OMB No. 0607-0425: Approval Expires 08/31/88

FORM **SIPP-6700** (8-1-87)

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.

SURVEY OF INCOME AND PROGRAM PARTICIPATION

1986 PANEL

WAVE 7 QUESTIONNAIRE
WAVE 6 QUESTIONNAIRE

PGM 6

1. Book _____ of _____

2. *(cc 1)* R.O. code

3a. *(cc 2)* PSU | Segment | Serial | Sample 0 6 | Check digit

b. *(cc 3)* Add. ID

4. *(cc 17)*

a. Entry Add. ID

b. PERSON Number *(cc 18)*

c. Name *(cc 19a)*
First
Middle initial

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
2 ☐ Proxy → *(Enter person number)* } *SKIP to 8*

b. 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 edit time

Start time →	a.m. p.m.
Finish time →	a.m. p.m.

b. Total interviewer edit time ____ 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* ↓

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.)*

CHECK ITEM N1 Does . . .'s person number begin with a "7"?

PGM 7 / 0900
1 ☐ Yes
2 ☐ No — *SKIP to Section 1, item 1, page 2*

CHECK ITEM N2 Was . . . missed when household members were listed for Wave 1?

0901
1 ☐ Yes — *SKIP to Section 1, item 1, page 2*
2 ☐ No

13a. On March 31, 1986, was . . . living in any of the kinds of places listed on this card? *(Show Flashcard P)*

0914
1 ☐ Yes
2 ☐ No — *SKIP to Section 1, item 1, page 2*
X1 ☐ DK
X2 ☐ Ref.
} *SKIP to Section 1, item 1, page 2*

b. Which code on this card represents the kind of place . . . was living in on March 31, 1986?

0916
1 ☐ Armed Forces barracks
2 ☐ Outside the United States
3 ☐ Nonhousehold setting

NOTES

LABOR FORCE AND RECIPIENCY

Section 1 — LABOR FORCE AND RECIPIENCY

(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.

PGM 7

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? Please answer by giving the week number that appears to the right of each week on the calendar.

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 3a*
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* ↙

_____

3a. Even though . . . did not have a job during this period, did . . . do any work at all that earned some money?

1046 1 ☐ Yes — *Mark "55" on ISS*
2 ☐ No — *SKIP to Check Item R2*

b. In which of the months shown on this calendar did . . . do that work?

Mark (X) all that apply.

1048 1 ☐ Last month
1050 2 ☐ 2 months ago
1052 3 ☐ 3 months ago
1054 4 ☐ 4 months ago

CHECK ITEM R2

Refer to item 2a above.
Did . . . spend any time looking for work or on layoff from a job?

1055 1 ☐ Yes — *SKIP to 9a, page 4*
2 ☐ No — *SKIP to Check Item R6, 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? Please answer by giving the week number that appears to the right of each week on the calendar.

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*

NOTES

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? Please answer by giving the week number that appears to the right of each week on the calendar.

Mark (X) all that apply.

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? Please answer by giving the week number that appears to the right of each week on the calendar.

Mark (X) all that apply.

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? Please answer by giving the week number that appears to the right of each week on the calendar.

Mark (X) all that apply.

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 7e*
2 ☐ No

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

Mark (X) only one.

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

e. During the weeks that . . . did not have a job, did . . . do any work at all that earned some money?

1220
1 ☐ Yes — *Mark "55" on ISS*
2 ☐ No — *SKIP to 8a, page 4*

f. In which of the months shown on this calendar did . . . do that work?

Mark (X) all that apply.

1222
1224
1226
1228
1 ☐ Last month
2 ☐ 2 months ago
3 ☐ 3 months ago
4 ☐ 4 months ago

NOTES

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

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?

1231 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.**

1232 1 ☐ Yes
2 ☐ No — *SKIP to Check Item R4*

c. **How many weeks did . . . work fewer than 35 hours in the months of** *(Read each month)***?**

1233 X5 ☐ All
1234 ☐ Weeks Last month
1235 ☐ Weeks 2 months ago
1236 ☐ Weeks 3 months ago
1237 ☐ Weeks 4 months ago

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" (code 170) 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 (cc items 44—47)?

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

CHECK ITEM R7 Are any income types listed in the Income Roster (Item 11b)?

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 the period** *(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 (ISS CODES 1—56)

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. At any time 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. At any time 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. At any time 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" (code 172) 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" (code 171) 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 items 32a and 32c.*
Is . . . a veteran of the U.S. Armed Forces? *(Mark "No" if currently in Armed Forces.)*

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 ☐☐☐ Percent
X3 ☐ 0%
X1 ☐ DK
X2 ☐ Ref.
} *Mark "200" on ISS if rating is 100%; otherwise, mark "201"*

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*

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 } *SKIP to Check Item R17*
X1 ☐ DK }

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 3) 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" (box 2) 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 ☐☐☐☐-1467 ☐☐

★

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" (code 173) 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 any of . . .'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
1530
1532
1534
1 ☐ Last month
2 ☐ 2 months ago
3 ☐ 3 months ago
4 ☐ 4 months ago

NOTES

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

27a. **During the 4-month period, did . . . have group or individual 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 all, part, or none of the cost of this plan?**

1550 1 ☐ All
2 ☐ Part
3 ☐ 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 (Item 28b)?

