

For the year Jan. 1–Dec. 31, 2015, or other tax year beginning , 2015, ending , 20

Your first name and initial **BENJAMIN J.** Last name **HOCHSTER** See separate instructions.  
If a joint return, spouse's first name and initial Last name **HOCHSTER** Your social security number **0 6 3 9 8 7 9 1 9**

**RONIT** Last name **HOCHSTER** Spouse's social security number **9 6 6 8 4 1 5 7 3**

Home address (number and street). If you have a P.O. box, see instructions. **13 NACHAL KATLAV ST.** Apt. no. **11**

City, town or post office, state, and ZIP code. If you have a foreign address, also complete spaces below (see instructions).

**BET SHEMESH** Foreign country name **ISRAEL** Foreign province/state/county Foreign postal code **9962043**

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**Filing Status** 1 ☐ Single 4 ☐ Head of household (with qualifying person). (See instructions.) 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. 2 ☒ Married filing jointly (even if only one had income) 3 ☐ Married filing separately. Enter spouse's SSN above and full name here. ▶

**Exemptions** 6a ☒ Yourself. If someone can claim you as a dependent, do not check box 6a. b ☒ Spouse

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**Income** 7 Wages, salaries, tips, etc. Attach Form(s) W-2 7 50,117

**Income** 8a Taxable interest. Attach Schedule B if required 8a

**Income** 9a Ordinary dividends. Attach Schedule B if required 9a

**Income** 10 Taxable refunds, credits, or offsets of state and local income taxes 10

**Income** 11 Alimony received 11

**Income** 12 Business income or (loss). Attach Schedule C or C-EZ 12

**Income** 13 Capital gain or (loss). Attach Schedule D if required. If not required, check here ▶ ☐ 13

**Income** 14 Other gains or (losses). Attach Form 4797 14

**Income** 15a IRA distributions 15a b Taxable amount 15b

**Income** 16a Pensions and annuities 16a b Taxable amount 16b

**Income** 17 Rental real estate, royalties, partnerships, S corporations, trusts, etc. Attach Schedule E 17

**Income** 18 Farm income or (loss). Attach Schedule F 18

**Income** 19 Unemployment compensation 19

**Income** 20a Social security benefits 20a b Taxable amount 20b

**Income** 21 Other income. List type and amount 21

**Income** 22 Combine the amounts in the far right column for lines 7 through 21. This is your total income ▶ 22 50,117

**Adjusted Gross Income** 23 Educator expenses 23

**Adjusted Gross Income** 24 Certain business expenses of reservists, performing artists, and fee-basis government officials. Attach Form 2106 or 2106-EZ 24

**Adjusted Gross Income** 25 Health savings account deduction. Attach Form 8889 25

**Adjusted Gross Income** 26 Moving expenses. Attach Form 3903 26

**Adjusted Gross Income** 27 Deductible part of self-employment tax. Attach Schedule SE 27

**Adjusted Gross Income** 28 Self-employed SEP, SIMPLE, and qualified plans 28

**Adjusted Gross Income** 29 Self-employed health insurance deduction 29

**Adjusted Gross Income** 30 Penalty on early withdrawal of savings 30

**Adjusted Gross Income** 31a Alimony paid b Recipient's SSN ▶ 31a

**Adjusted Gross Income** 32 IRA deduction 32

**Adjusted Gross Income** 33 Student loan interest deduction 33

**Adjusted Gross Income** 34 Tuition and fees. Attach Form 8917 34

**Adjusted Gross Income** 35 Domestic production activities deduction. Attach Form 8903 35

**Adjusted Gross Income** 36 Add lines 23 through 35 36

**Adjusted Gross Income** 37 Subtract line 36 from line 22. This is your adjusted gross income ▶ 37 50,117

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## Tax and Credits

## Standard Deduction for—

• People who check any box on line 39a or 39b or who can be claimed as a dependent, see instructions.

• All others:  
Single or Married filing separately, \$6,300  
Married filing jointly or Qualifying widow(er), \$12,600  
Head of household, \$9,250

## Other Taxes

## Payments

If you have a qualifying child, attach Schedule EIC.

## Refund

Direct deposit? See instructions.

