OMB No. 0607-0425: Approval Expires August 31, 1988

FORM **SIPP-4900** (11-19-85)

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

NOTICE — Your report to the Census Bureau is **confidential** by law (title 13, U.S. Code). It may be seen only by sworn Census employees and may be used only for statistical purposes.

PGM 6

1. Book ____ of ____ | **2.** *(cc 1)* R.O. code | **3a.** *(cc 2)* PSU Segment Serial | **b.** *(cc 3)* Add. ID

SURVEY OF INCOME AND PROGRAM PARTICIPATION

1984 PANEL

WAVE 9 QUESTIONNAIRE
WAVE 6 QUESTIONNAIRE

4. *(cc 17)*
a. Entry Add. ID
b. PERSON Number *(cc 18)*
c. Name *(cc 19a)* — Last; First, middle; Maiden

5. PERSON CHARACTERISTICS — *Fill a,b,c, and d using the control card*
a. Relationship code *(cc 19b)*
b. Date of birth *(cc 24)* Month Day Year
c. Sex code *(cc 28)*
d. Marital status code *(cc 26a)*

6. Interviewer identification
Code | Name

7. PERSON INTERVIEW STATUS
a. Interview
1 ☐ Self — *SKIP to 8*
2 ☐ Proxy — *Fill 7b*

b. Person number of proxy
— *SKIP to 8*

c. Noninterview
1 ☐ Type Z refusal
2 ☐ Type Z other

8. Date of interview for this person
Month Day } *Fill start time in 9a, then go to Introduction*

9a. Interview time for this person

	Initial visit	Callback visit
Start time →	a.m. / p.m.	a.m. / p.m.
Finish time →	a.m. / p.m.	a.m. / p.m.

b. Total interview time for this person
Minutes

10a. Interviewer time for clerical review
Start time → a.m. / p.m.
Finish time → a.m. / p.m.

b. Total interviewer time for clerical review
Minutes

11a. Pre-interview transcription time
Start time → a.m. / p.m.
Finish time → a.m. / p.m.

b. Total pre-interview time for transcription
Minutes

12. 1 ☐ Phone interview — *Specify reason*

CHECK ITEM N1 Does . . .'s person number begin with "9"?
PGM 7
0900 1 ☐ Yes 2 ☐ No — *SKIP to section 1, item 1*

CHECK ITEM N2 Was . . . missed when household members were listed for wave 1?
0901 1 ☐ Yes — *SKIP to section 1, item 1* 2 ☐ No

MONTH OF INTERVIEW	REFERENCE DATE
April 1986	December 1, 1983
May 1986	January 1, 1984
June 1986	October 1, 1983
July 1986	November 1, 1983

13a. **We need to know where . . . was living on** *(Read appropriate reference date)*. **Was . . . living in any of the kinds of places listed on this card** *(Show Flashcard U)*?
0902 1 ☐ Yes 2 ☐ No — *SKIP to 14* x1 ☐ DK x2 ☐ Ref. } *SKIP to 14*

ASK OR VERIFY —

b. **Which code on this card represents the kind of place . . . was living in on** *(Read appropriate reference date)*?
0904 1 ☐ Armed Forces barracks 2 ☐ Outside the United States 3 ☐ Nonhousehold setting } *SKIP to section 1, item 1*

14. **Was . . . living alone on** *(Read appropriate reference date)*?
0906 1 ☐ Yes — *SKIP to section 1, item 1* 2 ☐ No

15. **How many people was . . . living with on** *(Read appropriate reference date)*?
0908 ☐☐ *Enter number of persons*

16. **Was . . . the owner or renter of the residence where . . . was living on** *(Read appropriate reference date)*?
0910 1 ☐ Yes — *SKIP to section 1, item 1* 2 ☐ No

17. **How is . . . related to the person who owned or rented the residence where . . . was living on** *(Read appropriate reference date)*?
0912 1 ☐ Husband 2 ☐ Wife 3 ☐ Own child (son or daughter) 4 ☐ Parent 5 ☐ Brother/Sister 6 ☐ Other relative 7 ☐ Non-relative

INTRODUCTION

INTERVIEWER INSTRUCTIONS — Read introduction once to each respondent. Do not repeat to another respondent who was in the room when you earlier read the introduction.

(As I described during my last visit) This survey is about the economic situation of people living in the United States. Most of the questions will be about . . . .'s activities during ____, ____, ____, and ____. Here is a calendar that shows the 4 months we will be talking about. (Hand respondent Flashcard J.) This time period is very important, so if you have any questions about what period is being referred to during the interview, please ask me.

We need the most accurate and complete information possible. Please think carefully about each question, search your memory and take your time in answering. For some of the questions it will help to look up the answers by checking whatever records are available to you here. *(GO TO CHECK ITEM N1.)*

Section 1 — LABOR FORCE AND RECIPIENCY

PGM 7

(SHOW FLASHCARD J)

1. **During the 4-month period outlined on this calendar, that is, from** *(4 months ago)* **thru** *(Last month)*, **did . . . have a job or business, either full time or part time, even for only a few days?**
Mark "Yes" for active duty in the Armed Forces, any temporary or part-time work, and work without pay in a family business or farm.

1000 — 1 ☐ Yes — *Mark "Worked" (code 170) on ISS and SKIP to 4*
2 ☐ No

2a. **Even though . . . did not have a job during this period, did . . . spend any time looking for work or on layoff from a job?**

1002 — 1 ☐ Yes
2 ☐ No — *SKIP to 3a*

b. **Please look at the calendar. In which weeks was . . . looking for work or on layoff from a job?**
Mark (X) all that apply.

1004 — X5 ☐ ALL

1006	☐ 1	1018	☐ 7	1030	☐ 13
1008	☐ 2	1020	☐ 8	1032	☐ 14
1010	☐ 3	1022	☐ 9	1034	☐ 15
1012	☐ 4	1024	☐ 10	1036	☐ 16
1014	☐ 5	1026	☐ 11	1038	☐ 17
1016	☐ 6	1028	☐ 12	1040	☐ 18

c. **Could . . . have taken a job during any of those weeks if one had been offered?**

1042 — 1 ☐ Yes — *SKIP to Check Item R1*
2 ☐ No

d. **What was the main reason . . . could not take a job during those weeks?**
Mark (X) only one.

1044 — 1 ☐ Already had a job
2 ☐ Temporary illness
3 ☐ School
4 ☐ Other — *Specify* _____

CHECK ITEM R1 *Refer to item 2b.* Is the "ALL" box marked in 2b?

1046 — 1 ☐ Yes — *SKIP to 9a, page 4*
2 ☐ No — *SKIP to 3b*

3a. **Were there any weeks in the 4-month period when . . . wanted a job?**

1048 — 1 ☐ Yes — *SKIP to 3c*
2 ☐ No — *SKIP to Check Item R6, page 4*

b. **I have recorded that there were weeks that . . . did not work or look for work. Did . . . want a job in those weeks?**

1050 — 1 ☐ Yes
2 ☐ No — *SKIP to 9a, page 4*

c. **Could . . . have taken a job in those weeks if one had been offered?**

1052 — 1 ☐ Yes
2 ☐ No — *SKIP to 9a, page 4*

d. **During the weeks that . . . wanted a job but was not looking for one, what was the main reason . . . was not looking?**
Mark (X) only one.

1054 —
1 ☐ Believes no work available in line of work or area
2 ☐ Couldn't find any work
3 ☐ Lacks necessary schooling, training, skills, or experience
4 ☐ Employers think too young or too old
5 ☐ Other personal handicap in finding job
6 ☐ Can't arrange child care
7 ☐ Family responsibilities
8 ☐ In school or other training
9 ☐ Ill health, physical disability
10 ☐ Other — *Specify* _____
X1 ☐ DK
SKIP to 9a, page 4

4. **Did . . . have a job or business, either full or part time, during EACH of the weeks in this period?**
Note *that the person did* ***not*** *have to* ***work*** *each week.*

1056 — 1 ☐ Yes
2 ☐ No — *SKIP to 6a*

5a. **Was . . . absent without pay from . . .'s job or business for any FULL weeks during the 4-month period?**

1058 — 1 ☐ Yes
2 ☐ No — *SKIP to 8a, page 4*

b. **Please look at the calendar. In which weeks was . . . absent without pay?**
Mark (X) all that apply.

1060 — X5 ☐ ALL

1062	☐ 1	1074	☐ 7	1086	☐ 13
1064	☐ 2	1076	☐ 8	1088	☐ 14
1066	☐ 3	1078	☐ 9	1090	☐ 15
1068	☐ 4	1080	☐ 10	1092	☐ 16
1070	☐ 5	1082	☐ 11	1094	☐ 17
1072	☐ 6	1084	☐ 12	1096	☐ 18

c. **What was the main reason . . . was absent from . . .'s job or business during those weeks?**
Mark (X) only one.

1098 —
1 ☐ On layoff
2 ☐ Own illness
3 ☐ On vacation
4 ☐ Bad weather
5 ☐ Labor dispute
6 ☐ New job to begin within 30 days
7 ☐ Other — *Specify* _____
SKIP to 8a, page 4

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

(SHOW FLASHCARD J)

6a. Please look at the calendar. In which weeks did . . . have a job or business?

Mark (X) calendar below, "With a job or business." AND then mark appropriate box(es). →

1100	☐1	1112	☐7	1124	☐13
1102	☐2	1114	☐8	1126	☐14
1104	☐3	1116	☐9	1128	☐15
1106	☐4	1118	☐10	1130	☐16
1108	☐5	1120	☐11	1132	☐17
1110	☐6	1122	☐12	1134	☐18

b. Of those weeks that . . . had a job or business, was . . . absent from work for any full weeks without pay?

1136
1 ☐ Yes
2 ☐ No — *SKIP to 7a*

c. In which weeks was . . . absent without pay?

1138	☐1	1150	☐7	1162	☐13
1140	☐2	1152	☐8	1164	☐14
1142	☐3	1154	☐9	1166	☐15
1144	☐4	1156	☐10	1168	☐16
1146	☐5	1158	☐11	1170	☐17
1148	☐6	1160	☐12	1172	☐18

d. What was the main reason . . . was absent from . . .'s job or business during those weeks?

Mark (X) only one.

1174
1 ☐ On layoff
2 ☐ Own illness
3 ☐ On vacation
4 ☐ Bad weather
5 ☐ Labor dispute
6 ☐ New job to begin within 30 days
7 ☐ Other — *Specify* ↓

_____

7a. I have marked that there were some weeks in this period in which . . . did NOT have a job or business. During that week or weeks did . . . spend any time looking for work or on layoff?

1176
1 ☐ Yes
2 ☐ No — *SKIP to 7e*

b. In which of these weeks was . . . looking for work or on layoff from a job?

Mark (X) calendar below, "Looking for work or on layoff" AND then mark appropriate box(es). →

1178 X5 ☐ All weeks without a job

1180	☐1	1192	☐7	1204	☐13
1182	☐2	1194	☐8	1206	☐14
1184	☐3	1196	☐9	1208	☐15
1186	☐4	1198	☐10	1210	☐16
1188	☐5	1200	☐11	1212	☐17
1190	☐6	1202	☐12	1214	☐18

c. Could . . . have taken a job during those weeks if one had been offered?

1216
1 ☐ Yes — *SKIP to Check Item R2*
2 ☐ No

d. What was the main reason . . . could not take a job during those weeks?

1218
1 ☐ Already had a job
2 ☐ Temporary illness
3 ☐ School
4 ☐ Other — *Specify* ↓

_____

CHECK ITEM R2

Refer to the Labor Force Calendar, below. Is each week of the 4-month period marked as "With a job or business" or "Looking for work or on layoff"?

1220
1 ☐ Yes — *SKIP to 8a*
2 ☐ No — *SKIP to 7f*

7e. Did . . . want a job in those weeks when . . . did not have one?

1222
1 ☐ Yes — *SKIP to 7g*
2 ☐ No — *SKIP to 8a*

f. I have marked that there were weeks in this period when . . . did not have a job and was not looking for a job. Did . . . want a job in those weeks?
If necessary, refer to Labor Force calendar.

1224
1 ☐ Yes
2 ☐ No — *SKIP to 8a*

g. Could . . . have taken a job during those weeks if one had been offered?

1226
1 ☐ Yes
2 ☐ No — *SKIP to 8a*

LABOR FORCE CALENDAR — *Use when item 4 is marked "No"*

WEEK →	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
With a job or business. *Mark for item 6a.*																		
Looking for work or on layoff (and without a job or business.) *Mark for item 7b.*																		

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

7h. **During the weeks that . . . wanted a job but was not looking for one, what was the main reason . . . was not looking?**

Mark (X) only one.

1228
- 1 ☐ Believes no work available in line of work or area
- 2 ☐ Couldn't find any work
- 3 ☐ Lacks necessary schooling, training, skills, or experience
- 4 ☐ Employers think too young or too old
- 5 ☐ Other personal handicap in finding job
- 6 ☐ Can't arrange child care
- 7 ☐ Family responsibilities
- 8 ☐ In school or other training
- 9 ☐ Ill health, physical disability
- 10 ☐ Other — *Specify* _____
- X1 ☐ DK

8a. **In the weeks that . . . worked during the 4-month period, how many hours did . . . usually work per week?**

1230 ☐☐ Hours per week
- X3 ☐ None
- X1 ☐ DK

} *SKIP to Check Item R4*

CHECK ITEM R3 *Refer to item 8a.* Did . . . usually work 35 or more hours per week?

1232
- 1 ☐ Yes
- 2 ☐ No — *SKIP to 8c*

8b. **Did . . . work fewer than 35 hours in any of the weeks that . . . worked during this period? Exclude time off WITH PAY because of holidays, vacation, days off or sickness.**

1234
- 1 ☐ Yes
- 2 ☐ No — *SKIP to Check Item R4*

c. **In how many weeks did . . . work fewer than 35 hours during this 4-month period?**

1236 X5 ☐ All

☐☐ Weeks

d. **What was the main reason . . . worked fewer than 35 hours in those weeks?**

Mark (X) only one.

1238
- 1 ☐ Could not find a full-time job
- 2 ☐ Wanted to work part time
- 3 ☐ Health condition or disability
- 4 ☐ Normal working hours are fewer than 35 hours
- 5 ☐ Slack work or material shortage
- 6 ☐ Other — *Specify*

_____

CHECK ITEM R4 *Refer to item 5a, page 2.* The response to item 5a is:

1239
- 1 ☐ Yes (or blank)
- 2 ☐ No — *SKIP to Check Item R5*

9a. **During this 4-month period, did . . . receive any State unemployment compensation payments?**

1240
- 1 ☐ Yes — *Mark "5" on ISS*
- 2 ☐ No — *SKIP to Check Item R5*

b. **During this period, did . . . also receive any Supplemental Unemployment Benefits (SUB)?**

1242
- 1 ☐ Yes — *Mark "6" on ISS*
- 2 ☐ No

CHECK ITEM R5 Is "Worked" marked on the ISS?