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 the period** *(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 (ISS CODES 100—150, 174)

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. At any time 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) At any time 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 30a*

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 ☐ Interest-earning checking accounts (such as NOW or Super NOW 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* ↓

_____

NOTES

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

30a. **Was . . . enrolled in school, either full-time or part-time during any of the past 4 months? (Include any regular school, such as elementary, high school, or college, or any vocational, technical, or business school.)**

1656
1 ☐ Yes, full-time
2 ☐ Yes, part-time
3 ☐ No — *SKIP to Check Item R33*

b. **During which months was . . . enrolled?**

Mark (X) all that apply.

1658 1 ☐ All months
1660 2 ☐ Last month
1662 3 ☐ 2 months ago
1664 4 ☐ 3 months ago
1666 5 ☐ 4 months ago

c. **At what level or grade was . . . enrolled?**

(If enrolled at more than one level during this period, check most recent level.)

1668
1 ☐ Elementary grades 1—8 } *SKIP to Check Item R33*
2 ☐ High school grades 9—12 } *SKIP to Check Item R33*
3 ☐ College year 1
4 ☐ College year 2
5 ☐ College year 3
6 ☐ College year 4
7 ☐ College year 5
8 ☐ College year 6
9 ☐ Vocational school
10 ☐ Technical school
11 ☐ Business school

31a. **Were any of . . .'s educational expenses during the last 4 months paid for by the GI Bill, a PELL (BEOG) Grant, a Guaranteed or National Direct Student Loan, any type of scholarship, grant, or other educational assistance?**

1670
1 ☐ Yes
2 ☐ No — *SKIP to Check Item R33*

b. **What kind of educational assistance did . . . receive? Anything else?**

Mark (X) all that apply.

1672 1674 2 ☐ Other Veteran's Administration Educational Assistance Programs (Survivors and Dependents; Vocational Rehabilitation; Post-Vietnam Veterans) — *Mark "41" on ISS*
1676 3 ☐ College Work Study — *Mark "175" on ISS*
1678 4 ☐ PELL Grant — *Mark "176" on ISS*
1680 5 ☐ Supplemental Educational Opportunity Grant (SEOG) — *Mark "177" on ISS*
1682 6 ☐ National Direct Student Loan (NDSL) — *Mark "178" on ISS*
1684 7 ☐ Guaranteed Student Loan — *Mark "179" on ISS*
1686 8 ☐ JTPA Training — *Mark "180" on ISS*
1688 9 ☐ Employer Assistance — *Mark "181" on ISS*
1690 10 ☐ Fellowship/Scholarship — *Mark "182" on ISS*
1692 11 ☐ Other financial aid — *Mark "183" on ISS*

CHECK ITEM R33 *Refer to cc item 26a.* Is code 2 (Married, spouse absent) the current entry?

1694
1 ☐ Yes
2 ☐ No — *SKIP to Check Item R34*

ASK OR VERIFY —

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

1696
1 ☐ Yes
2 ☐ No

CHECK ITEM R34 Are any income types (1—56), assets (100—150), "Worked" (170) or "Other educational assistance" (ISS codes 175—183) marked on the ISS?

1698
1 ☐ Yes
2 ☐ No — *SKIP to 34a*

33a. **You said that during the 4-month period . . . received income from** — *(Read all items coded 1—56, 100—150, 170, and 175—183 that are marked on 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, payments from the government or anything else?**

1702
1 ☐ Yes — *SKIP to 34b*
2 ☐ No — *SKIP to Check Item E1*

34a. **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, payments from the government or anything else?**

1704
1 ☐ Yes
2 ☐ No — *SKIP to Topical Module Statement A, page 50*

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" (code 170) marked on ISS?

1712
1 ☐ Yes
2 ☐ No — *SKIP to first ISS Code marked or Topical Module Statement A, page 50*

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" (box 3) 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

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 2 or more employers, enter one employer here and the other in part A2, page 16. If . . . worked for 3 or more employers, enter in A1 and A2 the 2 employers for whom . . . worked the most hours.)

PGM 8 — Employer name
2000 _____

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

PGM 8 — Employer I.D. No.
2002 ☐

CHECK ITEM E3.1 Is the previous wave box marked for this employer in cc item 42?

PGM 8
2003
1 ☐ Yes
2 ☐ No — *SKIP to 2c*

2b. Have . . .'s main activities or duties for this employer changed during the past 8 months?

PGM 8
2004
1 ☐ Yes
2 ☐ No — *SKIP to 3a*

c. 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
2005 _____
_____

ASK OR VERIFY —
d. Is it mainly —

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

e. What kind of work was . . . doing on this job?
For example: Electrical engineer, stock clerk, typist, farmer

PGM 8
2008 _____

f. What were . . .'s main activities or duties?
For example: Types, keeps account books, files, sells cars, operates printing press, finishes concrete.

