You may be able to take this credit and reduce your tax if by the end of 1995:

- 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 3.

**Note:** In most cases, the IRS can figure the credit for you. See page 42 of the Form 1040A instructions.

### Part I

**Check the box for your filing status and age**

<table>
<thead>
<tr>
<th>Filing Status</th>
<th>Condition</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Single, Head of household, or Qualifying widow(er)</td>
<td>You were 65 or older. 1. You were under 65 and you retired on permanent and total disability. 2.</td>
<td></td>
</tr>
<tr>
<td>Married filing a joint return</td>
<td>Both spouses were 65 or older 3. Both spouses were under 65, but only one spouse retired on permanent and total disability 4.</td>
<td></td>
</tr>
<tr>
<td>Married filing a separate return</td>
<td>You were 65 or older and you lived apart from your spouse for all of 1995 8. You were under 65, you retired on permanent and total disability, and you lived apart from your spouse for all of 1995 9.</td>
<td></td>
</tr>
</tbody>
</table>

**Did you check box 1, 3, 7, or 8?**

- Yes ➤ Skip Part II and complete Part III on the back.
- No ➤ Complete Parts II and III.

### Part II

**Statement of permanent and total disability**

Complete this part 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 1995, check here. You do not have to file another statement for 1995. If you did not check this box, have your physician complete the statement below.

**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 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**

**Physician’s signature**

**Date**
Part III
Figure your credit

10 If you checked (in Part I):

<table>
<thead>
<tr>
<th>Box 1, 2, 4, or 7</th>
<th>$5,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Box 3, 5, or 6</td>
<td>$7,500</td>
</tr>
<tr>
<td>Box 8 or 9</td>
<td>$3,750</td>
</tr>
</tbody>
</table>

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.
- If you checked box 2, 4, or 9 in Part I, enter your taxable disability income.
- If you checked 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, enter the smaller of line 10 or line 11; 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 1995.

a. 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.

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.

14 Enter the amount from Form 1040A, line 17.

15 If you checked (in Part I):

| Box 1 or 2 | $7,500 |
| Box 3, 4, 5, 6, or 7 | $10,000 |
| 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.

19 Subtract line 18 from line 12. If zero or less, stop; you cannot take the credit. Otherwise, go to line 20.

20 Multiply line 19 by 15% (.15). Enter the result here and on Form 1040A, line 24b.

Instructions for physician's statement

Taxpayer.—If you retired after 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.