1244
- 1 ☐ Yes
- 2 ☐ No — *SKIP to Check Item R6*

10. **During this 4-month period did . . . receive any money from worker's compensation for any kind of job-related illness or injury?**

1246
- 1 ☐ Yes — *Mark "10" on ISS*
- 2 ☐ No

CHECK ITEM R6 Was an interview obtained for . . . last reference period?

1248
- 1 ☐ Yes
- 2 ☐ No — *SKIP to Check Item R11, page 6*

CHECK ITEM R7 Are any income types listed in the Income Roster?

1250
- 1 ☐ Yes
- 2 ☐ No — *SKIP to 12a*

NOTES

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

11a. According to the information we obtained last time, . . . had received *(Read income types in 11b, column (2))* **during** *(8 months ago)* **through** *(5 months ago)*. **Was this information recorded correctly?**

1251 1 ☐ Yes
2 ☐ No — *Resolve problems and make appropriate entries in 11b, column (5)* } **Ask 11c**

b. INCOME ROSTER

Line No. (1)	Income type (2)	Income code (3)	This reference period (4)	Previous reference period (5) Should not have been listed	Previous reference period (5) Was not listed; should have been
1		1252 ☐☐	1254 1 ☐ Yes — *Mark ISS* 2 ☐ No	1255 1 ☐	2 ☐
2		1256 ☐☐	1258 1 ☐ Yes — *Mark ISS* 2 ☐ No	1259 1 ☐	2 ☐
3		1260 ☐☐	1262 1 ☐ Yes — *Mark ISS* 2 ☐ No	1263 1 ☐	2 ☐
4		1264 ☐☐	1266 1 ☐ Yes — *Mark ISS* 2 ☐ No	1267 1 ☐	2 ☐
5		1268 ☐☐	1270 1 ☐ Yes — *Mark ISS* 2 ☐ No	1271 1 ☐	2 ☐
6		1272 ☐☐	1274 1 ☐ Yes — *Mark ISS* 2 ☐ No	1275 1 ☐	2 ☐
7		1276 ☐☐	1278 1 ☐ Yes — *Mark ISS* 2 ☐ No	1279 1 ☐	2 ☐
8		1280 ☐☐	1282 1 ☐ Yes — *Mark ISS* 2 ☐ No	1283 1 ☐	2 ☐

c. During the past 4 months, that is _____, _____, _____, and _____, did . . . get income from *(Read income types in 11b, column (2))*?

MARK (X) APPROPRIATE BOX IN ITEM 11b, COLUMN (4) FOR EACH INCOME TYPE LISTED.

12a. During this 4-month period, did . . . get any income from the Federal Government (that we haven't talked about)?

1284 1 ☐ Yes
2 ☐ No — *SKIP to 13a*

b. What was it called?

Anything else?

Mark (X) all that apply.

1286 1 ☐ Social Security — *Mark "1" on ISS*
1288 2 ☐ Federal Supplemental Security Income (Federal SSI) — *Mark "3" on ISS*
1290 3 ☐ A serviceman's or widow's pension from the Veterans Administration (VA) — *Mark "8" on ISS*
1292 4 ☐ Anything else — *Mark appropriate code on ISS and specify*

1294 ☐☐ _____

13a. During this 4-month period, did . . . receive any (other) pension, disability, retirement, or survivor income (that we haven't talked about)?

1296 1 ☐ Yes
2 ☐ No — *SKIP to Check Item R8*

b. What was the source of this income?

Anything else?

Mark (X) all that apply.

1298 1 ☐ U.S. Government Railroad Retirement — *Mark "2" on ISS*
1300 2 ☐ Black Lung payments — *Mark "9" on ISS*
1302 3 ☐ Worker's Compensation — *Mark "10" on ISS*
1304 4 ☐ Payments from a sickness, accident or disability insurance policy purchased on your own — *Mark "13" on ISS*
1306 5 ☐ Pension from company or union — *Mark "30" on ISS*
1308 6 ☐ Federal Civil Service or other Federal civilian employee pension — *Mark "31" on ISS*
1310 7 ☐ U.S. Military retirement pay (exclude payments from the Veterans Administration) — *Mark "32" on ISS*
1312 8 ☐ National Guard or Reserve Forces retirement — *Mark "33" on ISS*
1314 9 ☐ State government pension — *Mark "34" on ISS*
1316 10 ☐ Local government pension — *Mark "35" on ISS*
1318 11 ☐ Income from paid-up life insurance policies or annuities — *Mark "36" on ISS*
1320 12 ☐ Other or DK — *Specify and enter code from income source list. If income type is not listed or DK, enter code "38" — Mark ISS.*

1322 ☐☐ _____

CHECK ITEM R8 Is "Medicare" marked for . . . on cc item 47?

1324 1 ☐ Yes — *Mark "172" on ISS and SKIP to Check Item R23, page 8*
2 ☐ No

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

CHECK ITEM R9 Is "Disabled" marked for . . . on cc item 47?

1326 1 ☐ Yes — *Mark "171" on ISS and SKIP to 23a, page 8*
2 ☐ No

CHECK ITEM R10 Is . . . 65 years of age or over?

1328 1 ☐ Yes — *SKIP to 23a, page 8*
2 ☐ No — *SKIP to Check Item R23, page 8*

CHECK ITEM R11 *Refer to cc item 32a.* Is . . . a veteran of the U.S. Armed Forces? *Mark "No" if currently in Armed Forces ("Yes" marked in cc item 32c)*

1330 1 ☐ Yes
2 ☐ No — *SKIP to Check Item R12*

14a. How long did . . . serve on active duty in the Armed Forces?

1332 1 ☐ Less than 6 months
2 ☐ 6 to 23 months
3 ☐ 2 to 19 years
4 ☐ 20 or more years
X1 ☐ DK

b. Does . . . have a service connected disability; that is, a health condition or impairment caused or made worse by military service?

1334 1 ☐ Yes
2 ☐ No
X1 ☐ DK
} *SKIP to 14d*

c. What is . . .'s VA percent disability rating?

Use the following probe if needed: **(Such as 0, 10, 20, 30, 40, 50, 60, 70, 80, 90, 100%)**

1336 ☐☐☐
X3 ☐ 0%
X1 ☐ DK
X2 ☐ Ref.
101 ☐ No rating

d. During this 4-month period did . . . receive pension or compensation payments from the Veterans Administration? (Exclude regular military retirement pay, insurance proceeds, and GI Bill benefits.)

1338 1 ☐ Yes — *Mark "8" on ISS*
2 ☐ No

CHECK ITEM R12 Is . . . 18 years of age or over?

1340 1 ☐ Yes
2 ☐ No — *SKIP to 18a*

15a. During this 4-month period, did . . . receive any Social Security payments?

1342 1 ☐ Yes — *Mark "1" on ISS*
2 ☐ No — *SKIP to Check Item R14*

CHECK ITEM R13 Is . . . 65 years of age or over?

1344 1 ☐ Yes — *SKIP to 16a*
2 ☐ No

15b. What is the reason . . . is getting Social Security, is it because . . . is *(Read categories)* —

Mark (X) only one.

1346 1 ☐ **Retired?**
2 ☐ **Disabled?**
3 ☐ **Widow(ed) or surviving child?**
4 ☐ **Spouse or dependent child?**
5 ☐ Some other reason
X1 ☐ DK
} *SKIP to 16a*

c. Sometimes people get Social Security for more than one reason. Is there another reason . . . receives Social Security?

1348 1 ☐ Retired
2 ☐ Disabled
3 ☐ Widow(ed) or surviving child
4 ☐ Spouse or dependent child
5 ☐ No other reason
X1 ☐ DK
} *SKIP to 16a*

CHECK ITEM R14 *Refer to cc item 27.* Is . . . the designated parent or guardian of children under 18 who live in this household?

1350 1 ☐ Yes
2 ☐ No — *SKIP to 16a*

15d. During the 4-month period did . . . receive any Social Security payments especially for . . .'s children (under 18)?

1352 1 ☐ Yes — *Mark "1" on ISS*
2 ☐ No

16a. During this 4-month period did . . . receive any SSI (Supplemental Security Income) payments from the U.S. Government?

1354 1 ☐ Yes — *Mark "3" on ISS*
2 ☐ No — *SKIP to Check Item R15*

b. Did . . . also receive a SEPARATE SSI payment from the State or local welfare office during these months?

1356 1 ☐ Yes — *Mark "4" on ISS*
2 ☐ No

CHECK ITEM R15 Is . . . 40 years of age or over?

1358 1 ☐ Yes
2 ☐ No — *SKIP to 18a*

17a. Has . . . ever retired from a job or business? (Include retirement from the military.)

1360 1 ☐ Yes
2 ☐ No — *SKIP to Check Item R16*

b. During the 4-month period did . . . receive any retirement income other than Social Security?

1362 1 ☐ Yes
2 ☐ No — *SKIP to 17d*

NOTES

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

17c. **What kind of retirement income?**

Anything else?

Mark (X) all that apply.

1364 1 ☐ U.S. Government Railroad Retirement — *Mark "2" on ISS*

1366 2 ☐ Pension from company or union — *Mark "30" on ISS*

1368 3 ☐ Federal Civil Service or other Federal civilian employee pension — *Mark "31" on ISS*

1370 4 ☐ U.S. Military retirement pay (exclude payments from the Veterans Administration) — *Mark "32" on ISS*

1372 5 ☐ National Guard or Reserve Forces retirement — *Mark "33" on ISS*

1374 6 ☐ State government pension — *Mark "34" on ISS*

1376 7 ☐ Local government pension — *Mark "35" on ISS*

1378 8 ☐ Other or DK — *Specify and enter code from income source list. If income type not listed or "DK," enter code "38"* — *Mark ISS.*

1380 ☐☐

d. **During this 4-month period, did . . . receive any regular income from a paid-up life insurance policy or any other annuities?**

1382 1 ☐ Yes — *Mark "36" on ISS*
2 ☐ No

CHECK ITEM R16 Is . . . 70 years of age or over?

1384 1 ☐ Yes — *SKIP to Check Item R17*
2 ☐ No

18a. **Does . . . have a physical, mental, or other health condition which limits the kind or amount of work . . . can do?**

1386 1 ☐ Yes — *Mark "171" on ISS*
2 ☐ No — *SKIP to Check Item R17*

b. **During this 4-month period, did . . . receive any income because of . . .'s health condition or disability? (Other than Social Security, SSI, or VA?)**

1388 1 ☐ Yes
2 ☐ No
X1 ☐ DK } *SKIP to Check Item R17*

c. **What kind of income?**

Anything else?

Mark (X) all that apply.

1390 1 ☐ U.S. Government Railroad Retirement — *Mark "2" on ISS*

1392 2 ☐ Black Lung payments — *Mark "9" on ISS*

1394 3 ☐ Worker's Compensation — *Mark "10" on ISS*

1396 4 ☐ Payments from a sickness, accident or disability insurance policy purchased on your own — *Mark "13" on ISS*

1398 5 ☐ Pension from company or union — *Mark "30" on ISS*

1400 6 ☐ Federal Civil Service or other Federal civilian employee pension — *Mark "31" on ISS*

1402 7 ☐ U.S. Military retirement pay (exclude payments from the Veterans Administration) — *Mark "32" on ISS*

1406 8 ☐ State government pension — *Mark "34" on ISS*

1408 9 ☐ Local government pension — *Mark "35" on ISS*

1410 10 ☐ Other or DK — *Specify and enter code from income source list. If income type not listed or "DK," enter code "38"* — *Mark ISS.*

1412 ☐☐

CHECK ITEM R17 *Refer to cc item 26a.* What is . . .'s marital status?

1414 1 ☐ Married — *SKIP to 20*
2 ☐ Widowed — *SKIP to 22a*
3 ☐ Divorced
4 ☐ Separated
5 ☐ Never married — *SKIP to Check Item R18*

19. **Did . . . receive any alimony (or support payments other than child support) during the 4-month period?**

1416 1 ☐ Yes — *Mark "29" on ISS and SKIP to Check Item R18*
2 ☐ No
X1 ☐ DK } *SKIP to Check Item R18*
X2 ☐ Ref.

20. **(People who have been widowed or divorced sometimes receive income because of their former marriage.) Has . . . ever been widowed or divorced?**

1418 1 ☐ Widowed — *SKIP to 22a*
2 ☐ Divorced
3 ☐ Both widowed and divorced
4 ☐ No — *SKIP to Check Item R21*

CHECK ITEM R18 *Refer to cc item 27.* Is . . . the designated parent or guardian of children under 18 who live in this household?

1420 1 ☐ Yes
2 ☐ No — *SKIP to Check Item R19*

21. **Did . . . receive any child support payments during this 4-month period? (Include "pass through" child support payments paid through the welfare office. Exclude all other child support payments from the welfare office.)**

1422 1 ☐ Yes — *Mark "28" on ISS*
2 ☐ No
X1 ☐ DK
X2 ☐ Ref.

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

CHECK ITEM R19 Is "Both widowed and divorced" box marked in item 20, page 7?

1424 1 ☐ Yes
2 ☐ No — *SKIP to Check Item R21*

22a. During this 4-month period, did . . . receive any pensions or annuities as a widow(er) (other than Social Security)?

1426 1 ☐ Yes
2 ☐ No
X1 ☐ DK
} *SKIP to Check Item R21*

b. What kind of income was this?
Was there anything else?
(SHOW FLASHCARD K)
Mark (X) all that apply.

1428 1 ☐ U.S. Government Railroad Retirement — *Mark "2" on ISS*
1430 2 ☐ Veterans Compensation or pension — *Mark "8" on ISS*
1432 3 ☐ Black Lung payments — *Mark "9" on ISS*
1434 4 ☐ Pension from company or union — *Mark "30" on ISS*
1436 5 ☐ Federal Civil Service or other Federal civilian employee pension — *Mark "31" on ISS*
1438 6 ☐ U.S. Military retirement pay (exclude payments from the Veterans Administration) — *Mark "32" on ISS*
1440 7 ☐ National Guard or Reserve Forces retirement — *Mark "33" on ISS*
1442 8 ☐ State government pension — *Mark "34" on ISS*
1444 9 ☐ Local government pension — *Mark "35" on ISS*
1446 10 ☐ Income from paid-up life insurance policies or annuities — *Mark "36" on ISS*
1448 11 ☐ Payments from estate or trust — *Mark "37" on ISS*
1450 12 ☐ Other or DK — *Specify and enter code from income source list. If income type not listed or "DK," enter code "38"* — *Mark ISS*

1452 ☐☐

CHECK ITEM R20 Is "Veterans Compensation or pension" marked in item 22b?