PGM 8
2010 _____

ASK OR VERIFY —
g. Was . . . an employee of —

PGM 8
2012
1 ☐ **A private for-profit company or individual?**
2 ☐ **A private not-for-profit, tax exempt, or charitable organization?**
3 ☐ **Federal government (exclude Armed Forces)?**
4 ☐ **State government?**
5 ☐ **Local government?**
6 ☐ **Armed Forces?**
7 ☐ **Unpaid in family business or farm?** — *SKIP to Check Item E5*

ASK OR VERIFY —
3a. 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?**

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

CHECK ITEM E3.2 Did . . . stop working for this employer during the reference period?

2023
1 ☐ Yes
2 ☐ No — *SKIP to 4*

3c. What is the main reason . . . stopped working for (Name of employer)?
Mark (X) only one.

2024
1 ☐ Laid off
2 ☐ Retired
3 ☐ Discharged
4 ☐ Job was temporary and ended
5 ☐ Quit to take another job
6 ☐ Quit for some other reason

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

2025 ☐☐ 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)

8a. *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	$ _____ .00
		$ _____ .00
	x3☐ None	$ _____ .00
	x1☐ DK	$ _____ .00
	x2☐ Ref.	$ _____ .00
		Total $ _____ .00
	2 MONTHS AGO	
	2034 $ _____ . 00	$ _____ .00
		$ _____ .00
	x3☐ None	$ _____ .00
	x1☐ DK	$ _____ .00
	x2☐ Ref.	$ _____ .00
		Total $ _____ .00
	3 MONTHS AGO	
	2036 $ _____ . 00	$ _____ .00
		$ _____ .00
	x3☐ None	$ _____ .00
	x1☐ DK	$ _____ .00
	x2☐ Ref.	$ _____ .00
		Total $ _____ .00
	4 MONTHS AGO	
	2038 $ _____ . 00	$ _____ .00
		$ _____ .00
	x3☐ None	$ _____ .00
	x1☐ DK	$ _____ .00
	x2☐ Ref.	$ _____ .00
		Total $ _____ .00

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

2040 1☐ Yes
2☐ No — *SKIP to 9a*

8b. **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

9a. **On this job, is (was) . . . a member of a labor union or of an employee association similar to a union?**

2044 1☐ Yes — *SKIP to Check Item E5*
2☐ No

b. **Is (was) . . . covered by a union or employee association contract?**

2046 1☐ Yes
2☐ No

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

2048 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 3 or more employers, enter in A1 and A2 the 2 employers for whom . . . worked the most hours.)

PGM 8 2100 — Employer name _____

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

PGM 8 2102 — Employer I.D. No. ☐

CHECK ITEM E6.1 Is the previous wave box marked for this employer in cc item 42?

PGM 8 2103
1 ☐ Yes
2 ☐ No — *SKIP to 10c*

10b. **Have . . .'s main activities or duties for this employer changed during the past 8 months?**

PGM 8 2104
1 ☐ Yes
2 ☐ No — *SKIP to 11a*

c. **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 2105 _____

ASK OR VERIFY —
d. **Is it mainly —**

PGM 8 2106
1 ☐ **Manufacturing?**
2 ☐ **Wholesale Trade?**
3 ☐ **Retail Trade?**
4 ☐ **Some other kind of business?**

e. **What kind of work was . . . doing on this job?**
For example: Electrical engineer, stock clerk, typist, farmer

PGM 8 2108 _____

f. **What were . . .'s main activities or duties?**
For example: Types, keeps account books, files, sells cars, operates printing press, finishes concrete.

PGM 8 2110 _____

ASK OR VERIFY —
g. **Was . . . an employee of —**

PGM 8 2112
1 ☐ **A private for-profit company or individual?**
2 ☐ **A private not-for-profit, tax exempt, or charitable organization?**
3 ☐ **Federal government (exclude Armed Forces)?**
4 ☐ **State government?**
5 ☐ **Local government?**
6 ☐ **Armed Forces?**
7 ☐ **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?**

2116 FROM ☐☐ Month 2118 ☐☐ Day

2120 TO ☐☐ Month 2122 ☐☐ Day

CHECK ITEM E6.2 Did . . . stop working for this employer during the reference period?

2123
1 ☐ Yes
2 ☐ No — *SKIP to 12*

11c. **What is the main reason . . . stopped working for** *(name of employer)*?

2124
1 ☐ Laid off
2 ☐ Retired
3 ☐ Discharged
4 ☐ Job was temporary and ended
5 ☐ Quit to take another job
6 ☐ Quit for some other reason

12. *ASK OR VERIFY —*
How many hours per week did . . . usually work at this job?

2125 ☐☐ 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* _____

Section 2 — EARNINGS AND EMPLOYMENT (Continued)

Part A2 — EMPLOYER IDENTIFICATION NUMBER 2(Continued)

16a. *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 16a?

2140 1 ☐ Yes
2 ☐ No — *SKIP to 17a*

16b. 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

17a. On this job, is (was) . . . a member of a labor union or of an employee association similar to a union?

2144 1 ☐ Yes — *SKIP to Check Item E8*
2 ☐ No

b. Is (was) . . . covered by a union or employee association contract?

2146 1 ☐ Yes
2 ☐ No

CHECK ITEM E8 Is "Both worked for employer and self-employed" (box 3) marked in item 1a, page 13?

