Schedule R (Form 1040A or 1040)

Credit for the Elderly or the Disabled

OMB No. 1545-0074

20 1 1

Attachment
Sequence No. 16

Your social security number

Department of the Treasury Internal Revenue Service (99)

Name(s) shown on Form 1040A or 1040

Complete and attach to Form 1040A or 1040.

You may be able to take this credit and reduce your tax if by the end of 2011

- You were age 65 or older
- OI
- 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.

Part I Check the Bo	ox for Your Filing Status and Age And by the end of 2011:	Check or	nly o	ne box:
Single, Head of household, or	1 You were 65 or older		1	
Qualifying widow(er)	2 You were under 65 and you retired on permanent and total disability	<i>.</i>	2	
	3 Both spouses were 65 or older		3	
	4 Both spouses were under 65, but only one spouse retired on permitotal disability		4	
Married filing jointly	5 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 69 retired on permanent and total disability	5 and not 	7	
Married filing separately	8 You were 65 or older and you lived apart from your spouse for all of	2011 .	8	
	9 You were under 65, you retired on permanent and total disability lived apart from your spouse for all of 2011		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	or 9 abov	e.)	
	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, and	filed or g	ot a	
	nued disabled condition, you were unable to engage in any substantial s box		tivity •	
 If you checked t 	his box, you do not have to get another statement for 2011.			
	eck this box, have your physician complete the statement in the instruction	ons. You n	nust	

Part	II 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			
	Did you check			
	box 2, 4, 5, 6, Yes — You must complete line 11.			
	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.	11		
	Box 2, 4, or 9, enter your taxable disability income.			
	 Box 5, add your taxable disability income to your spouse's taxable disability income. Enter the total. 			
	taxable disability income. Litter the total.			
TID	For more details on what to include on line 11, see Figure Your Credit in the instructions.			
TIP	To more detaile on what to include on line 11, door igno rour order in the included one.			
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 2011.			
а	Nontaxable part of social security benefits and nontaxable part			
	of railroad retirement benefits treated as social security (see			
	instructions)			
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)	-		
С	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			
14	Enter the amount from Form 1040A, line	1		
17	22, or Form 1040, line 38			
15	If you checked (in Part I): Enter:			
	Box 1 or 2 \$7,500			
	Box 3, 4, 5, 6, or 7 \$10,000 } 15			
	Box 8 or 9 \$5,000			
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	, I , , , , , , , , , , , , , , , , , ,			
00	go to line 20			
20	Multiply line 19 by 15% (.15)	20 21		
21	Tax liability limit. Enter the amount from the Credit Limit Worksheet in the instructions.	41		
22				
	this amount on Form 1040A, line 30, or include on Form 1040, line 53 (check box c and enter "Sch R" on the line next to that box)			
	enter "Sch R" on the line next to that box)	22		