1454 1 ☐ Yes
2 ☐ No — *SKIP to Check Item R21*

22c. Did . . .'s late spouse die while in the service or from a service-related injury?

1456 1 ☐ Yes, in the service
2 ☐ Yes, from service-related injury
3 ☐ No

CHECK ITEM R21 Is . . . 65 years of age or over?

1458 1 ☐ Yes — *SKIP to 23a*
2 ☐ No

CHECK ITEM R22 *Refer to item 18a, page 7.* Does . . . have a work disability?

1460 1 ☐ Yes
2 ☐ No — *SKIP to Check Item R23*

23a. Medicare is a health insurance program for disabled persons and persons 65 or over. People covered by Medicare have a card that looks like this *(SHOW FLASHCARD L).*
Was . . . covered by Medicare?

1462 1 ☐ Yes — *Mark "172" on ISS*
2 ☐ No
X1 ☐ DK
} *SKIP to Check Item R23*

b. May I see . . .'s Medicare card to record the claim number and type of coverage?

1464 ☐☐☐ - ☐☐ - 1466 ☐☐☐☐ - ☐☐

★

TYPE OF COVERAGE
1468 1 ☐ Hospital only (Type A)
2 ☐ Medical only (Type B)
3 ☐ Both hospital and medical (Types A and B)
} *SKIP to Check Item R23*
4 ☐ Card not available — *ASK 23c*

c. If I were to call later would you be able to provide me with . . .'s Medicare number? (This information is especially important for the purposes of this survey.)

1470 1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 2*
2 ☐ No

d. Medicare has an optional feature which costs extra and helps pay for doctor bills. Does . . .'s Medicare help pay for doctor bills?

1472 1 ☐ Yes
2 ☐ No
X1 ☐ DK

CHECK ITEM R23 *Refer to cc item 27.* Is . . . the designated parent or guardian of children under 18 who live in this household?

1474 1 ☐ Yes — *SKIP to Check Item R25*
2 ☐ No

CHECK ITEM R24 Is . . . 18 years of age or over?

1476 1 ☐ Yes
2 ☐ No — *SKIP to 27a*

CHECK ITEM R25 Is ISS code "27" (Food stamps) listed in the Income Roster (item 11b, page 5)?

1478 1 ☐ Yes — *SKIP to Check Item R26*
2 ☐ No

24. Was . . . authorized to receive food stamps at any time during the 4-month period? (An authorized person is one whose name appears on a certification card.)

1480 1 ☐ Yes — *Mark "27" on ISS*
2 ☐ No

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

CHECK ITEM R26 Interview status of . . .'s spouse.

1482
1 ☐ No spouse in household
2 ☐ Interview for spouse not yet conducted
3 ☐ Interview for spouse already conducted — *SKIP to Check Item R27*

25a. (Other than what we have already mentioned) during the 4-month period, did . . . receive any (other) welfare (such as AFDC, WIC, or General Assistance) (for . . . or . . .'s children)? (Exclude energy assistance.)

1484
1 ☐ Yes
2 ☐ No — *SKIP to Check Item R27*

b. What kind of welfare did . . . receive? Anything else?

Mark (X) all that apply.

1486 / 1488
1 ☐ AFDC — *Mark "20" on ISS*
2 ☐ General Assistance or General Relief — *Mark "21" on ISS*
1490
3 ☐ Indian, Cuban or Refugee Assistance — *Mark "22" on ISS*
1492
4 ☐ Foster Child Care — *Mark "23" on ISS*
1494
5 ☐ WIC — *Mark "25" on ISS*
1496
6 ☐ Other or DK — *Specify and enter code from income source list. If income type not listed or "DK", enter code "24"* — *Mark ISS*

1498 ☐☐

CHECK ITEM R27 Is "Medicaid" marked for . . . on cc item 47?

1500
1 ☐ Yes — *SKIP to 26b*
2 ☐ No

(Refer to FLASHCARD M for Medicaid name.)

26a. During the 4-month period was . . . covered by *(Use local name for Medicaid)* **or another public assistance program that pays for medical care?**

1502
1 ☐ Yes — *Mark "173" on ISS* } *SKIP to Check Item R28*
2 ☐ No

(Refer to FLASHCARD M for Medicaid name.)

b. According to our last visit . . . was covered by *(Use local name for Medicaid)*. **Was . . . covered by it at any time during the 4-month period?**

1504
1 ☐ Yes — *Mark "173" on ISS*
2 ☐ No

CHECK ITEM R28 *Refer to cc item 27.* Is . . . the designated parent or guardian of children under 18 who live in this household?

1506
1 ☐ Yes
2 ☐ No — *SKIP to Check Item R29*

26c. Were any of . . .'s children (under 18) covered by *(Use local name for Medicaid)*?

1508
1 ☐ Yes
2 ☐ No — *SKIP to Check Item R29*

d. Which children were covered?

1510
X5 ☐ All children
OR

	Person No.	Name
1512	☐☐☐	
1514	☐☐☐	
1516	☐☐☐	
1518	☐☐☐	
1520	☐☐☐	

CHECK ITEM R29 Was . . . or . . .'s children (under 18) covered by Medicaid?

1524
1 ☐ Yes
2 ☐ No — *SKIP to 27a*

26e. Was (. . ./(and) . . .'s children) covered during the entire 4-month period?

1526
1 ☐ Yes — *SKIP to 27a*
2 ☐ No

f. In which months was (. . ./(and) . . .'s children) covered?

Mark (X) all that apply.

1528
1 ☐ Last month
1530
2 ☐ 2 months ago
1532
3 ☐ 3 months ago
1534
4 ☐ 4 months ago

NOTES

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

27a. **During the 4-month period, did . . . have health insurance in . . .'s own name?**

(Exclude Medicaid, Medicare, CHAMPUS, CHAMPVA and plans paying benefits only for accidents or specific diseases.)

1536 1 ☐ Yes — *SKIP to 27c*
2 ☐ No

ASK OR VERIFY —

b. **Was . . . covered by a health insurance plan in somebody else's name?**

1537 1 ☐ Yes } *SKIP to Check Item R30*
2 ☐ No }

c. **Did . . . have a plan in . . .'s own name during the entire 4-month period?**

1538 1 ☐ Yes — *SKIP to 27e*
2 ☐ No

d. **In which months did . . . have a plan?**

Mark (X) all that apply.

1540 1 ☐ Last month
1542 2 ☐ 2 months ago
1544 3 ☐ 3 months ago
1546 4 ☐ 4 months ago

e. **Was . . .'s plan provided through an employer or union (or through a former employer or a pension plan)?**

1548 1 ☐ Yes
2 ☐ No — *SKIP to 27g*

f. **Did the employer or union (former employer or pension plan) pay for part or all of the cost of this plan?**

1550 1 ☐ All
2 ☐ Part
X3 ☐ None

g. **Was this an individual plan or a family plan?**

1552 1 ☐ Individual — *SKIP to Check Item R30*
2 ☐ Family

h. **Did . . .'s health plan cover all the persons living here?**

1554 1 ☐ Yes — *SKIP to Check Item R32*
2 ☐ No

i. **Other than . . ., which persons in this household were covered by . . .'s plan?**

	Person No.	Name
1556		
1558		
1560		
1562		
1564		

1566 X3 ☐ None

CHECK ITEM R30 *Refer to cc item 27.* Is . . . the designated parent or guardian of children under 18 who live in this household?

1568 1 ☐ Yes
2 ☐ No — *SKIP to Check Item R32*

CHECK ITEM R31 Have each of these children already been identified as members of a family health insurance plan?

1570 1 ☐ Yes
2 ☐ No — *SKIP to 27k*

27j. **I have recorded that all of . . .'s children were covered by a health insurance plan — is that correct?**

1572 1 ☐ Yes — *SKIP to Check Item R32*
2 ☐ No

k. **Were any of (Which of) . . .'s children (were) covered by a health insurance plan?**

(Exclude Medicaid, Medicare, CHAMPUS, CHAMPVA and plans paying benefits only for accidents or specific diseases.)

1574 X5 ☐ All children

OR

	Person No.	Name
1576		
1578		
1580		
1582		
1584		

1586 X3 ☐ None

CHECK ITEM R32 Are any assets listed in the Asset Roster?

1588 1 ☐ Yes
2 ☐ No — *SKIP to 29a*

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

28a. According to the information we obtained last time, . . . had *(Read asset types in 28b, column (2))* **during** *(8 months ago)* **through** *(5 months ago)* **. Was this information recorded correctly?**

1589 1 ☐ Yes
2 ☐ No — *Resolve problems and make appropriate entries in 28b, column (5)*
} *ASK 28c*

b. ASSET ROSTER

Line No. (1)	Asset type (2)	Asset code (3)	This reference period (4)	Previous reference period (5) Should not have been listed	Previous reference period (5) Was not listed; should have been
1		1590	1592 1 ☐ Yes — *Mark ISS* 2 ☐ No	1593 1 ☐	2 ☐
2		1594	1596 1 ☐ Yes — *Mark ISS* 2 ☐ No	1597 1 ☐	2 ☐
3		1598	1600 1 ☐ Yes — *Mark ISS* 2 ☐ No	1601 1 ☐	2 ☐
4		1602	1604 1 ☐ Yes — *Mark ISS* 2 ☐ No	1605 1 ☐	2 ☐
5		1606	1608 1 ☐ Yes — *Mark ISS* 2 ☐ No	1609 1 ☐	2 ☐
6		1610	1612 1 ☐ Yes — *Mark ISS* 2 ☐ No	1613 1 ☐	2 ☐
7		1614	1616 1 ☐ Yes — *Mark ISS* 2 ☐ No	1617 1 ☐	2 ☐
8		1618	1620 1 ☐ Yes — *Mark ISS* 2 ☐ No	1621 1 ☐	2 ☐

C. During the past 4 months, that is _____, _____, _____, and _____ ,did . . . still own (have) *(Read assets in 28b, column (2))*?

MARK (X) APPROPRIATE BOX IN ITEM 28b, COLUMN (4) FOR EACH ASSET TYPE LISTED.

29a. (In addition to the assets we have already mentioned) during the 4-month period did . . . have any (other) kinds of assets which earn interest or bring in money, such as the ones shown on this card?
(SHOW FLASHCARD N.)

1622 1 ☐ Yes
2 ☐ No
X1 ☐ DK
X2 ☐ Ref.
} *SKIP to Check Item R33*

b. Which kinds of these assets did . . . own?
Any others?
(Exclude IRA and Keogh accounts)

1626 1 ☐ Regular or passbook savings accounts — *Mark "100" on ISS*
1628 2 ☐ Money market deposit accounts — *Mark "101" on ISS*
1630 3 ☐ Certificates of deposit or other savings certificates — *Mark "102" on ISS*
1632 4 ☐ NOW, Super NOW, or other interest-earning checking accounts — *Mark "103" on ISS*
1636 5 ☐ Money market funds — *Mark "104" on ISS*
1638 6 ☐ U. S. Government securities — *Mark "105" on ISS*
1640 7 ☐ Municipal or corporate bonds — *Mark "106" on ISS*
1642 8 ☐ Mortgages — *Mark "130" on ISS*
1644 9 ☐ U. S. Savings Bonds (E, EE) — *Mark "174" on ISS*
1646 10 ☐ Other interest-earning assets — *Mark "107" on ISS and specify* ↓

_____

1648 11 ☐ Stocks or mutual fund shares — *Mark "110" on ISS*
1650 12 ☐ Rental property — *Mark "120" on ISS*
1652 13 ☐ Royalties — *Mark "140" on ISS*
1654 14 ☐ Other financial investments — *Mark "150" on ISS and specify* ↓

_____

CHECK ITEM R33 Is . . . 17 to 49 years of age?

1656 1 ☐ Yes
2 ☐ No — *SKIP to Check Item R36*

NOTES

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

30a. **During the past 4 months did . . . attend school beyond the high school level including a college, university, or other school?**

1658 1 ☐ Yes
2 ☐ No — *SKIP to Check Item R36*

b. **Were any of . . .'s educational expenses during the past 4 months paid for by the GI Bill, a Pell (BEOG) Grant, a Guaranteed or National Direct Student Loan, or any other type of scholarship or grant?**

1660 1 ☐ Yes
2 ☐ No — *SKIP to 33*

c. **What kind of educational assistance did . . . receive?**

Anything else?

Mark (X) all that apply.

1662 1 ☐ GI/VEAP Benefits — *Mark "40" on the ISS*
1664 2 ☐ Pell Grant (BEOG)
1666 3 ☐ Supplemental Educational Opportunity Grant (SEOG)
1668 4 ☐ Other VA Educational Assistance Programs
1670 5 ☐ Other scholarship, fellowship, or grant
1672 6 ☐ Employer assistance
1674 7 ☐ JTPA/CETA training allowance
1676 8 ☐ Guaranteed Student Loan (GSL)
1678 9 ☐ National Direct Student Loan (NDSL)

Mark "175" on ISS

31a. **What kind of term system does . . .'s school use — semester, trimester, quarter, or something else?**

1680 1 ☐ Semester
2 ☐ Trimester
3 ☐ Quarter
4 ☐ Other
x1 ☐ DK

b. **How much was . . .'s total tuition and fees for the (semester/trimester/quarter/school term)?**

(Include all tuition and fees, even if paid completely or in part by the family, a scholarship or a loan.)

1682 $ ____ . 00
x1 ☐ DK

CHECK ITEM R34 Is "Pell Grant (BEOG)" marked in item 30c?

1684 1 ☐ Yes
2 ☐ No — *SKIP to Check Item R35*

31c. **What was the total amount of . . .'s Pell Grant (BEOG) for the (semester/trimester/quarter/school term)?**

1686 $ ____ . 00
x1 ☐ DK

CHECK ITEM R35 Is box 3, 4, 5 or 6 marked in item 30c?

1688 1 ☐ Yes
2 ☐ No — *SKIP to 33*

32. **What was the total amount of . . .'s** *(Read appropriate types of educational assistance)* **for the (semester/trimester/quarter/school term)?**

1690 $ ____ . 00
x1 ☐ DK

33. **Did . . . participate in the Federally funded work-study program at school at any time during the past 4 months?**

1692 1 ☐ Yes
2 ☐ No

CHECK ITEM R36 *Refer to cc item 26a.* What is . . .'s marital status?