2148 1 ☐ Yes — *Read Statement B*
2 ☐ No — *SKIP to first ISS Code or Topical Module Statement A, page 50*

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.**

1a. What was the name of . . .'s business/professional practice/farm?
(If . . . was self-employed in 2 businesses, enter one business here and the other in part B2, page 21. If . . . was self-employed in 3 or more businesses, enter in B1 and B2 the 2 businesses producing the highest gross earnings.)

PGM 8 2200 Business name _____

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

PGM 8 2201 Business I.D. No. ☐

CHECK ITEM S1.1 Is the previous wave box marked for this business in cc item 43?

PGM 8 2202
1 ☐ Yes
2 ☐ No — *SKIP to 1c*

1b. Have . . .'s main activities or duties for this business changed during the past 8 months?

PGM 8 2203
1 ☐ Yes
2 ☐ No — *SKIP to 1g*

c. What kind of business was this?

PGM 8 2204 _____

ASK OR VERIFY —
d. Is it mainly —

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

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

PGM 8 2208 _____

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

PGM 8 2210 _____

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

PGM 7 2212 ☐☐ Hours
X3 ☐ None
X1 ☐ DK

2. 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 10a*
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

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

2218 ☐☐☐ Employees
X1 ☐ DK

4a. 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

5a. 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	☐☐☐	

6a. 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*

Section 2 — EARNINGS AND EMPLOYMENT (Continued)

Part B1 — SELF-EMPLOYMENT IDENTIFICATION NUMBER 1 (Continued)

7. *READ STATEMENT ONLY ONCE PER RESPONDENT.*

The next questior: 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	$ .00
2238	$. 00	$ .00
	x3 ☐ None	$ .00
	x1 ☐ DK	$ .00
	x2 ☐ Ref.	TOTAL $ .00
	2 MONTHS AGO	$ .00
2240	$. 00	$ .00
	x3 ☐ None	$ .00
	x1 ☐ DK	$ .00
	x2 ☐ Ref.	TOTAL $ .00
	3 MONTHS AGO	$ .00
2242	$. 00	$ .00
	x3 ☐ None	$ .00
	x1 ☐ DK	$ .00
	x2 ☐ Ref.	TOTAL $ .00
	4 MONTHS AGO	$ .00
2244	$. 00	$ .00
	x3 ☐ None	$ .00
	x1 ☐ DK	$ .00
	x2 ☐ Ref.	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 10b*
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 10b*
2 ☐ No

9a. **Can you give me an estimate of the net profit or loss, that is, the difference between gross receipts and expenses, for this business during the 4-month period?**

2254 1 ☐ Yes
2 ☐ No — *SKIP to 10b*

b. **What was the net profit or loss?**

If "Broke even," mark $1 in box.

2256 $. 00
2258 x4 ☐ Loss in amount box

} *SKIP to 10b*

10a. **About how much did . . . earn from this business after expenses during the 4-month period?**

2260 $. 00

x3 ☐ None
x1 ☐ DK
x2 ☐ Ref.

b. **Was . . . self-employed in this business as of** *(Read last day of the reference period)***?**

8000 1 ☐ Yes
2 ☐ No — *SKIP to 11f*

Section 2 — EARNINGS AND EMPLOYMENT (Continued)

Part B1 — SELF-EMPLOYMENT IDENTIFICATION NUMBER 1 (Continued)

CHECK ITEM S7 — *Refer to item 4b, page 18.* Is sole proprietorship marked in 4b?

8002 1 ☐ Yes — *SKIP to Check Item S8*
2 ☐ No

11a. As of *(Read last day of reference period)*, **what percent of this business did . . . own?**

8004 ☐☐☐ Percent
X1 ☐ DK
X2 ☐ Ref — *SKIP to 11f*

CHECK ITEM S8 — Has the information below about the total value and total debt for this business already been obtained from another household member?

8006 1 ☐ Yes — *SKIP to 11f*
2 ☐ No

b. As of *(Read last day of the reference period)*, **what was the total value of this business before figuring in any debts that might be owed against it?**

★

8008 $ ☐☐☐☐☐ . 00 — *SKIP to 11d*
X3 ☐ None — *SKIP to 11d*
X1 ☐ DK
X2 ☐ Ref. — *SKIP to 11f*

8009 1 ☐ Office Use Only

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

8010 1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 5a*
2 ☐ No

d. As of *(Read last day of reference period)*, **what was the total debt owed against this business?**

★

8012 $ ☐☐☐☐☐ . 00 — *SKIP to 11f*
X3 ☐ None — *SKIP to 11f*
X1 ☐ DK
X2 ☐ Ref. — *SKIP to 11f*

8013 1 ☐ Office Use Only

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

8014 1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 5b*
2 ☐ No

f. 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 Statement A, page 50*

NOTES

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?**
(If . . . was self-employed in 3 or more businesses, enter in B1 and B2 the 2 businesses producing the highest gross income.)

