## Schedule R (Form 1040)

## **Credit for the Elderly or the Disabled**

► Attach to Form 1040 or 1040-SR.

1040-SR ▶ Go to www.irs.gov/ScheduleR for instructions and the latest information.

OMB No. 1545-0074

Attachment Sequence No. 16

Your social security number

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on return

You may be able to take this credit and reduce your tax if by the end of 2021:

- You were age 65 or older
- 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 instructions.

| •       |  |
|---------|--|
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|         |  |
|         |  |

In most cases, the IRS can figure the credit for you. See instructions.

| If your filing status is:                  | And by the end of 2021:   | Check on          | ıly o | ne box: |
|--|---|-------------------|-------|---------|
| Single,                                    | <b>1</b> You were 65 or older   |                   | 1     |         |
| Head of household, or Qualifying widow(er) | 2 You were under 65 and you retired on permanent and total disability   | ·                 | 2     |         |
|  | 3 Both spouses were 65 or older   |                   | 3     |         |
|  | 4 Both spouses were under 65, but only one spouse retired on permatotal disability  |                   | 4     |         |
| Married filing jointly                     | <b>5</b> Both spouses were under 65, and both retired on permanent disability   |                   | 5     |         |
|  | 6 One spouse was 65 or older, and the other spouse was under 65 a on permanent and total disability   |                   | 6     |         |
|  | 7 One spouse was 65 or older, and the other spouse was under 65 retired on permanent and total disability   |                   | 7     |         |
| Married filing                             | 8 You were 65 or older and you lived apart from your spouse for all of 20   | 21                | 8     |         |
| separately                                 | <b>9</b> You were under 65, you retired on permanent and total disability lived apart from your spouse for all of 2021                                  |                   | 9     |         |
| Did you check                              | Yes Skip Part II and complete Part III on the back.   |                   |       |         |
| box 1, 3, 7, or 8?                         | No Complete Parts II and III.   |                   |       |         |
| Part II Statement of                       | Permanent and Total Disability (Complete only if you checked box 2, 4, 5, 6   | s, or 9 above     | ə.)   |         |
|  | cian's statement for this disability for 1983 or an earlier year, or you rears after 1983 and your physician signed line B on the statement, <b>and</b> | filed or go       | ot a  |         |
|  | nued disabled condition, you were unable to engage in any substantial box   | gainful act       | ivity |         |
| <ul> <li>If you checked t</li> </ul>       | his box, you don't have to get another statement for 2021.  |                   |       |         |
|  | ck this box, have your physician complete the statement in the instruction  | ons. You <b>m</b> | nust  |         |

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|      | 611 (1111 1040) 2021   |    | raye Z |
|------|--|----|--------|
| Part |  |    |        |
| 10   | If you checked (in Part I): Enter:   |    |        |
|      | Box 1, 2, 4, or 7  |    |        |
|      | Box 3, 5, or 6   | 10 |        |
|      | Box 8 or 9   |    |        |
|      | Did you shook  |    |        |
|      | box 2, 4, 5, 6, Yes You must complete line 11.   |    |        |
|      |  |    |        |
|      |  |    |        |
| 11   | If you checked (in Part I): on line 12 and go to line 13.  |    |        |
|      | Box 6, add \$5,000 to the taxable disability income of the   |    |        |
|      | spouse who was under age 65. Enter the total.  |    |        |
|      | • Box 2, 4, or 9, enter your taxable disability income.  | 11 |        |
|      | Box 5, add your taxable disability income to your spouse's   |    |        |
|      | taxable disability income. Enter the total.  |    |        |
|      | tartario diodomity moonio. Enter title   |    |        |
| TIP  | For more details on what to include on line 11, see Figure Your Credit in the instructions.                                      |    |        |
|      | To more detaile on what to molddo on into TT, 600 Tigalo Todi Orodicin the metadione.  |    |        |
| 12   | If you completed line 11, enter the <b>smaller</b> of line 10 or line 11. <b>All others,</b> enter the amount                    |    |        |
| 12   | from line 10   | 12 |        |
| 13   | Enter the following pensions, annuities, or disability income that you   |    |        |
| 13   | (and your spouse if filing jointly) received in 2021.  |    |        |
| _    | Nontaxable part of social security benefits and nontaxable part of   |    |        |
| а    | railroad retirement benefits treated as social security (see instructions)   |    |        |
| h    | , ( )  | -  |        |
| D    | Nontaxable veterans' pensions and any other pension, annuity, or disability benefit that is excluded from income under any other |    |        |
|      | provision of law (see instructions)  |    |        |
|      |  | -  |        |
| С    | Add lines 13a and 13b. (Even though these income items aren't  |    |        |
|      | taxable, they <b>must</b> be included here to figure your credit.) If you didn't   |    |        |
|      | receive any of the types of nontaxable income listed on line 13a or 13b, enter -0- on line 13c                                   |    |        |
|      |  | -  |        |
| 14   | Enter the amount from Form 1040 or 1040-SR, line 11  |    |        |
| 45   |  |    |        |
| 15   | If you checked (in Part I): Enter:   |    |        |
|      | Box 1 or 2   |    |        |
|      | Box 3, 4, 5, 6, or 7 \$10,000  |    |        |
|      | Box 8 or 9   |    |        |
| 16   | Subtract line 15 from line 14. If zero or less, enter  |    |        |
|      | -0   |    |        |
| 17   | Enter one hair of line to 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  | 40 |        |
| 18   | Add lines 13c and 17   | 18 |        |
| 19   | Subtract line 18 from line 12. If zero or less, stop; you can't take the credit. Otherwise,                                      | 10 |        |
|      | go to line 20  | 19 |        |
| 20   | Multiply line 19 by 15% (0.15)   | 20 |        |
| 21   | Tax liability limit. Enter the amount from the Credit Limit Worksheet in the instructions  | 21 |        |
| 22   | Credit for the elderly or the disabled. Enter the smaller of line 20 or line 21. Also enter                                      |    |        |
|      | this amount on Schedule 3 (Form 1040), line 6d   | 22 |        |