1694 1 ☐ Married, spouse absent
2 ☐ Other — *SKIP to Check Item R37*

ASK OR VERIFY —

34. **Is . . .'s spouse in the Armed Forces?**

1696 1 ☐ Yes
2 ☐ No

CHECK ITEM R37 Are any income types, assets, "worked" or "other educational assistance" marked on the ISS?

1698 1 ☐ Yes
2 ☐ No — *SKIP to 36a*

35a. **You said that during the 4-month period . . . received income from —** *(Mention working or other educational assistance if appropriate and read income sources and assets from the ISS.)* **Is that correct?**

1700 1 ☐ Yes
2 ☐ No — *Probe and resolve (Make corrections to ISS if necessary)*

b. **Did . . . receive income from any other source such as financial help from someone outside the household, support payments, payments from the government or anything else?**

1702 1 ☐ Yes — *SKIP to 36b*
2 ☐ No — *SKIP to Check Item E1*

36a. **I have not recorded any sources of income for . . . during the 4-month period. Did . . . receive income from some source we have not covered, such as financial help from someone outside the household, support payments, payments from the government or anything else?**

1704 1 ☐ Yes
2 ☐ No — *SKIP to Check Item P1, page 45*

b. **What kind of income did . . . receive?**

Anything else?

Enter codes from income source list and mark ISS.

1706 ____
1708 ____
1710 ____

Section 2 — EARNINGS AND EMPLOYMENT

CHECK ITEM E1 Is "Worked" marked on the ISS?

1712
1 ☐ Yes
2 ☐ No — *SKIP to first ISS Code marked or Check Item P1, page 45*

1a. You said . . . worked during the 4-month period. Was . . . working for an employer or was . . . self-employed?
(Include unpaid worker in family business or farm as working for an employer.)

1714
1 ☐ Worked for employer only
2 ☐ Self-employed only — *SKIP to Statement B, page 18*
3 ☐ Both worked for employer and self-employed

b. How many different employers did . . . work for during this 4-month period?

1716
1 ☐ 1 employer
2 ☐ 2 employers
3 ☐ 3 or more employers

CHECK ITEM E2 Is "Both worked for employer and self-employed" marked in 1a?

1718
1 ☐ Yes
2 ☐ No — *SKIP to 2a*

STATEMENT A **. . . worked for an employer and was also self-employed. The first questions will be about . . .'s work for an employer.**

NOTES

EARNINGS AND EMPLOYMENT

Section 2 — EARNINGS AND EMPLOYMENT (Continued)

Part A1 — EMPLOYER IDENTIFICATION NUMBER 1

2a. What is the name of the employer for whom . . . worked during this 4-month period?

(If . . . worked for more than one employer, enter the employer for whom . . . worked the most hours during the 4-month period or the most recent employer.)

PGM 8 — Employer Name
2000 _____

CHECK ITEM E3 Enter employer ID number from cc item 42, or if a new employer, enter next available ID number →

PGM 8 — Employer ID No.
2002 ☐

2b. What kind of business or industry was *(Name of company or business)*?

For example: TV and radio manufacturing, retail shoe store, State Labor Department, farm.

PGM 8
2004 _____

c. *ASK OR VERIFY* —

Is it mainly —

PGM 8
2006
1 ☐ **Manufacturing?**
2 ☐ **Wholesale Trade?**
3 ☐ **Retail Trade?**
4 ☐ **Some other kind of business?**

d. What kind of work was . . . doing on this job?

For example: Electrical engineer, stock clerk, typist, farmer

PGM 8
2008 _____

e. What were . . .'s main activities or duties?

For example: Types, keeps account books, files, sells cars, operates printing press, finishes concrete.

PGM 8
2010 _____

f. *ASK OR VERIFY* —

Was . . . an employee of —

PGM 8
2012
1 ☐ **A private company or individual?**
2 ☐ **Federal government (exclude Armed Forces)?**
3 ☐ **State government?**
4 ☐ **Local government?**
5 ☐ **Armed Forces?**
6 ☐ **Unpaid in family business or farm?** — *SKIP to Check Item E5*

3a. *ASK OR VERIFY* —

Was . . . employed by *(Name of employer)* **during the entire 4-month period?**

PGM 7
2014
1 ☐ Yes — *SKIP to 4*
2 ☐ No

b. When was . . . employed by *(Name of employer)* **during this 4-month period?**

FROM
2016 ☐☐ Month 2018 ☐☐ Day
TO
2020 ☐☐ Month 2022 ☐☐ Day

4. *ASK OR VERIFY* —

How many hours per week did . . . usually work at this job?

2024 ☐☐ Hours
X3 ☐ None
X1 ☐ DK

5. Was . . . paid by the hour on this job?

2026
1 ☐ Yes
2 ☐ No — *SKIP to 7*

6. What was . . .'s regular hourly pay rate at the end of *(Read last month or "to" date in item 3b)*?

2028 $ ☐☐ . ☐
X1 ☐ DK
X2 ☐ Ref. — *SKIP to Check Item E5*

7. During the 4-month period how often was . . . paid on this job?

2030
1 ☐ Once a week
2 ☐ Once each 2 weeks
3 ☐ Once a month
4 ☐ Twice a month
5 ☐ Some other way — *Specify* _____

Section 2 — EARNINGS AND EMPLOYMENT (Continued)

Part A1 — EMPLOYER IDENTIFICATION NUMBER 1 (Continued)

8. *READ STATEMENT ONLY ONCE PER RESPONDENT*

The next question is about the pay . . . received from this job during the 4-month period. We need the most accurate figures you can provide. Be sure to include any tips, bonuses, overtime pay, or commissions.

What was the total amount of pay that . . . received BEFORE deductions on this job in *(Read each month)***?**

FOR MEMBERS OF THE ARMED FORCES — *(Be sure to include housing allowances and any other special types of pay.)*

NOTE: Certain months contain 5 paydays for workers paid weekly and 3 paydays for workers paid every 2 weeks.

★

		INTERVIEWER USE ONLY
LAST MONTH	2032 $ _____ . 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 Total $ _____ .00
2 MONTHS AGO	2034 $ _____ . 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 Total $ _____ .00
3 MONTHS AGO	2036 $ _____ . 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 Total $ _____ .00
4 MONTHS AGO	2038 $ _____ . 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 Total $ _____ .00

CHECK ITEM E4 Is "DK" marked in all parts of item 8?

2040 1 ☐ Yes
2 ☐ No — *SKIP to Check Item E5*

9. If we were to call back later would you (or . . .) be able to provide us with the amounts of pay . . . received in each of these months? (Information about how much . . . received each month is very important to the results of our survey.)

2042 1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 3a*
2 ☐ No

CHECK ITEM E5 Number of employers in item 1b, page 13?

2044 1 ☐ 1 employer — *SKIP to Check Item E8, page 17*
2 ☐ 2 or more employers

Section 2 — EARNINGS AND EMPLOYMENT (Continued)

Part A2 — EMPLOYER IDENTIFICATION NUMBER 2

10a. What is the name of the other employer for whom . . . worked during this 4-month period?

(If . . . worked for more than one employer, enter the employer for whom . . . worked the second most hours during the 4-month period.)

PGM 8 — Employer Name

2100 _____

_____

CHECK ITEM E6 Enter employer ID number from cc item 42, or if a new employer, enter next available ID number →

PGM 8 — Employer ID No.

2102 ☐

10b. What kind of business or industry was *(Name of company or business)*?

For example: TV and radio manufacturing, retail shoe store, State Labor Department, farm.

PGM 8

2104 _____

_____

c. *ASK OR VERIFY* —

Is it mainly —

PGM 8

2106

1 ☐ **Manufacturing?**
2 ☐ **Wholesale Trade?**
3 ☐ **Retail Trade?**
4 ☐ **Some other kind of business?**

d. What kind of work was . . . doing on this job?

For example: Electrical engineer, stock clerk, typist, farmer

PGM 8

2108 _____

e. What were . . .'s main activities or duties?

For example: Types, keeps account books, files, sells cars, operates printing press, finishes concrete.

PGM 8

2110 _____

_____

f. *ASK OR VERIFY* —

Was . . . an employee of —

PGM 8

2112

1 ☐ **A private company or individual?**
2 ☐ **Federal government (exclude Armed Forces)?**
3 ☐ **State government?**
4 ☐ **Local government?**
5 ☐ **Armed Forces?**
6 ☐ **Unpaid in family business or farm?** — *SKIP to Check Item E8*

11a. *ASK OR VERIFY* —

Was . . . employed by *(Name of employer)* **during the entire 4-month period?**

PGM 7

2114

1 ☐ Yes — *SKIP to 12*
2 ☐ No

b. When was . . . employed by *(Name of employer)* **during this 4-month period?**

FROM

2116 ☐☐ Month 2118 ☐☐ Day

TO

2120 ☐☐ Month 2122 ☐☐ Day

12. *ASK OR VERIFY* —

How many hours per week did . . . usually work at this job?

2124 ☐☐ Hours

X3 ☐ None
X1 ☐ DK

13. Was . . . paid by the hour on this job?

2126

1 ☐ Yes
2 ☐ No — *SKIP to 15*

14. What was . . .'s regular hourly pay rate at the end of *(Read last month or "to" date in item 11b)*?

2128 $ ☐

X1 ☐ DK
X2 ☐ Ref. — *SKIP to Check Item E8*

15. During the 4-month period how often was . . . paid on this job?

2130

1 ☐ Once a week
2 ☐ Once each 2 weeks
3 ☐ Once a month
4 ☐ Twice a month
5 ☐ Some other way — *Specify*

_____

16. *READ STATEMENT ONLY ONCE PER RESPONDENT*

The next question is about the pay . . . received from this job during the 4-month period. We need the most accurate figures you can provide. Be sure to include any tips, bonuses, overtime pay, or commissions.

What was the total amount of pay that . . . received BEFORE deductions on this job in *(Read each month)***?**

FOR MEMBERS OF THE ARMED FORCES — *(Be sure to include housing allowances and any other special types of pay.)*

NOTE: Certain months contain 5 paydays for workers paid weekly and 3 paydays for workers paid every 2 weeks.

★

		INTERVIEWER USE ONLY
LAST MONTH	2132 $ _____ . 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 Total $ _____ .00
2 MONTHS AGO	2134 $ _____ . 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 Total $ _____ .00
3 MONTHS AGO	2136 $ _____ . 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 Total $ _____ .00
4 MONTHS AGO	2138 $ _____ . 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 $ _____ .00 Total $ _____ .00

CHECK ITEM E7 Is "DK" marked in all parts of item 16?

2140 1 ☐ Yes
2 ☐ No — *SKIP to Check Item E8*

17. **If we were to call back later would you (or . . .) be able to provide us with the amounts of pay . . . received in each of these months? (Information about how much . . . received each month is very important to the results of our survey.)**

2142 1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 3b*
2 ☐ No

CHECK ITEM E8 Is "Both worked for employer and self-employed" marked in item 1a, page 13?

2144 1 ☐ Yes — *Read Statement B*
2 ☐ No — *SKIP to first ISS Code or Check Item P1, page 45*

Section 2 — EARNINGS AND EMPLOYMENT (Continued)

Part B1 — SELF-EMPLOYMENT IDENTIFICATION NUMBER 1

STATEMENT B **You said . . . was (also) self-employed during this 4-month period.**

a. What was the name of . . .'s business/professional practice/farm?

PGM 8 Business name
2200 _____

CHECK ITEM S1 Enter business ID number from cc item 43, or if a new business enter the next available ID number →

PGM 8 Business ID No.
2202 ☐

b. What kind of business was this?

PGM 8
2204 _____

ASK OR VERIFY —
c. Is it mainly —

PGM 8
2206
1 ☐ **Manufacturing?**
2 ☐ **Wholesale Trade?**
3 ☐ **Retail Trade?**
4 ☐ **Some other kind of business?**

d. What kind of work was . . . doing?

PGM 8
2208 _____

e. What were . . .'s most important activities or duties?

PGM 8
2210 _____

ASK OR VERIFY —
f. How many hours per week did . . . usually work at this business?

PGM 7
2212 ☐☐ Hours
x3 ☐ None
x1 ☐ DK

. Do you think that the gross earnings of this business will be $1,000 or more during the next 12 months?
Gross earnings include sales and receipts before expenses.

2214
1 ☐ Yes
2 ☐ No — *SKIP to 10*
x1 ☐ DK

CHECK ITEM S2 Have questions 3—5b already been answered for this business by another household member?

2216
1 ☐ Yes — *SKIP to 6a*
2 ☐ No

. What was the total number of employees working for this business? Be sure to include . . . .
Enter 999 if 1,000 or more employees.

2218 ☐☐☐ Employees
x1 ☐ DK

a. Was . . .'s business incorporated?

2220
1 ☐ Yes — *SKIP to 5a*
2 ☐ No

b. Was . . .'s business a sole proprietorship or a partnership?

2222
1 ☐ Sole proprietorship — *SKIP to 6a*
2 ☐ Partnership

a. Aside from . . . were any other members of this household owners or partners in this business?

2224
1 ☐ Yes
2 ☐ No — *SKIP to 6a*

b. Which members?

	Person No.	Name
2226		
2228		
2230		

a. Was . . . paid a regular salary from this business during the 4-month period?

2232
1 ☐ Yes
2 ☐ No

b. Did . . . receive any (other) income from the business during this 4-month period?

2234
1 ☐ Yes
2 ☐ No

CHECK ITEM S3 Is "Yes" marked in either item 6a or 6b?

2236
1 ☐ Yes
2 ☐ No — *SKIP to Check Item S5*

7. *READ STATEMENT ONLY ONCE PER RESPONDENT.*

The next question is about the income . . . received from this business during the 4-month period. We need the most accurate figures you can provide.

What was the total amount of income that . . . received from this business in *(Read each month)*?