PGM 8 — Business name
2300 _____

CHECK ITEM S9 Enter business ID number from cc item 43, or if a new business, enter the next available ID number. →

PGM 8 — Business I.D. No.
2301 ☐

CHECK ITEM S9.1 Is the previous wave box marked for this business in cc item 43?

PGM 8
2302
1 ☐ Yes
2 ☐ No — *SKIP to 12c*

12b. **Have . . .'s main activities or duties for this business changed during the past 8 months?**

PGM 8
2303
1 ☐ Yes
2 ☐ No — *SKIP to 12g*

c. **What kind of business was this?**

PGM 8
2304 _____

ASK OR VERIFY —
d. **Is it mainly —**

PGM 8
2306
1 ☐ **Manufacturing?**
2 ☐ **Wholesale Trade?**
3 ☐ **Retail Trade?**
4 ☐ **Some other kind of business?**

e. **What kind of work was . . . doing?**

PGM 8
2308 _____

f. **What were . . .'s most important activities or duties?**

PGM 8
2310 _____

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

PGM 7
2312 ☐☐ Hours
X3 ☐ None
X1 ☐ DK

13. **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 21a*
X1 ☐ DK

CHECK ITEM S10 Have questions 14—16b already been answered for this business by another household member?

2316
1 ☐ Yes — *SKIP to 17a*
2 ☐ No

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

2318 ☐☐☐ Employees
X1 ☐ DK

15a. **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

16a. **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 ☐☐☐ _____

17a. **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 S11 Is "Yes" marked in either item 17a or 17b?

2336
1 ☐ Yes
2 ☐ No — *SKIP to Check Item S13*

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 S12 Is "DK" marked in all parts of item 18?

2346 1 ☐ Yes
2 ☐ No — *SKIP to Check Item S13*

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 S13 *Refer to item 15a, page 21.* Is this business incorporated?

2350 1 ☐ Yes — *SKIP to 21b*
2 ☐ No

CHECK ITEM S14 Has information about the net profit (or loss) for this business already been obtained by another household member?

2352 1 ☐ Yes — *SKIP to 21b*
2 ☐ No

20a. Can you give me an estimate of the net profit or loss, that is, the difference between gross receipts and expenses, for this business during the 4 month period?

2354 1 ☐ Yes
2 ☐ No — *SKIP to 21b*

b. What was the net profit or loss?

If "Broke even," mark $1 in box.

2356 $ ____ . 00
2358 x4 ☐ Loss in amount box

} *SKIP to 21b*

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

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

b. Was . . . self-employed in this business as of *(Read last day of the reference period)***?**

8016 1 ☐ Yes
2 ☐ No — *SKIP to first ISS code or Statement A, page 50*

Section 2 — EARNINGS AND EMPLOYMENT (Continued)

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

CHECK ITEM S15 *Refer to item 15b, page 21.* Is sole proprietorship marked in 15b?

8018
1 ☐ Yes — *SKIP to Check Item S16*
2 ☐ No

22a. As of *(Read last day of the reference period),* **what percent of this business did . . . own?**

8020 ☐☐☐ Percent
x1 ☐ DK
x2 ☐ Ref. — *SKIP to first ISS Code or Statement A, page 50*

CHECK ITEM S16 Has the information below about the total value and total debt for this business already been obtained from another household member?

8022
1 ☐ Yes — *SKIP to first ISS Code or Statement A, page 50*
2 ☐ No

22b. As of *(Read last day of the reference period),* **what is the total value of this business before figuring in any debts that might be owed against it?** ★

8024 $ ☐ . 00 — *SKIP to 22d*
x3 ☐ None — *SKIP to 22d*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to first ISS Code or Statement A, page 50*

8025 1 ☐ Office Use Only

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

8026
1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 5a*
2 ☐ No

d. As of *(Read last day of reference period),* **what was the total debt owed against this business ?** ★

8028 $ ☐ . 00 — *SKIP to first ISS Code or Statement A, page 50*
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref. — *SKIP to first ISS Code or Statement A, page 50*

8029 1 ☐ Office Use Only

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

8030
1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 5b*
2 ☐ No
SKIP to first ISS Code or Statement A, page 50

NOTES

Section 3 — AMOUNTS

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

AMOUNTS — PART A

1. You said . . . received (was authorized to receive) *(Read name of income type)* **during the 4-month period.**
(Read "was authorized to receive" if asking about Food Stamps — code 27.)

Income code | Name of income type
3000 ☐☐ _____

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 13a, page 26*
3☐ ISS code 27 (Food Stamps) — *SKIP to 11a, page 26*
4☐ ISS codes 37, 50, 51, 52, 53, or 56 — *SKIP to Check Item A4*
5☐ Other ISS codes — *SKIP to 5a*

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 . . .'s 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 9a*

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 item 1 already been recorded during an interview for . . .'s spouse?

3014 1☐ Yes — *SKIP to next ISS Code or Statement A, page 50*
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 Statement A, page 50*

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 Statement A, page 50*

7. Is . . . required to fill out an annual income questionnaire in order to receive a VA pension?

3060 1 ☐ Yes
2 ☐ No
X1 ☐ DK
} *SKIP to next ISS Code or Statement A, page 50*

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)

8a. Social Security (Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope . . .'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)

3064
1 ☐ Blue
2 ☐ Buff
3 ☐ Direct Deposit
4 ☐ Other
X1 ☐ DK

b. 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 24.* Were (Social Security/Railroad Retirement) payments received especially for . . .'s children?

