

Schedule R (Form 1040)

Department of the Treasury Internal Revenue Service

Credit for the Elderly or the Disabled

Attach to Form 1040. See separate instructions for Schedule R.

OMB No. 1545-0074

1993

Attachment Sequence No. 16

Name(s) shown on Form 1040

Your social security number

You may be able to use Schedule R to reduce your tax if by the end of 1993:

- You were age 65 or older, OR You were under age 65, you retired on permanent and total disability, and you received taxable disability income.

But you must also meet other tests. See the separate instructions for Schedule R.

Note: In most cases, the IRS can figure the credit for you. See page 25 of the Form 1040 instructions.

Part I Check the Box for Your Filing Status and Age

Table with 3 columns: If your filing status is, And by the end of 1993, Check only one box. Rows include Single, Head of household, Married filing a joint return, Married filing a separate return with various age and disability conditions.

If you checked box 1, 3, 7, or 8, skip Part II and complete Part III on the back. All others, complete Parts II and III.

Part II Statement of Permanent and Total Disability (Complete only if you checked box 2, 4, 5, 6, or 9 above.)

IF: 1 You filed a physician's statement for this disability for 1983 or an earlier year, or you filed a statement for tax years after 1983 and your physician signed line B on the statement, AND

2 Due to your continued disabled condition, you were unable to engage in any substantial gainful activity in 1993, check this box

- If you checked this box, you do not have to file another statement for 1993.
If you did not check this box, have your physician complete the following statement.

Physician's Statement (See instructions at bottom of page 2.)

I certify that Name of disabled person

was permanently and totally disabled on January 1, 1976, or January 1, 1977, OR was permanently and totally disabled on the date he or she retired. If retired after December 31, 1976, enter the date retired.

Physician: Sign your name on either line A or B below.

A The disability has lasted or can be expected to last continuously for at least a year

B There is no reasonable probability that the disabled condition will ever improve

Physician's name Physician's address

Part III Figure Your Credit

10 If you checked (in Part I):	Enter:			
Box 1, 2, 4, or 7	\$5,000	}	. . . . .	10
Box 3, 5, or 6	\$7,500			
Box 8 or 9	\$3,750			
Caution: If you checked box 2, 4, 5, 6, or 9 in Part I, you MUST complete line 11 below. All others, skip line 11 and enter the amount from line 10 on line 12.				
11 If you checked:				
• Box 6 in Part I, add \$5,000 to the taxable disability income of the spouse who was under age 65. Enter the total.	}	. . . . .	11	
• Box 2, 4, or 9 in Part I, enter your taxable disability income.				
• Box 5 in Part I, add your taxable disability income to your spouse's taxable disability income. Enter the total.				
TIP: For more details on what to include on line 11, see the instructions.				
12				
• If you completed line 11, look at lines 10 and 11. Enter the smaller of the two amounts.	}	. . . . .	12	
• All others, enter the amount from line 10.				
13				
Enter the following pensions, annuities, or disability income that you (and your spouse if filing a joint return) received in 1993:				
a Nontaxable part of social security benefits, and Nontaxable part of railroad retirement benefits treated as social security. See instructions.	}	. . . . .	13a	
b Nontaxable veterans' pensions, and Any other pension, annuity, or disability benefit that is excluded from income under any other provision of law. See instructions.				
c Add lines 13a and 13b. (Even though these income items are not taxable, they must be included here to figure your credit.) If you did not receive any of the types of nontaxable income listed on line 13a or 13b, enter -0- on line 13c			13c	
14				
Enter the amount from Form 1040, line 32	14			
15 If you checked (in Part I):	Enter:			
Box 1 or 2	\$7,500	}	. . . . .	15
Box 3, 4, 5, 6, or 7	\$10,000			
Box 8 or 9	\$5,000			
16				
Subtract line 15 from line 14. If line 15 is more than line 14, enter -0-	16			
17				
Divide line 16 above by 2	17			
18				
Add lines 13c and 17	18			
19				
Subtract line 18 from line 12. If line 18 is more than line 12, stop here; you cannot take the credit. Otherwise, go to line 21	19			
20				
Decimal amount used to figure the credit	20		× .15	
21				
Multiply line 19 above by the decimal amount (.15) on line 20. Enter the result here and on Form 1040, line 42. Caution: If you file Schedule C, C-EZ, D, E, or F (Form 1040), your credit may be limited. See the instructions for line 21 for the amount of credit you can claim	21			

Instructions for Physician's Statement

Taxpayer

If you retired after December 31, 1976, enter the date you retired in the space provided in Part II.

Physician

A person is permanently and totally disabled if **both** of the following apply:
1. He or she cannot engage in any substantial gainful activity because of a physical or mental condition, and

2. A physician determines that the disability has lasted or can be expected to last continuously for at least a year or can lead to death.