★

		INTERVIEWER USE ONLY
LAST MONTH	2238 $. 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ .00 $ .00 $ .00 $ .00 TOTAL $ .00
2 MONTHS AGO	2240 $. 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ .00 $ .00 $ .00 $ .00 TOTAL $ .00
3 MONTHS AGO	2242 $. 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ .00 $ .00 $ .00 $ .00 TOTAL $ .00
4 MONTHS AGO	2244 $. 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ .00 $ .00 $ .00 $ .00 TOTAL $ .00

CHECK ITEM S4 Is "DK" marked in all parts of item 7? 2246
1 ☐ Yes
2 ☐ No — *SKIP to Check Item S5*

8. If we were to call back later would you (or . . .) be able to provide us with the amounts of income . . . received in each of these months? (Information about how much . . . received each month is very important to the results of our survey.) 2248
1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 4a*
2 ☐ No

CHECK ITEM S5 *Refer to item 4a, page 18.* Is this business incorporated? 2250
1 ☐ Yes — *SKIP to 11*
2 ☐ No

CHECK ITEM S6 Has information about the net profit (or loss) for this business already been obtained by another household member? 2252
1 ☐ Yes — *SKIP to 11*
2 ☐ No

9a. Can you give me an estimate of the net profit (or loss), that is, the difference between gross receipts and expenses during the 4-month period shown on the calendar? 2254
1 ☐ Yes
2 ☐ No — *SKIP to 11*

b. What was the net profit (or loss) from this business during the 4-month period?
2256 $. 00
2258 x4 ☐ Loss in amount box — *If "Broke even," mark $1 in box.* } *SKIP to 11*

10. About how much did . . . earn from this business after expenses during the 4-month period? 2260 $. 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref.

11. Was . . . self-employed in any other business (professional practice/farm) during the 4-month period? 2262
1 ☐ Yes
2 ☐ No — *SKIP to first ISS Code or Check Item P1, page 45*

Section 2 — EARNINGS AND EMPLOYMENT (Continued)

Part B2 — SELF-EMPLOYMENT IDENTIFICATION NUMBER 2

12a. What was the name of . . .'s other business/ professional practice/farm?

PGM 8 Business name

2300 _____

CHECK ITEM S7 Enter business ID number from cc item 43, or if a new business, enter the next available ID number →

PGM 8 Business ID No.

2302 ☐☐

12b. What kind of business was this?

PGM 8

2304 _____

ASK OR VERIFY —

c. Is it mainly —

PGM 8 / 2306

1 ☐ **Manufacturing?**
2 ☐ **Wholesale Trade?**
3 ☐ **Retail Trade?**
4 ☐ **Some other kind of business?**

d. What kind of work was . . . doing?

PGM 8

2308 _____

e. What were . . .'s most important activities or duties?

PGM 8

2310 _____

f. How many hours per week did . . . usually work at this business?

PGM 7

2312 ☐☐ Hours

x3 ☐ None
x1 ☐ DK

3. Do you think that the gross earnings of this business will be $1,000 or more during the next 12 months?

Gross earnings include sales and receipts before expenses.

2314

1 ☐ Yes
2 ☐ No — *SKIP to 21*
x1 ☐ DK

CHECK ITEM S8 Have questions 14 – 16b already been answered for this business by another household member?

2316

1 ☐ Yes — *SKIP to 17a*
2 ☐ No

4. What was the total number of employees working for this business? Be sure to include . . . .

Enter 999 if 1,000 or more employees.

2318 ☐☐☐ Employees

x1 ☐ DK

5a. Was . . .'s business incorporated?

2320

1 ☐ Yes — *SKIP to 16a*
2 ☐ No

b. Was . . .'s business a sole proprietorship or a partnership?

2322

1 ☐ Sole proprietorship — *SKIP to 17a*
2 ☐ Partnership

6a. Aside from . . . were any other members of this household owners or partners in this business?

2324

1 ☐ Yes
2 ☐ No — *SKIP to 17a*

b. Which members?

	Person No.	Name
2326		
2328		
2330		

7a. Was . . . paid a regular salary from this business during the 4-month period?

2332

1 ☐ Yes
2 ☐ No

b. Did . . . receive any (other) income from the business during this 4-month period?

2334

1 ☐ Yes
2 ☐ No

CHECK ITEM S9 Is "Yes" marked in either item 17a or 17b?

2336

1 ☐ Yes
2 ☐ No — *SKIP to Check Item S11*

Section 2 — EARNINGS AND EMPLOYMENT (Continued)

Part B2 — SELF-EMPLOYMENT IDENTIFICATION NUMBER 2 (Continued)

18. *READ STATEMENT ONLY ONCE PER RESPONDENT.*

The next question is about the income . . . received from this business during the 4-month period. We need the most accurate figures you can provide.

What was the total amount of income that . . . received from this business in *(Read each month)*?

★

		INTERVIEWER USE ONLY
LAST MONTH	2338 $. 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ .00 $ .00 $ .00 $ .00 TOTAL $ .00
2 MONTHS AGO	2340 $. 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ .00 $ .00 $ .00 $ .00 TOTAL $ .00
3 MONTHS AGO	2342 $. 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ .00 $ .00 $ .00 $ .00 TOTAL $ .00
4 MONTHS AGO	2344 $. 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ .00 $ .00 $ .00 $ .00 TOTAL $ .00

CHECK ITEM S10 Is "DK" marked in all parts of item 18?

2346 1 ☐ Yes
2 ☐ No — *SKIP to Check Item S11*

19. **If we were to call back later would you (or . . .) be able to provide us with the amounts of income . . . received in each of these months? (Information about how much . . . received each month is very important to the results of our survey.)**

2348 1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 4b*
2 ☐ No

CHECK ITEM S11 *Refer to item 15a, page 20.* Is this business incorporated?

2350 1 ☐ Yes — *SKIP to first ISS Code or Check Item P1, page 45*
2 ☐ No

CHECK ITEM S12 Has information about the net profit (or loss) for this business already been obtained by another household member?

2352 1 ☐ Yes — *SKIP to first ISS Code or Check Item P1, page 45*
2 ☐ No

20a. **We would also appreciate an estimate of the net profit (or loss), that is, the difference between gross receipts and expenses for this 4-month period. Can you give me an estimate of the net profit (or loss) during the 4-month period?**

2354 1 ☐ Yes
2 ☐ No — *SKIP to first ISS Code or Check Item P1, page 45*

b. **What was the net profit (or loss) from this business during the 4-month period?**

2356 $. 00
2358 x4 ☐ Loss in amount box — *If "Broke even," mark $1 in box.*

SKIP to first ISS Code or Check Item P1, page 45

21. **About how much did . . . earn from this business after expenses during the 4-month period?**

2360 $. 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref.

SKIP to first ISS Code or Check Item P1, page 45

Section 3 — AMOUNTS

Part A — GENERAL AMOUNTS (ISS Codes 1—56)

1. You said . . . received *(Read name of income type)* **during the 4-month period.**

Income code 3000 ☐☐ Name of income type ____

CHECK ITEM A1 *Mark (X) income type code.*

3002
1 ☐ ISS code 1 or 2 (SS or RR)
2 ☐ ISS code 25 (WIC) — *SKIP to 14, page 24*
3 ☐ ISS code 27 (Food Stamps) — *SKIP to 12a, page 24*
4 ☐ Other ISS codes — *SKIP to Check Item A4*

CHECK ITEM A2 *Refer to cc item 27.*
Is . . . a designated parent, or guardian of children under age 18?

3004
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A3*

2. During this 4-month period, were any separate payments from (Social Security/Railroad Retirement) received especially for the children?

3006
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A3*

3. Did . . . also receive a separate payment for (himself/herself) during any of these months?

3008
1 ☐ Yes
2 ☐ No — *SKIP to 10a*

CHECK ITEM A3 Is . . . married?

3010
1 ☐ Yes
2 ☐ No — *SKIP to 5a*

4. Did . . . receive Social Security (Railroad Retirement) jointly with . . .'s spouse?

3012
1 ☐ Yes
2 ☐ No — *SKIP to 5a*

CHECK ITEM A4 Has information about the amount received by . . . from the income source entered in 1 already been recorded during an interview for . . .'s spouse?

3014
1 ☐ Yes — *SKIP to next ISS Code or Check Item P1, page 45*
2 ☐ No

5a. Did . . . receive any *(Read name of income type)* **in** *(Read each month)***?**

NOTE — Some persons receive more than one payment per month for certain income types such as Unemployment Compensation and AFDC.

5b. How much did . . . receive in *(Read each month marked "Yes" in 5a)***? Please answer by giving the total amount each month before any deductions.**

	5a.	5b.
Last month	3016 1 ☐ Yes 2 ☐ No x1 ☐ DK	3018 $ ____ . 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	3020 1 ☐ Yes 2 ☐ No x1 ☐ DK	3022 $ ____ . 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	3024 1 ☐ Yes 2 ☐ No x1 ☐ DK	3026 $ ____ . 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	3028 1 ☐ Yes 2 ☐ No x1 ☐ DK	3030 $ ____ . 00 x1 ☐ DK x2 ☐ Ref.

CHECK ITEM A5 *Mark (X) income type code.*

3032
1 ☐ ISS code 1 or 2 — *SKIP to Check Item A7*
2 ☐ ISS code 8 or 20 through 24
3 ☐ All other income codes — *SKIP to next ISS Code or Check Item P1, page 45*

6a. Were all the people living here covered by . . .'s payments?

3034
1 ☐ Yes — *SKIP to Check Item A6*
2 ☐ No

NOTES

Section 3 — AMOUNTS (Continued)

Part A — GENERAL AMOUNTS (ISS Codes 1—56) (Continued)

6b. Which persons were covered?

	Person No.	Name
3036		
3038		
3040		
3042		
3044		
3046		
3048		
3050		
3052		
3054		

CHECK ITEM A6 Is this ISS code "8"?

3056 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

7. Is . . . required to fill out an annual income questionnaire for the Veterans Administration?

3060 1 ☐ Yes
2 ☐ No
x1 ☐ DK
} *SKIP to next ISS Code or Check Item P1, page 45*

CHECK ITEM A7 Was this ISS code marked for . . . in cc item 45 last reference period?

3062 1 ☐ Yes — *SKIP to Check Item A8*
2 ☐ No

(SHOW FLASHCARD O)

8. Social Security (Railroad Retirement) sends out two types of checks. Please look at this card and tell me which color check . . . receives?

3064 1 ☐ Green
2 ☐ Gold
3 ☐ Other
x1 ☐ DK

9. Do . . .'s payments usually come on the first of the month or the third?

3066 1 ☐ First
2 ☐ Third
3 ☐ Other
x1 ☐ DK

CHECK ITEM A8 *Refer to item 2, page 22.* Were (Social Security/Railroad Retirement) payments received especially for the children?

3068 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

10a. Were Social Security (Railroad Retirement) payments received for the children in *(Read each month)*?		**10b.** *If "Yes" in 10a* — **How much was received?**
Last month	3070 1 ☐ Yes 2 ☐ No x1 ☐ DK	3072 $. 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	3074 1 ☐ Yes 2 ☐ No x1 ☐ DK	3076 $. 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	3078 1 ☐ Yes 2 ☐ No x1 ☐ DK	3080 $. 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	3082 1 ☐ Yes 2 ☐ No x1 ☐ DK	3084 $. 00 x1 ☐ DK x2 ☐ Ref.

VERIFY IF ONLY ONE CHILD OR ASK —

11a. Were all children living here covered by these payments?

3086 1 ☐ Yes — *SKIP to next ISS Code or Check Item P1, page 45*
2 ☐ No

Section 3 — AMOUNTS (Continued)

Part A — GENERAL AMOUNTS (ISS Codes 1—56) (Continued)

1b. Which children were covered?

	Person No.	Name
3088		
3090		
3092		
3094		
3096		
3098		

SKIP to next ISS Code or Check Item P1, page 45

2a. Were all the people living here covered under . . .'s food stamp allotment?

3100 1 ☐ Yes — *SKIP to 13a*
2 ☐ No

b. Which persons were covered?

	Person No.	Name
3102		
3104		
3106		
3108		
3110		
3112		
3114		
3116		
3118		
3120		

3a. Did . . . receive food stamps in *(Read each month)*?

13b. *If "Yes" in 13a, ask* — **What was the total amount?**

Last month	3122	1 ☐ Yes 2 ☐ No x1 ☐ DK	3124	$. 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	3126	1 ☐ Yes 2 ☐ No x1 ☐ DK	3128	$. 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	3130	1 ☐ Yes 2 ☐ No x1 ☐ DK	3132	$. 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	3134	1 ☐ Yes 2 ☐ No x1 ☐ DK	3136	$. 00 x1 ☐ DK x2 ☐ Ref.

SKIP to next ISS Code or Check Item P1, page 45

14. Did . . . receive any WIC vouchers in *(Read each month)*?

Mark (X) all that apply.

3138 1 ☐ Last month
3140 2 ☐ 2 months ago
3142 3 ☐ 3 months ago
3144 4 ☐ 4 months ago

SKIP to next ISS Code or Check Item P1, page 45

Section 3 — AMOUNTS

Part A — GENERAL AMOUNTS (ISS Codes 1—56)

1. You said . . . received *(Read name of income type)* **during the 4-month period.**

Income code 3200 ☐☐ Name of income type _____

CHECK ITEM A1 *Mark (X) income type code.*

3202
1 ☐ ISS code 1 or 2 (SS or RR)
2 ☐ ISS code 25 (WIC) — *SKIP to 14, page 27*
3 ☐ ISS code 27 (Food Stamps) — *SKIP to 12a, page 27*
4 ☐ Other ISS codes — *SKIP to Check Item A4*

CHECK ITEM A2 *Refer to cc item 27.* Is . . . a designated parent, or guardian of children under age 18?

3204
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A3*

2. During this 4-month period, were any separate payments from (Social Security/Railroad Retirement) received especially for the children?

3206
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A3*

3. Did . . . also receive a separate payment for (himself/herself) during any of these months?

3208
1 ☐ Yes
2 ☐ No — *SKIP to 10a*

CHECK ITEM A3 Is . . . married?

3210
1 ☐ Yes
2 ☐ No — *SKIP to 5a*

4. Did . . . receive Social Security (Railroad Retirement) jointly with . . .'s spouse?

3212
1 ☐ Yes
2 ☐ No — *SKIP to 5a*

CHECK ITEM A4 Has information about the amount received by . . . from the income source entered in 1 already been recorded during an interview for . . .'s spouse?

3214
1 ☐ Yes — *SKIP to next ISS Code or Check Item P1, page 45*
2 ☐ No

5a. Did . . . receive any *(Read name of income type)* **in** *(Read each month)***?**

NOTE — Some persons receive more than one payment per month for certain income types such as Unemployment Compensation and AFDC.

5b. How much did . . . receive in *(Read each month marked "Yes" in 5a)***? Please answer by giving the total amount each month before any deductions.**

Last month	3216 1 ☐ Yes 2 ☐ No x1 ☐ DK	3218 $ _____ . 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	3220 1 ☐ Yes 2 ☐ No x1 ☐ DK	3222 $ _____ . 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	3224 1 ☐ Yes 2 ☐ No x1 ☐ DK	3226 $ _____ . 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	3228 1 ☐ Yes 2 ☐ No x1 ☐ DK	3230 $ _____ . 00 x1 ☐ DK x2 ☐ Ref.