3068 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Statement A, page 50*

9a. Were Social Security (Railroad Retirement) payments received for . . .'s children in *(Read each month)*?		**9b.** *If "Yes" in 9a* — **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 —

10a. Were all children living here covered by these payments?

3086 1 ☐ Yes — *SKIP to next ISS Code or Statement A, page 50*
2 ☐ No

AMOUNTS — PART A

Section 3 — AMOUNTS (Continued)

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

10b. Which children were covered?

	Person No.	Name
3088		
3090		
3092		
3094		
3096		
3098		

SKIP to next ISS Code or Statement A, page 50

11a. Were all the people living here covered under . . .'s food stamp allotment? 3100
1 ☐ Yes — *SKIP to 12a*
2 ☐ No

b. Which persons were covered?

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

12a. Did . . . receive food stamps in *(Read each month)*?		**12b.** *If "Yes" in 12a, 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 Statement A, page 50

13a. Did . . . receive any WIC benefits in *(Read each month)*?
Mark (X) all that apply.

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

b. Which persons were covered?

	Person No.	Name
3146		
3148		
3150		
3152		
3154		

SKIP to next ISS Code or Statement A, page 50

Section 3 — AMOUNTS

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

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

(Read "was authorized to receive" if asking about Food Stamps — code 27.)

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 13a, page 29*
3☐ ISS code 27 (Food Stamps) — *SKIP to 11a, page 29*
4☐ ISS codes 37, 50, 51, 52, 53, or 56 — *SKIP to Check Item A4*
5☐ Other ISS codes — *SKIP to 5a*

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 . . .'s 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 9a*

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 item 1 already been recorded during an interview for . . .'s spouse?

3214 1☐ Yes — *SKIP to next ISS Code or Statement A, page 50*
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)	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 Statement A, page 50*

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 Statement A, page 50*

7. Is . . . required to fill out an annual income questionnaire in order to receive a VA pension?

3260 1 ☐ Yes
2 ☐ No
X1 ☐ DK
} *SKIP to next ISS Code or Statement A, page 50*

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)

8a. Social Security (Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope . . .'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)

3264 1 ☐ Blue
2 ☐ Buff
3 ☐ Direct Deposit
4 ☐ Other
X1 ☐ DK

b. 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 27.* Were (Social Security/Railroad Retirement) payments received especially for . . .'s children?

3268 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Statement A, page 50*

9a. Were Social Security (Railroad Retirement) payments received for . . .'s children in *(Read each month)*?		**9b.** *If "Yes" in 9a* — **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 —

10a. Were all children living here covered by these payments?

3286 1 ☐ Yes — *SKIP to next ISS Code or Statement A, page 50*
2 ☐ No

Section 3 — AMOUNTS (Continued)

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

10b. Which children were covered?

	Person No.	Name
3288		
3290		
3292		
3294		
3296		
3298		

SKIP to next ISS Code or Statement A, page 50

11a. Were all the people living here covered under . . .'s food stamp allotment? 3300

1 ☐ Yes — *SKIP to 12a*
2 ☐ No

b. Which persons were covered?

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

12a. Did . . . receive food stamps in *(Read each month)*?

12b. *If "Yes" in 12a, ask —* **What was the total amount?**

		12a.	12b.
(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 Statement A, page 50

13a. Did . . . receive any WIC benefits in *(Read each month)*?

Mark (X) all that apply.

3338 / 3340 / 3342 / 3344

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

b. Which persons were covered?

	Person No.	Name
3346		
3348		
3350		
3352		
3354		

SKIP to next ISS Code or Statement A, page 50

Section 3 — AMOUNTS

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

1. You said . . . received (was authorized to receive) *(Read name of income type)* **during the 4-month period.**
(Read "was authorized to receive" if asking about Food Stamps — code 27.)

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 13a, page 32*
3☐ ISS code 27 (Food Stamps) — *SKIP to 11a, page 32*
4☐ ISS codes 37, 50, 51, 52, 53, or 56 — *SKIP to Check Item A4*
5☐ Other ISS codes — *SKIP to 5a*

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 . . .'s 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 9a*

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 item 1 already been recorded during an interview for . . .'s spouse?

3414
1☐ Yes — *SKIP to next ISS Code or Statement A, page 50*
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)	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 Statement A, page 50*

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

3434
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
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 Statement A, page 50*

7. Is . . . required to fill out an annual income questionnaire in order to receive a VA pension?

3460 1 ☐ Yes
2 ☐ No
X1 ☐ DK
} *SKIP to next ISS Code or Statement A, page 50*

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)

8a. Social Security (Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope . . .'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)

3464 1 ☐ Blue
2 ☐ Buff
3 ☐ Direct Deposit
4 ☐ Other
X1 ☐ DK

b. 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 30.* Were (Social Security/Railroad Retirement) payments received especially for . . .'s children?