## Amount You Owe

## Third Party Designee

## Sign Here

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

## Paid Preparer Use Only

38	Amount from line 37 (adjusted gross income)	38	50,117
39a	Check <input type="checkbox"/> You were born before January 2, 1951, <input type="checkbox"/> Blind. <input type="checkbox"/> Spouse was born before January 2, 1951, <input type="checkbox"/> Blind. Total boxes checked <b>39a</b>		
b	If your spouse itemizes on a separate return or you were a dual-status alien, check here <b>39b</b>		
40	Itemized deductions (from Schedule A) or your standard deduction (see left margin)	40	12,600
41	Subtract line 40 from line 38	41	37,517
42	Exemptions. If line 38 is \$154,950 or less, multiply \$4,000 by the number on line 6d. Otherwise, see instructions	42	24,000
43	Taxable income. Subtract line 42 from line 41. If line 42 is more than line 41, enter -0-	43	13,517
44	Tax (see instructions). Check if any from: a <input type="checkbox"/> Form(s) 8814 b <input type="checkbox"/> Form 4972 c <input type="checkbox"/>	44	1,353
45	Alternative minimum tax (see instructions). Attach Form 6251	45	
46	Excess advance premium tax credit repayment. Attach Form 8962	46	
47	Add lines 44, 45, and 46	47	1,353
48	Foreign tax credit. Attach Form 1116 if required	48	1,353
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	Child tax credit. Attach Schedule 8812, if required	52	
53	Residential energy credits. 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 lines 48 through 54. These are your total credits	55	1,353
56	Subtract line 55 from line 47. If line 55 is more than line 47, enter -0-	56	0
57	Self-employment tax. Attach Schedule SE	57	
58	Unreported social security and Medicare tax from Form: a <input type="checkbox"/> 4137 b <input type="checkbox"/> 8919	58	
59	Additional tax on IRAs, other qualified retirement plans, etc. Attach Form 5329 if required	59	
60a	Household employment taxes from Schedule H	60a	
b	First-time homebuyer credit repayment. Attach Form 5405 if required	60b	
61	Health care: individual responsibility (see instructions) Full-year coverage <input type="checkbox"/>	61	
62	Taxes from: a <input type="checkbox"/> Form 8959 b <input type="checkbox"/> Form 8960 c <input type="checkbox"/> Instructions; enter code(s)	62	
63	Add lines 56 through 62. This is your total tax	63	0
64	Federal income tax withheld from Forms W-2 and 1099	64	
65	2015 estimated tax payments and amount applied from 2014 return	65	
66a	Earned income credit (EIC)	66a	
b	Nontaxable combat pay election <b>66b</b>		
67	Additional child tax credit. Attach Schedule 8812	67	4,000
68	American opportunity credit from Form 8863, line 8	68	
69	Net premium tax credit. Attach Form 8962	69	
70	Amount paid with request for extension to file	70	
71	Excess social security and tier 1 RRTA tax withheld	71	
72	Credit for federal tax on fuels. Attach Form 4136	72	
73	Credits from Form: a <input type="checkbox"/> 2439 b <input type="checkbox"/> Reserved c <input type="checkbox"/> 8885 d <input type="checkbox"/>	73	
74	Add lines 64, 65, 66a, and 67 through 73. These are your total payments	74	4,000
75	If line 74 is more than line 63, subtract line 63 from line 74. This is the amount you overpaid	75	4,000
76a	Amount of line 75 you want refunded to you. If Form 8888 is attached, check here <input type="checkbox"/>	76a	4,000
b	Routing number		
c	Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
d	Account number		
77	Amount of line 75 you want applied to your 2016 estimated tax	77	
78	Amount you owe. Subtract line 74 from line 63. For details on how to pay, see instructions	78	
79	Estimated tax penalty (see instructions)	79	

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)

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 *Baron Joshua Hochster* Date *12/2/17* Your occupation *TEACHER* Daytime phone number *972-54-8040040*  
Spouse's signature. If a joint return, both must sign. *Ronit Hochster* Date *12/2/17* Spouse's occupation *TEACHER* If the IRS sent you an Identity Protection PIN, enter it here (see inst.)

Print/Type preparer's name  Preparer's signature  Date  Check ☐ if self-employed PTIN

Firm's name  Firm's EIN

Firm's address  Phone no.

Form 1040 (2015)