CHECK ITEM A5 *Mark (X) income type code.*

3232
1 ☐ ISS code 1 or 2 — *SKIP to Check Item A7*
2 ☐ ISS code 8 or 20 through 24
3 ☐ All other income codes — *SKIP to next ISS Code or Check Item P1, page 45*

6a. Were all the people living here covered by . . .'s payments?

3234
1 ☐ Yes — *SKIP to Check Item A6*
2 ☐ No

NOTES

Section 3 — AMOUNTS (Continued)

Part A — GENERAL AMOUNTS (ISS Codes 1—56) (Continued)

6b. Which persons were covered?

	Person No.	Name
3236		
3238		
3240		
3242		
3244		
3246		
3248		
3250		
3252		
3254		

CHECK ITEM A6 Is this ISS code "8"?

3256 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

7. Is . . . required to fill out an annual income questionnaire for the Veterans Administration?

3260 1 ☐ Yes
2 ☐ No
X1 ☐ DK
} *SKIP to next ISS Code or Check Item P1, page 45*

CHECK ITEM A7 Was this ISS code marked for . . . in cc item 45 last reference period?

3262 1 ☐ Yes — *SKIP to Check Item A8*
2 ☐ No

(SHOW FLASHCARD O)

8. Social Security (Railroad Retirement) sends out two types of checks. Please look at this card and tell me which color check . . . receives?

3264 1 ☐ Green
2 ☐ Gold
3 ☐ Other
X1 ☐ DK

9. Do . . .'s payments usually come on the first of the month or the third?

3266 1 ☐ First
2 ☐ Third
3 ☐ Other
X1 ☐ DK

CHECK ITEM A8 *Refer to item 2, page 25.* Were (Social Security/Railroad Retirement) payments received especially for the children?

3268 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

10a. Were Social Security (Railroad Retirement) payments received for the children in *(Read each month)*?

10b. *If "Yes" in 10a* — **How much was received?**

Last month	3270 1 ☐ Yes 2 ☐ No X1 ☐ DK	3272 $. 00	X1 ☐ DK X2 ☐ Ref.
2 months ago	3274 1 ☐ Yes 2 ☐ No X1 ☐ DK	3276 $. 00	X1 ☐ DK X2 ☐ Ref.
3 months ago	3278 1 ☐ Yes 2 ☐ No X1 ☐ DK	3280 $. 00	X1 ☐ DK X2 ☐ Ref.
4 months ago	3282 1 ☐ Yes 2 ☐ No X1 ☐ DK	3284 $. 00	X1 ☐ DK X2 ☐ Ref.

VERIFY IF ONLY ONE CHILD OR ASK —

11a. Were all children living here covered by these payments?

3286 1 ☐ Yes — *SKIP to next ISS Code or Check Item P1, page 45*
2 ☐ No

Section 3 — AMOUNTS (Continued)

Part A — GENERAL AMOUNTS (ISS Codes 1—56) (Continued)

11b. Which children were covered?

	Person No.	Name
3288		
3290		
3292		
3294		
3296		
3298		

SKIP to next ISS Code or Check Item P1, page 45

12a. Were all the people living here covered under . . .'s food stamp allotment? 3300
1 ☐ Yes — *SKIP to 13a*
2 ☐ No

b. Which persons were covered?

	Person No.	Name
3302		
3304		
3306		
3308		
3310		
3312		
3314		
3316		
3318		
3320		

13a. Did . . . receive food stamps in *(Read each month)*?		**13b.** *If "Yes" in 13a, ask —* **What was the total amount?**
Last month	3322 1 ☐ Yes 2 ☐ No x1 ☐ DK	3324 $. 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	3326 1 ☐ Yes 2 ☐ No x1 ☐ DK	3328 $. 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	3330 1 ☐ Yes 2 ☐ No x1 ☐ DK	3332 $. 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	3334 1 ☐ Yes 2 ☐ No x1 ☐ DK	3336 $. 00 x1 ☐ DK x2 ☐ Ref.

SKIP to next ISS Code or Check Item P1, page 45

14. Did . . . receive any WIC vouchers in *(Read each month)*?
Mark (X) all that apply.

3338 1 ☐ Last month
3340 2 ☐ 2 months ago
3342 3 ☐ 3 months ago
3344 4 ☐ 4 months ago

SKIP to next ISS Code or Check Item P1, page 45

Section 3 — AMOUNTS

Part A — GENERAL AMOUNTS (ISS Codes 1–56)

1. You said . . . received *(Read name of income type)* **during the 4-month period.**

3400 Income code | Name of income type

CHECK ITEM A1 — *Mark (X) income type code.*

3402
1 ☐ ISS code 1 or 2 (SS or RR)
2 ☐ ISS code 25 (WIC) — *SKIP to 14, page 30*
3 ☐ ISS code 27 (Food Stamps) — *SKIP to 12a, page 30*
4 ☐ Other ISS codes — *SKIP to Check Item A4*

CHECK ITEM A2 — *Refer to cc item 27.*
Is . . . a designated parent, or guardian of children under age 18?

3404
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A3*

2. During this 4-month period, were any separate payments from (Social Security/Railroad Retirement) received especially for the children?

3406
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A3*

3. Did . . . also receive a separate payment for (himself/herself) during any of these months?

3408
1 ☐ Yes
2 ☐ No — *SKIP to 10a*

CHECK ITEM A3 — Is . . . married?

3410
1 ☐ Yes
2 ☐ No — *SKIP to 5a*

4. Did . . . receive Social Security (Railroad Retirement) jointly with . . .'s spouse?

3412
1 ☐ Yes
2 ☐ No — *SKIP to 5a*

CHECK ITEM A4 — Has information about the amount received by . . . from the income source entered in 1 already been recorded during an interview for . . .'s spouse?

3414
1 ☐ Yes — *SKIP to next ISS Code or Check Item P1, page 45*
2 ☐ No

5a. Did . . . receive any *(Read name of income type)* **in** *(Read each month)***?**

NOTE — Some persons receive more than one payment per month for certain income types such as Unemployment Compensation and AFDC.

5b. How much did . . . receive in *(Read each month marked "Yes" in 5a)***? Please answer by giving the total amount each month before any deductions.**

	5a		5b	
Last month	3416	1 ☐ Yes 2 ☐ No x1 ☐ DK	3418	$ ______ . 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	3420	1 ☐ Yes 2 ☐ No x1 ☐ DK	3422	$ ______ . 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	3424	1 ☐ Yes 2 ☐ No x1 ☐ DK	3426	$ ______ . 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	3428	1 ☐ Yes 2 ☐ No x1 ☐ DK	3430	$ ______ . 00 x1 ☐ DK x2 ☐ Ref.

CHECK ITEM A5 — *Mark (X) income type code.*

3432
1 ☐ ISS code 1 or 2 — *SKIP to Check Item A7*
2 ☐ ISS code 8 or 20 through 24
3 ☐ All other income codes — *SKIP to next ISS Code or Check Item P1, page 45*

6a. Were all the people living here covered by . . .'s payments?

3434
1 ☐ Yes — *SKIP to Check Item A6*
2 ☐ No

NOTES

FORM SIPP-4000 (1-19-8?)

Section 3 — AMOUNTS (Continued)

Part A — GENERAL AMOUNTS (ISS Codes 1—56) (Continued)

6b. Which persons were covered?

	Person No.	Name
3436		
3438		
3440		
3442		
3444		
3446		
3448		
3450		
3452		
3454		

CHECK ITEM A6 Is this ISS code "8"?

3456 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

7. Is . . . required to fill out an annual income questionnaire for the Veterans Administration?

3460 1 ☐ Yes
2 ☐ No
x1 ☐ DK
} *SKIP to next ISS Code or Check Item P1, page 45*

CHECK ITEM A7 Was this ISS code marked for . . . in cc item 45 last reference period?

3462 1 ☐ Yes — *SKIP to Check Item A8*
2 ☐ No

(SHOW FLASHCARD O)

8. Social Security (Railroad Retirement) sends out two types of checks. Please look at this card and tell me which color check . . . receives?

3464 1 ☐ Green
2 ☐ Gold
3 ☐ Other
x1 ☐ DK

9. Do . . .'s payments usually come on the first of the month or the third?

3466 1 ☐ First
2 ☐ Third
3 ☐ Other
x1 ☐ DK

CHECK ITEM A8 *Refer to item 2, page 28.* Were (Social Security/Railroad Retirement) payments received especially for the children?

3468 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

10a. Were Social Security (Railroad Retirement) payments received for the children in *(Read each month)*?

10b. *If "Yes" in 10a* — **How much was received?**

Last month	3470 1 ☐ Yes 2 ☐ No x1 ☐ DK	3472	$. 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	3474 1 ☐ Yes 2 ☐ No x1 ☐ DK	3476	$. 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	3478 1 ☐ Yes 2 ☐ No x1 ☐ DK	3480	$. 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	3482 1 ☐ Yes 2 ☐ No x1 ☐ DK	3484	$. 00 x1 ☐ DK x2 ☐ Ref.

VERIFY IF ONLY ONE CHILD OR ASK —

11a. Were all children living here covered by these payments?

3486 1 ☐ Yes — *SKIP to next ISS Code or Check Item P1, page 45*
2 ☐ No

Section 3 — AMOUNTS (Continued)

Part A — GENERAL AMOUNTS (ISS Codes 1—56) (Continued)

11b. Which children were covered?

	Person No.	Name
3488		
3490		
3492		
3494		
3496		
3498		

SKIP to next ISS Code or Check Item P1, page 45

12a. Were all the people living here covered under . . .'s food stamp allotment? 3500

1 ☐ Yes — *SKIP to 13a*
2 ☐ No

b. Which persons were covered?

	Person No.	Name
3502		
3504		
3506		
3508		
3510		
3512		
3514		
3516		
3518		
3520		

13a. Did . . . receive food stamps in *(Read each month)*?		**13b.** *If "Yes" in 13a, ask —* **What was the total amount?**	
Last month	3522	1 ☐ Yes 2 ☐ No X1 ☐ DK	3524 $. 00 X1 ☐ DK X2 ☐ Ref.
2 months ago	3526	1 ☐ Yes 2 ☐ No X1 ☐ DK	3528 $. 00 X1 ☐ DK X2 ☐ Ref.
3 months ago	3530	1 ☐ Yes 2 ☐ No X1 ☐ DK	3532 $. 00 X1 ☐ DK X2 ☐ Ref.
4 months ago	3534	1 ☐ Yes 2 ☐ No X1 ☐ DK	3536 $. 00 X1 ☐ DK X2 ☐ Ref.

SKIP to next ISS Code or Check Item P1, page 45

14. Did . . . receive any WIC vouchers in *(Read each month)*?

Mark (X) all that apply.

3538 / 3540 / 3542 / 3544

1 ☐ Last month
2 ☐ 2 months ago
3 ☐ 3 months ago
4 ☐ 4 months ago

SKIP to next ISS Code or Check Item P1, page 45

Section 3 — AMOUNTS

Part A — GENERAL AMOUNTS (ISS Codes 1–56)

1. You said . . . received *(Read name of income type)* **during the 4-month period.**

Income code 3600 ☐☐ Name of income type ____

CHECK ITEM A1 *Mark (X) income type code.*

3602
1 ☐ ISS code 1 or 2 (SS or RR)
2 ☐ ISS code 25 (WIC) — *SKIP to 14, page 33*
3 ☐ ISS code 27 (Food Stamps) — *SKIP to 12a, page 33*
4 ☐ Other ISS codes — *SKIP to Check Item A4*

CHECK ITEM A2 *Refer to cc item 27.* Is . . . a designated parent, or guardian of children under age 18?

3604
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A3*

2. During this 4-month period, were any separate payments from (Social Security/Railroad Retirement) received especially for the children?

3606
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A3*

3. Did . . . also receive a separate payment for (himself/herself) during any of these months?

3608
1 ☐ Yes
2 ☐ No — *SKIP to 10a*

CHECK ITEM A3 Is . . . married?

3610
1 ☐ Yes
2 ☐ No — *SKIP to 5a*

4. Did . . . receive Social Security (Railroad Retirement) jointly with . . .'s spouse?

3612
1 ☐ Yes
2 ☐ No — *SKIP to 5a*

CHECK ITEM A4 Has information about the amount received by . . . from the income source entered in 1 already been recorded during an interview for . . .'s spouse?

3614
1 ☐ Yes — *SKIP to next ISS Code or Check Item P1, page 45*
2 ☐ No

5a. Did . . . receive any *(Read name of income type)* **in** *(Read each month)*?

NOTE — Some persons receive more than one payment per month for certain income types such as Unemployment Compensation and AFDC.

5b. How much did . . . receive in *(Read each month marked "Yes" in 5a)*? **Please answer by giving the total amount each month before any deductions.**

Last month	3616 1 ☐ Yes 2 ☐ No x1 ☐ DK	3618 $ ____ . 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	3620 1 ☐ Yes 2 ☐ No x1 ☐ DK	3622 $ ____ . 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	3624 1 ☐ Yes 2 ☐ No x1 ☐ DK	3626 $ ____ . 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	3628 1 ☐ Yes 2 ☐ No x1 ☐ DK	3630 $ ____ . 00 x1 ☐ DK x2 ☐ Ref.

CHECK ITEM A5 *Mark (X) income type code.*

3632
1 ☐ ISS code 1 or 2 — *SKIP to Check Item A7*
2 ☐ ISS code 8 or 20 through 24
3 ☐ All other income codes — *SKIP to next ISS Code or Check Item P1, page 45*

6a. Were all the people living here covered by . . .'s payments?

3634
1 ☐ Yes — *SKIP to Check Item A6*
2 ☐ No

NOTES

Section 3 — AMOUNTS (Continued)

Part A — GENERAL AMOUNTS (ISS Codes 1—56) (Continued)

6b. Which persons were covered?

	Person No.	Name
3636		
3638		
3640		
3642		
3644		
3646		
3648		
3650		
3652		
3654		

CHECK ITEM A6 Is this ISS code "8"?

3656 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

7. Is . . . required to fill out an annual income questionnaire for the Veterans Administration?

3660 1 ☐ Yes
2 ☐ No
x1 ☐ DK
} *SKIP to next ISS Code or Check Item P1, page 45*

CHECK ITEM A7 Was this ISS code marked for . . . in cc item 45 last reference period?

3662 1 ☐ Yes — *SKIP to Check Item A8*
2 ☐ No

(SHOW FLASHCARD O)

8. Social Security (Railroad Retirement) sends out two types of checks. Please look at this card and tell me which color check . . . receives?