3468 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Statement A, page 50*

9a. Were Social Security (Railroad Retirement) payments received for . . .'s children in *(Read each month)*?		**9b.** *If "Yes" in 9a* — **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 —

10a. Were all children living here covered by these payments?

3486 1 ☐ Yes — *SKIP to next ISS Code or Statement A, page 50*
2 ☐ No

Section 3 — AMOUNTS (Continued)

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

10b. Which children were covered?

	Person No.	Name
3488		
3490		
3492		
3494		
3496		
3498		

SKIP to next ISS Code or Statement A, page 50

11a. Were all the people living here covered under . . .'s food stamp allotment? 3500

1 ☐ Yes — *SKIP to 12a*
2 ☐ No

b. Which persons were covered?

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

12a. Did . . . receive food stamps in *(Read each month)*?

12b. *If "Yes" in 12a, 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 Statement A, page 50

13a. Did . . . receive any WIC benefits 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

b. Which persons were covered?

	Person No.	Name
3546		
3548		
3550		
3552		
3554		

SKIP to next ISS Code or Statement A, page 50

Section 3 — AMOUNTS

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

1. You said . . . received (was authorized to receive) *(Read name of income type)* **during the 4-month period.**
(Read "was authorized to receive" if asking about Food Stamps — code 27.)

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 13a, page 35*
3☐ ISS code 27 (Food Stamps) — *SKIP to 11a, page 35*
4☐ ISS codes 37, 50, 51, 52, 53, or 56 — *SKIP to Check Item A4*
5☐ Other ISS codes — *SKIP to 5a*

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 . . .'s 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 9a*

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 item 1 already been recorded during an interview for . . .'s spouse?

3614
1☐ Yes — *SKIP to next ISS Code or Statement A, page 50*
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)	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 Statement A, page 50*

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 Statement A, page 50*

7. Is . . . required to fill out an annual income questionnaire in order to receive a VA pension?

3660 1 ☐ Yes
2 ☐ No
X1 ☐ DK
} *SKIP to next ISS Code or Statement A, page 50*

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)

8a. Social Security (Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope . . .'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)

3664 1 ☐ Blue
2 ☐ Buff
3 ☐ Direct Deposit
4 ☐ Other
X1 ☐ DK

b. 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 33.* Were (Social Security/Railroad Retirement) payments received especially for . . .'s children?

3668 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Statement A, page 50*

9a. Were Social Security (Railroad Retirement) payments received for . . .'s children in *(Read each month)*?		**9b.** *If "Yes" in 9a* — **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 —

10a. Were all children living here covered by these payments?

3686 1 ☐ Yes — *SKIP to next ISS Code or Statement A, page 50*
2 ☐ No

Section 3 — AMOUNTS (Continued)

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

10b. Which children were covered?

	Person No.	Name
3688		
3690		
3692		
3694		
3696		
3698		

SKIP to next ISS Code or Statement A, page 50

11a. Were all the people living here covered under . . .'s food stamp allotment? 3700
1 ☐ Yes — *SKIP to 12a*
2 ☐ No

b. Which persons were covered?

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

12a. Did . . . receive food stamps in *(Read each month)*?

12b. *If "Yes" in 12a, ask —* **What was the total amount?**

		12a.	12b.
(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 Statement A, page 50

13a. Did . . . receive any WIC benefits 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

b. Which persons were covered?

	Person No.	Name
3746		
3748		
3750		
3752		
3754		

SKIP to next ISS Code or Statement A, page 50

Section 3 — AMOUNTS

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

1. You said . . . received (was authorized to receive) *(Read name of income type)* **during the 4-month period.**
(Read "was authorized to receive" if asking about Food Stamps — code 27.)

Income code 3800 ☐☐ 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 13a, page 38*
3 ☐ ISS code 27 (Food Stamps) — *SKIP to 11a, page 38*
4 ☐ ISS codes 37, 50, 51, 52, 53, or 56 — *SKIP to Check Item A4*
5 ☐ Other ISS codes — *SKIP to 5a*

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 . . .'s 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 9a*

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 item 1 already been recorded during an interview for . . .'s spouse?

3814
1 ☐ Yes — *SKIP to next ISS Code or Statement A, page 50*
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 Statement A, page 50*

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 Statement A, page 50*

7. Is . . . required to fill out an annual income questionnaire in order to receive a VA pension?

3860 1 ☐ Yes
2 ☐ No
X1 ☐ DK
} *SKIP to next ISS Code or Statement A, page 50*

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)

8a. Social Security (Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope . . .'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)

3864 1 ☐ Blue
2 ☐ Buff
3 ☐ Direct Deposit
4 ☐ Other
X1 ☐ DK

b. 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 36.* Were (Social Security/Railroad Retirement) payments received especially for . . .'s children?

3868 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Statement A, page 50*

9a. Were Social Security (Railroad Retirement) payments received for . . .'s children in *(Read each month)*?		**9b.** *If "Yes" in 9a* — **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 —

10a. Were all children living here covered by these payments?

3886 1 ☐ Yes — *SKIP to next ISS Code or Statement A, page 50*
2 ☐ No

Section 3 — AMOUNTS (Continued)

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

10b. Which children were covered?

