

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.

Firm's address

☐ 3rd Party Designee  
☐ Self-employed

Paid Preparer Use Only