3664 1 ☐ Green
2 ☐ Gold
3 ☐ Other
x1 ☐ DK

9. Do . . .'s payments usually come on the first of the month or the third?

3666 1 ☐ First
2 ☐ Third
3 ☐ Other
x1 ☐ DK

CHECK ITEM A8 *Refer to item 2, page 31.* Were (Social Security/Railroad Retirement) payments received especially for the children?

3668 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

10a. Were Social Security (Railroad Retirement) payments received for the children in *(Read each month)*?		**10b.** *If "Yes" in 10a* — **How much was received?**
Last month	3670 1 ☐ Yes 2 ☐ No x1 ☐ DK	3672 $. 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	3674 1 ☐ Yes 2 ☐ No x1 ☐ DK	3676 $. 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	3678 1 ☐ Yes 2 ☐ No x1 ☐ DK	3680 $. 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	3682 1 ☐ Yes 2 ☐ No x1 ☐ DK	3684 $. 00 x1 ☐ DK x2 ☐ Ref.

VERIFY IF ONLY ONE CHILD OR ASK —

11a. Were all children living here covered by these payments?

3686 1 ☐ Yes — *SKIP to next ISS Code or Check Item P1, page 45*
2 ☐ No

Section 3 — AMOUNTS (Continued)

Part A — GENERAL AMOUNTS (ISS Codes 1–56) (Continued)

11b. Which children were covered?

	Person No.	Name
3688		
3690		
3692		
3694		
3696		
3698		

SKIP to next ISS Code or Check Item P1, page 45

12a. Were all the people living here covered under . . .'s food stamp allotment? 3700

1 ☐ Yes — *SKIP to 13a*
2 ☐ No

b. Which persons were covered?

	Person No.	Name
3702		
3704		
3706		
3708		
3710		
3712		
3714		
3716		
3718		
3720		

13a. Did . . . receive food stamps in *(Read each month)*?			**13b.** *If "Yes" in 13a, ask* — **What was the total amount?**	
Last month	3722	1 ☐ Yes 2 ☐ No x1 ☐ DK	3724	$. 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	3726	1 ☐ Yes 2 ☐ No x1 ☐ DK	3728	$. 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	3730	1 ☐ Yes 2 ☐ No x1 ☐ DK	3732	$. 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	3734	1 ☐ Yes 2 ☐ No x1 ☐ DK	3736	$. 00 x1 ☐ DK x2 ☐ Ref.

SKIP to next ISS Code or Check Item P1, page 45

14. Did . . . receive any WIC vouchers in *(Read each month)*?

Mark (X) all that apply.

3738	1 ☐ Last month
3740	2 ☐ 2 months ago
3742	3 ☐ 3 months ago
3744	4 ☐ 4 months ago

SKIP to next ISS Code or Check Item P1, page 45

Section 3 — AMOUNTS

Part A — GENERAL AMOUNTS (ISS Codes 1—56)

1. You said . . . received *(Read name of income type)* **during the 4-month period.**

3800 Income code ☐☐ Name of income type _____

CHECK ITEM A1 *Mark (X) income type code.*

3802
1 ☐ ISS code 1 or 2 (SS or RR)
2 ☐ ISS code 25 (WIC) — *SKIP to 14, page 36*
3 ☐ ISS code 27 (Food Stamps) — *SKIP to 12a, page 36*
4 ☐ Other ISS codes — *SKIP to Check Item A4*

CHECK ITEM A2 *Refer to cc item 27.* Is . . . a designated parent, or guardian of children under age 18?

3804
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A3*

2. During this 4-month period, were any separate payments from (Social Security/Railroad Retirement) received especially for the children?

3806
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A3*

3. Did . . . also receive a separate payment for (himself/herself) during any of these months?

3808
1 ☐ Yes
2 ☐ No — *SKIP to 10a*

CHECK ITEM A3 Is . . . married?

3810
1 ☐ Yes
2 ☐ No — *SKIP to 5a*

4. Did . . . receive Social Security (Railroad Retirement) jointly with . . .'s spouse?

3812
1 ☐ Yes
2 ☐ No — *SKIP to 5a*

CHECK ITEM A4 Has information about the amount received by . . . from the income source entered in 1 already been recorded during an interview for . . .'s spouse?

3814
1 ☐ Yes — *SKIP to next ISS Code or Check Item P1, page 45*
2 ☐ No

5a. Did . . . receive any *(Read name of income type)* **in** *(Read each month)***?**

NOTE — Some persons receive more than one payment per month for certain income types such as Unemployment Compensation and AFDC.

5b. How much did . . . receive in *(Read each month marked "Yes" in 5a)***? Please answer by giving the total amount each month before any deductions.**

Last month	3816	1 ☐ Yes 2 ☐ No X1 ☐ DK	3818	$ _____ . 00 X1 ☐ DK X2 ☐ Ref.
2 months ago	3820	1 ☐ Yes 2 ☐ No X1 ☐ DK	3822	$ _____ . 00 X1 ☐ DK X2 ☐ Ref.
3 months ago	3824	1 ☐ Yes 2 ☐ No X1 ☐ DK	3826	$ _____ . 00 X1 ☐ DK X2 ☐ Ref.
4 months ago	3828	1 ☐ Yes 2 ☐ No X1 ☐ DK	3830	$ _____ . 00 X1 ☐ DK X2 ☐ Ref.

CHECK ITEM A5 *Mark (X) income type code.*

3832
1 ☐ ISS code 1 or 2 — *SKIP to Check Item A7*
2 ☐ ISS code 8 or 20 through 24
3 ☐ All other income codes — *SKIP to next ISS Code or Check Item P1, page 45*

6a. Were all the people living here covered by . . .'s payments?

3834
1 ☐ Yes — *SKIP to Check Item A6*
2 ☐ No

NOTES

Section 3 — AMOUNTS (Continued)

Part A — GENERAL AMOUNTS (ISS Codes 1—56) (Continued)

6b. Which persons were covered?

	Person No.	Name
3836		
3838		
3840		
3842		
3844		
3846		
3848		
3850		
3852		
3854		

CHECK ITEM A6 Is this ISS code "8"?

3856 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

7. Is . . . required to fill out an annual income questionnaire for the Veterans Administration?

3860 1 ☐ Yes
2 ☐ No
x1 ☐ DK
} *SKIP to next ISS Code or Check Item P1, page 45*

CHECK ITEM A7 Was this ISS code marked for . . . in cc item 45 last reference period?

3862 1 ☐ Yes — *SKIP to Check Item A8*
2 ☐ No

(SHOW FLASHCARD O)

8. Social Security (Railroad Retirement) sends out two types of checks. Please look at this card and tell me which color check . . . receives?

3864 1 ☐ Green
2 ☐ Gold
3 ☐ Other
x1 ☐ DK

9. Do . . .'s payments usually come on the first of the month or the third?

3866 1 ☐ First
2 ☐ Third
3 ☐ Other
x1 ☐ DK

CHECK ITEM A8 *Refer to item 2, page 34.* Were (Social Security/Railroad Retirement) payments received especially for the children?

3868 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

10a. Were Social Security (Railroad Retirement) payments received for the children in *(Read each month)*?

10b. *If "Yes" in 10a —* **How much was received?**

Last month	3870 1 ☐ Yes 2 ☐ No x1 ☐ DK	3872 $. 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	3874 1 ☐ Yes 2 ☐ No x1 ☐ DK	3876 $. 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	3878 1 ☐ Yes 2 ☐ No x1 ☐ DK	3880 $. 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	3882 1 ☐ Yes 2 ☐ No x1 ☐ DK	3884 $. 00 x1 ☐ DK x2 ☐ Ref.

VERIFY IF ONLY ONE CHILD OR ASK —

11a. Were all children living here covered by these payments?

3886 1 ☐ Yes — *SKIP to next ISS Code or Check Item P1, page 45*
2 ☐ No

Section 3 — AMOUNTS (Continued)

Part A — GENERAL AMOUNTS (ISS Codes 1—56) (Continued)

1b. Which children were covered?

	Person No.	Name
3888		
3890		
3892		
3894		
3896		
3898		

SKIP to next ISS Code or Check Item P1, page 45

2a. Were all the people living here covered under . . .'s food stamp allotment? 3900

1 ☐ Yes — *SKIP to 13a*
2 ☐ No

b. Which persons were covered?

	Person No.	Name
3902		
3904		
3906		
3908		
3910		
3912		
3914		
3916		
3918		
3920		

3a. Did . . . receive food stamps in *(Read each month)*?

13b. *If "Yes" in 13a, ask —* **What was the total amount?**

Last month	3922	1 ☐ Yes 2 ☐ No x1 ☐ DK	3924	$. 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	3926	1 ☐ Yes 2 ☐ No x1 ☐ DK	3928	$. 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	3930	1 ☐ Yes 2 ☐ No x1 ☐ DK	3932	$. 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	3934	1 ☐ Yes 2 ☐ No x1 ☐ DK	3936	$. 00 x1 ☐ DK x2 ☐ Ref.

SKIP to next ISS Code or Check Item P1, page 45

14. Did . . . receive any WIC vouchers in *(Read each month)*?

Mark (X) all that apply.

3938	1 ☐ Last month	*SKIP to next ISS Code or Check Item P1, page 45*
3940	2 ☐ 2 months ago	
3942	3 ☐ 3 months ago	
3944	4 ☐ 4 months ago	

Section 3 — AMOUNTS

Part A — GENERAL AMOUNTS (ISS Codes 1–56)

1. You said . . . received *(Read name of income type)* **during the 4-month period.**

Income code 4000 ☐☐ Name of income type _____

CHECK ITEM A1 *Mark (X) income type code.*

4002
1 ☐ ISS code 1 or 2 (SS or RR)
2 ☐ ISS code 25 (WIC) — *SKIP to 14, page 39*
3 ☐ ISS code 27 (Food Stamps) — *SKIP to 12a, page 39*
4 ☐ Other ISS codes — *SKIP to Check Item A4*

CHECK ITEM A2 *Refer to cc item 27.* Is . . . a designated parent, or guardian of children under age 18?

4004
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A3*

2. During this 4-month period, were any separate payments from (Social Security/Railroad Retirement) received especially for the children?

4006
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A3*

3. Did . . . also receive a separate payment for (himself/herself) during any of these months?

4008
1 ☐ Yes
2 ☐ No — *SKIP to 10a*

CHECK ITEM A3 Is . . . married?

4010
1 ☐ Yes
2 ☐ No — *SKIP to 5a*

4. Did . . . receive Social Security (Railroad Retirement) jointly with . . .'s spouse?

4012
1 ☐ Yes
2 ☐ No — *SKIP to 5a*

CHECK ITEM A4 Has information about the amount received by . . . from the income source entered in 1 already been recorded during an interview for . . .'s spouse?

4014
1 ☐ Yes — *SKIP to next ISS Code or Check Item P1, page 45*
2 ☐ No

5a. Did . . . receive any *(Read name of income type)* **in** *(Read each month)***?**

NOTE — Some persons receive more than one payment per month for certain income types such as Unemployment Compensation and AFDC.

5b. How much did . . . receive in *(Read each month marked "Yes" in 5a)***? Please answer by giving the total amount each month before any deductions.**

	5a.	5b.
Last month	4016 1 ☐ Yes 2 ☐ No x1 ☐ DK	4018 $ _____ . 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	4020 1 ☐ Yes 2 ☐ No x1 ☐ DK	4022 $ _____ . 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	4024 1 ☐ Yes 2 ☐ No x1 ☐ DK	4026 $ _____ . 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	4028 1 ☐ Yes 2 ☐ No x1 ☐ DK	4030 $ _____ . 00 x1 ☐ DK x2 ☐ Ref.

CHECK ITEM A5 *Mark (X) income type code.*

4032
1 ☐ ISS code 1 or 2 — *SKIP to Check Item A7*
2 ☐ ISS code 8 or 20 through 24
3 ☐ All other income codes — *SKIP to next ISS Code or Check Item P1, page 45*

6a. Were all the people living here covered by . . .'s payments?

4034
1 ☐ Yes — *SKIP to Check Item A6*
2 ☐ No

NOTES

Section 3 — AMOUNTS (Continued)

Part A — GENERAL AMOUNTS (ISS Codes 1 — 56) (Continued)

6b. Which persons were covered?

	Person No.	Name
4036		
4038		
4040		
4042		
4044		
4046		
4048		
4050		
4052		
4054		

CHECK ITEM A6 Is this ISS code "8"?

4056 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

7. Is . . . required to fill out an annual income questionnaire for the Veterans Administration?

4060 1 ☐ Yes
2 ☐ No
x1 ☐ DK
} *SKIP to next ISS Code or Check Item P1, page 45*

CHECK ITEM A7 Was this ISS code marked for . . . in cc item 45 last reference period?

4062 1 ☐ Yes — *SKIP to Check Item A8*
2 ☐ No

(SHOW FLASHCARD O)

8. Social Security (Railroad Retirement) sends out two types of checks. Please look at this card and tell me which color check . . . receives?

4064 1 ☐ Green
2 ☐ Gold
3 ☐ Other
x1 ☐ DK

9. Do . . .'s payments usually come on the first of the month or the third?

4066 1 ☐ First
2 ☐ Third
3 ☐ Other
x1 ☐ DK

CHECK ITEM A8 *Refer to item 2, page 37.* Were (Social Security/Railroad Retirement) payments received especially for the children?

4068 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

10a. Were Social Security (Railroad Retirement) payments received for the children in *(Read each month)*?		**10b.** *If "Yes" in 10a* — **How much was received?**
Last month	4070 1 ☐ Yes 2 ☐ No x1 ☐ DK	4072 $. 00 x1 ☐ DK x2 ☐ Ref.
2 months ago	4074 1 ☐ Yes 2 ☐ No x1 ☐ DK	4076 $. 00 x1 ☐ DK x2 ☐ Ref.
3 months ago	4078 1 ☐ Yes 2 ☐ No x1 ☐ DK	4080 $. 00 x1 ☐ DK x2 ☐ Ref.
4 months ago	4082 1 ☐ Yes 2 ☐ No x1 ☐ DK	4084 $. 00 x1 ☐ DK x2 ☐ Ref.

VERIFY IF ONLY ONE CHILD OR ASK —

11a. Were all children living here covered by these payments?

4086 1 ☐ Yes — *SKIP to next ISS Code or Check Item P1, page 45*
2 ☐ No

Section 3 — AMOUNTS (Continued)

Part A — GENERAL AMOUNTS (ISS Codes 1—56) (Continued)

11b. Which children were covered?

	Person No.	Name
4088		
4090		
4092		
4094		
4096		
4098		

SKIP to next ISS Code or Check Item P1, page 45

12a. Were all the people living here covered under . . .'s food stamp allotment? 4100
1 ☐ Yes — *SKIP to 13a*
2 ☐ No

b. Which persons were covered?

