip lines 23 through 30 and enter this amount on line 31. Otherwise, complete the appropriate line in Part IV (see instructions)	22		5472

Part IV Summary of Credits From Separate Parts III (see instructions)

23	Credit for taxes on section 951A income	23		
24	Credit for taxes on foreign branch income	24		
25	Credit for taxes on passive category income	25		
26	Credit for taxes on general category income	26		
27	Credit for taxes on section 901(j) income	27		
28	Credit for taxes on certain income re-sourced by treaty	28		
29	Credit for taxes on lump-sum distributions	29		
30	Add lines 23 through 29	30		
31	Enter the smaller of line 20 or line 30	31		5472
32	Reduction of credit for international boycott operations. See instructions for line 12	32		
33	Subtract line 32 from line 31. This is your foreign tax credit . Enter here and on Schedule 3 (Form 1040), line 48; Form 1040NR, line 46; Form 1041, Schedule G, line 2a; or Form 990-T, line 45a	33		5472

Form **8965**Department of the Treasury
Internal Revenue Service**Health Coverage Exemptions**

▶ Attach to Form 1040.

▶ Go to www.irs.gov/Form8965 for instructions and the latest information.

OMB No. 1545-0074

2018Attachment
Sequence No. **75**

Name as shown on return

Your social security number

063-98-7919**BENJAMIN J. HOCHSTER**

Complete this form if you have a Marketplace-granted coverage exemption or you are claiming a coverage exemption on your return.

Part I Marketplace-Granted Coverage Exemptions for Individuals. If you and/or a member of your tax household have an exemption granted by the Marketplace, complete Part I.

	(a) Name of Individual	(b) SSN	(c) Exemption Certificate Number
1			
2			
3			
4			
5			
6			

Part II Coverage Exemptions Claimed on Your Return for Your Household

7 If you are claiming a coverage exemption because your household income or gross income is below the filing threshold, check here ☐

Part III Coverage Exemptions Claimed on Your Return for Individuals. If you and/or a member of your tax household are claiming an exemption on your return, complete Part III.

	(a) Name of Individual	(b) SSN	(c) Exemption Type	(d) Full Year	(e) Jan	(f) Feb	(g) Mar	(h) Apr	(i) May	(j) June	(k) July	(l) Aug	(m) Sept	(n) Oct	(o) Nov	(p) Dec
8	BENJAMIN J. HOCHSTER	063-98-7919	C	V												
9	RONIT HOCHSTER	966-84-1573	C	V												
10	YOAV HOCHSTER	063-98-9687	C	V												
11	Yael HOCHSTER	063-98-9692	C	V												
12	SHIRA HOCHSTER	063-98-9690	C	V												
13	GILAD HOCHSTER	063-98-9683	C	v												

For Privacy Act and Paperwork Reduction Act Notice, see your tax return instructions.

Cat. No. 37787G

Form **8965** (2018)