SCHEDULE R (Form 1040)

Credit for the Elderly or the Disabled

OMB No. 1545-0074

Attachment Sequence No. 16

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Attach to Form 1040 or 1040-SR.

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

Department of the Treasury				
Internal Revenue Service				
Name(s) shown on return				

Your social security number

9

12

•	his credit and reduce your tax if by the end of 2024:		
• You were age 65 or olde	you received taxable disability income.	lity, i	and
But you must also meet of	her tests. See instructions.		
In most cases, the IF	S can figure the credit for you. See instructions.		
Part I Check the Box	for Your Filing Status and Age		
If your filing status is:	And by the end of 2024: Check on	ly o	ne box:
Single, Head of household, or	1 You were 65 or older	1	
	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 permanent and total disability	4	
Married filing jointly	5 Both spouses were under 65, and both retired on permanent and total disability	5	
	6 One spouse was 65 or older, and the other spouse was under 65 and retired on permanent and total disability	6	
	7 One spouse was 65 or older, and the other spouse was under 65 and not 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 2024	8	
separately	9 You were under 65, you retired on permanent and total disability, and you lived apart from your spouse for all of 2024	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 I	Permanent and Total Disability (Complete only if you checked box 2, 4, 5, 6, or 9 above	.)	
	an's statement for this disability for 1983 or an earlier year, or you filed or go ars after 1983 and your physician signed line B on the statement, and	ot a	
2 Due to your continuin 2024, check this l	led disabled condition, you were unable to engage in any substantial gainful actions	vity	
If you checked th	s box, you don't have to get another statement for 2024.		
-	k this box, have your physician complete the statement in the instructions. You m nt for your records.	ust	

Part	III Figure Your Credit	· · · · ·
10	If you checked (in Part I): Enter:	
	Box 1, 2, 4, or 7	
	Box 3, 5, or 6	10
	Box 8 or 9 \$3,750 J	
	Did you check Yes. You must complete line 11.	
	box 2, 4, 5, 6,	
	or 9 in Part I? No. Enter the amount from line 10 on line 12 and go to line 13.	
11	If you checked (in Part I):	
	• Box 6, add \$5,000 to the taxable disability income of the	
	spouse who was under age 65. Enter the total.	44
	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. 	
TIP	For more details on what to include on line 11, see Figure Your Credit in the instructions.	
12	If you completed line 11, enter the smaller of line 10 or line 11. All others, enter the amount	
	from line 10	12
13	Enter the following pensions, annuities, or disability income that you	
	(and your spouse if filing jointly) received in 2024.	
а	Nontaxable part of social security benefits and nontaxable part of	
	railroad retirement benefits treated as social security (see instructions)	-
b	· · · · · · · · · · · · · · · · · · ·	
	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 must 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,	-
17		
15	If you checked (in Part I): Enter:	
	Box 1 or 2	
	Box 3, 4, 5, 6, or 7 \$10,000 } 15	
	Box 8 or 9	
16	Subtract line 15 from line 14. If zero or less, enter	
	-0	
17	Enter one-half of line 16	
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,	
00		19
20 21	Multiply line 19 by 15% (0.15)	20 21
21 22	Credit for the elderly or the disabled. Enter the smaller of line 20 or line 21. Also enter	<u> </u>
<u> </u>	this amount on Schedule 3 (Form 1040), line 6d	22

Schedule R (Form 1040) 2024