	Person No.	Name
4102		
4104		
4106		
4108		
4110		
4112		
4114		
4116		
4118		
4120		

13a. Did . . . receive food stamps in *(Read each month)*?		**13b.** *If "Yes" in 13a, ask* — **What was the total amount?**	
Last month	4122	1 ☐ Yes 2 ☐ No X1 ☐ DK	4124 $ 00 X1 ☐ DK X2 ☐ Ref.
2 months ago	4126	1 ☐ Yes 2 ☐ No X1 ☐ DK	4128 $ 00 X1 ☐ DK X2 ☐ Ref.
3 months ago	4130	1 ☐ Yes 2 ☐ No X1 ☐ DK	4132 $ 00 X1 ☐ DK X2 ☐ Ref.
4 months ago	4134	1 ☐ Yes 2 ☐ No X1 ☐ DK	4136 $ 00 X1 ☐ DK X2 ☐ Ref.

SKIP to next ISS Code or Check Item P1, page 45

14. Did . . . receive any WIC vouchers in *(Read each month)*?
Mark (X) all that apply.

4138 1 ☐ Last month
4140 2 ☐ 2 months ago
4142 3 ☐ 3 months ago
4144 4 ☐ 4 months ago

SKIP to next ISS Code or Check Item P1, page 45

Section 3 — AMOUNTS (Continued)

Part B — SAVINGS ACCOUNTS, MONEY MARKET DEPOSIT ACCOUNTS, CERTIFICATES OF DEPOSIT, AND NOW ACCOUNTS (ISS Codes 100, 101, 102 and 103)

CHECK ITEM A9 Asset types owned. *Mark (X) all that apply.*

4300 1 ☐ ISS Code 100 — Regular/Passbook Savings Accounts
4302 2 ☐ ISS Code 101 — Money Market Deposit Accounts
4304 3 ☐ ISS Code 102 — Certificates of Deposit or other Savings Certificates
4306 4 ☐ ISS Code 103 — NOW, Super NOW or other interest-earning checking accounts

1. Earlier you said that . . . had *(Read names of owned assets).*

CHECK ITEM A10 Interview status of . . .'s spouse.

4308 1 ☐ No spouse in household — *SKIP to 3b*
2 ☐ Interview for spouse not yet conducted
3 ☐ Interview for spouse already conducted — *SKIP to 3a*

2a. Did . . . own any of these jointly with . . .'s (husband/wife)?

4310 1 ☐ Yes
2 ☐ No — *SKIP to 3b*

b. What is your best estimate of the total amount of interest earned on these jointly held *(Read asset types)* **during the 4-month period?**

4312 $ _____ . 00 — *SKIP to 3a*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*

c. What is your best estimate of the average amount that . . . and . . .'s (husband/wife) had in these jointly held *(Read asset types)* **during the 4-month period?** ★

4314 $ _____ . 00 — *SKIP to 3a*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*

d. If I were to call back later would you be able to provide me with an estimate of the average amount? (This information is especially important for the purposes of this survey.)

4316 1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 5*
2 ☐ No

3a. Besides any *(Read asset types)* **owned jointly with . . .'s (husband/wife), did . . . have any other** *(Read asset types)*?

4318 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

b. What is your best estimate of the total amount of interest . . . earned on these *(Read asset types)* **during the 4-month period?**

4320 $ _____ . 00 — *SKIP to next ISS Code or Check Item P1, page 45*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*

c. What is your best estimate of the average amount that . . . had in these *(Read asset types)* **during the 4-month period?** ★

4322 $ _____ . 00 — *SKIP to next ISS Code or Check Item P1, page 45*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*

d. If I were to call back later would you be able to provide me with an estimate of the average amount? (This information is especially important for the purposes of this survey.)

4324 1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 6* } *SKIP to next ISS Code or Check Item P1, page 45*
2 ☐ No . . . . . } *SKIP to next ISS Code or Check Item P1, page 45*

NOTES

Section 3 — AMOUNTS (Continued)

Part C — OTHER INTEREST-EARNING ASSETS (ISS Codes 104, 105, 106 and 107)

CHECK ITEM A11 Asset types owned. *Mark (X) all that apply.*

4400 1 ☐ ISS Code 104 — Money market funds
4402 2 ☐ ISS Code 105 — U.S. Government securities
4404 3 ☐ ISS Code 106 — Municipal or corporate bonds
4406 4 ☐ ISS Code 107 — Other interest-earning assets — *Specify* _____

1. Earlier you said that . . . owned *(Read names of owned assets).*

CHECK ITEM A12 Interview status of . . .'s spouse.

4408 1 ☐ No spouse in household — *SKIP to 3b*
2 ☐ Interview for spouse not yet conducted
3 ☐ Interview for spouse already conducted — *SKIP to 3a*

2a. Did . . . own any of these jointly with . . .'s (husband/wife)?

4410 1 ☐ Yes
2 ☐ No — *SKIP to 3b*

b. What is your best estimate of the total amount of interest earned on these jointly held *(Read asset types)* **during the 4-month period?**

4412 $ _____ . 00 — *SKIP to 3a*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*

c. What is your best estimate of the average amount that . . . and . . .'s (husband/wife) had in these jointly held *(Read asset types)* **during the 4-month period?** ★

4414 $ _____ . 00 — *SKIP to 3a*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*

d. If I were to call back later would you be able to provide me with an estimate of the average amount? (This information is especially important for the purposes of this survey.)

4416 1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 7*
2 ☐ No

3a. Besides any *(Read asset types)* **owned jointly with . . .'s (husband/wife), did . . . own any other** *(Read asset types)*?

4418 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Check Item P1, page 45*

b. What is your best estimate of the total amount of interest . . . earned on these *(Read asset types)* **during the 4-month period?**

4420 $ _____ . 00 — *SKIP to next ISS Code or Check Item P1, page 45*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*

c. What is your best estimate of the average amount that . . . had in these *(Read asset types)* **during the 4-month period?** ★

4422 $ _____ . 00 — *SKIP to next ISS Code or Check Item P1, page 45*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*

d. If I were to call back later would you be able to provide me with an estimate of the average amount? (This information is especially important for the purposes of this survey.)

4424 1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 8*
2 ☐ No
} *SKIP to next ISS Code or Check Item P1, page 45*

NOTES

Section 3 — AMOUNTS (Continued)

Part D — STOCKS AND MUTUAL FUND SHARES (ISS Code 110)

a. Earlier you told me that . . . owned stocks or mutual fund shares. Did . . . receive any dividend checks during these 4 months? (Include checks made out jointly to . . . and . . .'s spouse.)

4500
1 ☐ Yes
2 ☐ No } *SKIP to 3a*
x1 ☐ DK }

CHECK ITEM A13 Interview status of . . .'s spouse.

4502
1 ☐ No spouse in household — *SKIP to 2a*
2 ☐ Interview for spouse not yet conducted
3 ☐ Interview for spouse already conducted — *SKIP to 2a*

b. During the past 4 months how much was received in dividend checks made out jointly to . . . and . . .'s (husband/wife)? ★

4504 $ _____ . 00 — *SKIP to 2a*
x3 ☐ None — *SKIP to 2a*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*

c. If I were to call back later would you be able to provide me with an estimate? (This information is especially important for the purposes of this survey.)

4506
1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 9*
2 ☐ No

a. During this 4-month period, how much did . . . receive in dividend checks (in . . .'s name only)? ★

4508 $ _____ . 00 — *SKIP to 3a*
x3 ☐ None — *SKIP to 3a*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*

b. If I were to call back later would you be able to provide me with an estimate? (This information is especially important for the purposes of this survey.)

4510
1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 10*
2 ☐ No

a. (Besides the money that . . . received in dividends) did . . . earn any (other) dividends that were credited against a margin account or automatically reinvested in additional shares of stock?

4512
1 ☐ Yes
2 ☐ No } *SKIP to next ISS Code or Check Item P1, page 45*
x1 ☐ DK }

CHECK ITEM A14 Interview status of . . .'s spouse.

4514
1 ☐ No spouse in household — *SKIP to 3c*
2 ☐ Interview for spouse not yet conducted
3 ☐ Interview for spouse already conducted — *SKIP to 3c*

b. During the 4-month period how much of these kinds of dividends did . . . earn jointly with . . .'s (husband/wife)?

4516 $ _____ . 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*

c. During the 4-month period, how much of these kinds of dividends did . . . earn (in . . .'s name only)?

4518 $ _____ . 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref.

SKIP to next ISS Code or Check Item P1, page 45

NOTES

Section 3 — AMOUNTS (Continued)

Part E — RENTAL INCOME (ISS Code 120)

1. Earlier you told me that . . . owned some rental property.

CHECK ITEM A15 Interview status of . . .'s spouse.

4600
1 ☐ No spouse in household — *SKIP to 3a*
2 ☐ Interview for spouse not yet conducted
3 ☐ Interview for spouse already conducted — *SKIP to 3a*

2a. Did . . . receive any rental income from property owned jointly by . . . and . . .'s (husband/wife)?
Include only property owned entirely by couple.

4602
1 ☐ Yes
2 ☐ No — *SKIP to 3a*

b. About how much was received in gross rent from this property during the 4-month period?

4604 $. 00
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*

c. What is your best estimate of the amount that was cleared after expenses?
Enter $1 in amount box if respondent reports "broke even."

4606 $. 00
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*
4608 x4 ☐ Lost money — *Enter amount of loss in box*

3a. Did . . . receive rental income from property owned entirely in . . .'s own name?

4610
1 ☐ Yes
2 ☐ No — *SKIP to 4a*

b. About how much was received in gross rent from this property during the 4-month period?

4612 $. 00
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*

c. What is your best estimate of the amount that was cleared after expenses?
Enter $1 in amount box if respondent reports "broke even."

4614 $. 00
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Check Item P1, page 45*
4616 x4 ☐ Lost money — *Enter amount of loss in box*

4a. Did . . . receive any rental income from property owned jointly with others? (Not including property owned entirely by . . . and . . .'s spouse.)

4618
1 ☐ Yes
2 ☐ No — *SKIP to next ISS code or Check Item P1, page 45*

b. What is your best estimate of . . .'s share of the amount cleared on this property during the last 4 months?
Enter $1 in amount box if respondent reports "broke even."

4620 $. 00
x1 ☐ DK
x2 ☐ Ref.
4622 x4 ☐ Lost money — *Enter amount of loss in box*

SKIP to next ISS Code or Check Item P1, page 45

NOTES

Section 3 — AMOUNTS (Continued)

Part F — MORTGAGES, ROYALTIES AND OTHER FINANCIAL INVESTMENTS (ISS Codes 130, 140, and 150)

CHECK ITEM A16 Asset types owned.
Mark (X) all that apply.

4700 1 ☐ ISS Code 130 — Mortgages
4702 2 ☐ ISS Code 140 — Royalties
4704 3 ☐ ISS Code 150 — Other financial investments

CHECK ITEM A17 Is ISS Code 130 marked in Check Item A16?

4706 1 ☐ Yes
2 ☐ No — *SKIP to 3*

CHECK ITEM A18 Interview status of . . .'s spouse.

4708 1 ☐ No spouse in household — *SKIP to 2b*
2 ☐ Interview for spouse not yet conducted
3 ☐ Interview for spouse already conducted — *SKIP to 2a*

2a. Earlier you said . . . held a mortgage. Did . . . own this jointly with . . .'s spouse?

4710 1 ☐ Yes
2 ☐ No — *SKIP to 2b*

b. During the past 4 months how much interest was paid to . . . and . . .'s spouse by the borrower?

4712 $ _____ . 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref.

3a. (Besides these jointly held mortgages) did . . . hold any mortgages in . . .'s own name?

4714 1 ☐ Yes
2 ☐ No — *SKIP to Check Item A19*

b. (Earlier you said that . . . held a mortgage.) During the past 4 months how much interest was paid to . . . by the borrower?

4716 $ _____ . 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref.

CHECK ITEM A19 Is ISS Code 140 or 150 marked in Check Item A16?

4718 1 ☐ Yes
2 ☐ No — *SKIP to Check Item P1*

3. Earlier you said . . . had *(Read asset types)*. **During the past 4 months, how much income did . . . receive from these** *(Read asset types)*?

If income was shared, count only . . .'s share.

4720 $ _____ . 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref.
4722 x4 ☐ Lost money — *Enter amount of loss in box*

NOTES

Section 4 — PROGRAM QUESTIONS

CHECK ITEM P1 Is this the reference person's questionnaire?

4800 — 1 ☐ Yes; 2 ☐ No — *SKIP to section 5, page 46*

1a. The government has an energy assistance program which helps pay heating and cooling costs. This assistance can be received by the household or it can be paid directly to the electric or gas company, fuel dealer, or landlord. Has this household received assistance of this type during the past 4 months?

4816 — 1 ☐ Yes; 2 ☐ No; X1 ☐ DK } *SKIP to Check Item P2*

b. Was this assistance received in the form of checks, coupons or vouchers sent to this household or were the payments sent directly to a utility company, fuel dealer, or landlord?
Mark (X) all that apply.

4818 / 4820 / 4822
1 ☐ Checks sent to household
2 ☐ Coupons or vouchers sent to household
3 ☐ Payments sent directly to utility company, fuel dealer, or landlord

c. What was the total amount of the energy assistance received by this household during the past 4 months?

4824 — $ _____ . 00
X1 ☐ DK

CHECK ITEM P2 Are there any children 5 to 18 who live in the household?

4826 — 1 ☐ Yes; 2 ☐ No — *SKIP to section 5, page 46*

2a. Do any of the children in this household usually eat a complete hot lunch offered at school?

4828 — 1 ☐ Yes; 2 ☐ No — *SKIP to section 5, page 46*

b. How many children?

4830 — ☐☐ Children

c. Do any of the children receive free or reduced-price lunches this school year because they qualified for the Federal School Lunch Program?

4832 — 1 ☐ Yes; 2 ☐ No — *SKIP to 2f*

d. How many children?

4834 — ☐☐ Children

e. Are the lunches free or are they reduced-price?
Mark (X) all that apply.

4836 / 4838
1 ☐ Free
2 ☐ Reduced-price

f. Do any of the children receive free or reduced-price school breakfasts this school year?

4840 — 1 ☐ Yes; 2 ☐ No — *SKIP to section 5, page 46*

g. How many children?

4842 — ☐☐ Children

h. Are the breakfasts free or are they reduced-price?
Mark (X) all that apply.

4844 / 4846
1 ☐ Free
2 ☐ Reduced-price

GO to section 5, part A, page 46

NOTES