	Person No.	Name
3888		
3890		
3892		
3894		
3896		
3898		

SKIP to next ISS Code or Statement A, page 50

11a. Were all the people living here covered under . . .'s food stamp allotment? 3900

1 ☐ Yes — *SKIP to 12a*
2 ☐ No

b. Which persons were covered?

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

12a. Did . . . receive food stamps in *(Read each month)*?

12b. *If "Yes" in 12a, 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 Statement A, page 50

13a. Did . . . receive any WIC benefits in *(Read each month)*?

Mark (X) all that apply.

3938 / 3940 / 3942 / 3944

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

b. Which persons were covered?

	Person No.	Name
3946		
3948		
3950		
3952		
3954		

SKIP to next ISS Code or Statement A, page 50

Section 3 — AMOUNTS

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

1. You said . . . received (was authorized to receive) *(Read name of income type)* **during the 4-month period.**
(Read "was authorized to receive" if asking about Food Stamps — code 27.)

4000 Income code ☐☐ 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 13a, page 41*
3☐ ISS code 27 (Food Stamps) — *SKIP to 11a, page 41*
4☐ ISS codes 37, 50, 51, 52, 53, or 56 — *SKIP to Check Item A4*
5☐ Other ISS codes — *SKIP to 5a*

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 . . .'s 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 9a*

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 item 1 already been recorded during an interview for . . .'s spouse?

4014
1☐ Yes — *SKIP to next ISS Code or Statement A, page 50*
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)	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 Statement A, page 50*

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 Statement A, page 50*

7. Is . . . required to fill out an annual income questionnaire in order to receive a VA pension?

4060 1 ☐ Yes
2 ☐ No
X1 ☐ DK
} *SKIP to next ISS Code or Statement A, page 50*

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)

8a. Social Security (Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope . . .'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)

4064 1 ☐ Blue
2 ☐ Buff
3 ☐ Direct Deposit
4 ☐ Other
X1 ☐ DK

b. 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 39.* Were (Social Security/Railroad Retirement) payments received especially for . . .'s children?

4068 1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Statement A, page 50*

9a. Were Social Security (Railroad Retirement) payments received for . . .'s children in *(Read each month)***?**		**9b.** *If "Yes" in 9a* — **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 —

10a. Were all children living here covered by these payments?

4086 1 ☐ Yes — *SKIP to next ISS Code or Statement A, page 50*
2 ☐ No

Section 3 — AMOUNTS (Continued)

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

10b. Which children were covered?

	Person No.	Name
4088		
4090		
4092		
4094		
4096		
4098		

SKIP to next ISS Code or Statement A, page 50

11a. Were all the people living here covered under . . .'s food stamp allotment? 4100
1 ☐ Yes — *SKIP to 12a*
2 ☐ No

b. Which persons were covered?

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

12a. Did . . . receive food stamps in *(Read each month)*?

12b. *If "Yes" in 12a, 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 Statement A, page 50

13a. Did . . . receive any WIC benefits in *(Read each month)*?
Mark (X) all that apply.

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

b. Which persons were covered?

	Person No.	Name
4146		
4148		
4150		
4152		
4154		

SKIP to next ISS Code or Statement A, page 50

Section 3 — AMOUNTS (Continued)

Part B — SAVINGS ACCOUNTS, MONEY MARKET DEPOSIT ACCOUNTS, CERTIFICATES OF DEPOSIT, AND INTEREST-EARNING CHECKING 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 — Interest-earning Checking Accounts (such as NOW or Super NOW accounts)

1. Earlier you said that . . . had *(Read names of owned assets)* **which excluded IRA and KEOGH accounts.**

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
X3 ☐ None
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

c. As of *(Read last day of reference period)*, **what was the total amount that . . . and . . .'s (husband/wife) had in these jointly held** *(Read asset types)*?

★

4314 $ _____ . 00 — *SKIP to 3a*
X3 ☐ None — *SKIP to 3a*
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

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

4316
1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 6*
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 Statement A, page 50*

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
X3 ☐ None
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

c. As of *(Read last day of reference period)*, **what was the total amount that . . . had in these** *(Read asset types)*?

★

4322 $ _____ . 00 — *SKIP to next ISS Code or Statement A, page 50*
X3 ☐ None
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

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

4324
1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 7*
2 ☐ No

SKIP to next ISS Code or Statement A, page 50

NOTES

AMOUNTS — PARTS B&C

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)* **which excluded IRA and KEOGH accounts.**

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
X3 ☐ None
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

c. As of *(Read last day of reference period)*, **what was the total amount that . . . and . . .'s (husband/wife) had in these jointly held** *(Read asset types)*?

★

4414 $ _____ . 00 — *SKIP to 3a*
X3 ☐ None — *SKIP to 3a*
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

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

4416
1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 8*
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 Statement A, page 50*

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
X3 ☐ None
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

c. As of *(Read last day of reference period)*, **what was the total amount that . . . had in these** *(Read asset types)*?

★

4422 $ _____ . 00 — *SKIP to next ISS Code or Statement A, page 50*
X3 ☐ None
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

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

4424
1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 9* — *SKIP to next ISS Code or Statement A, page 50*
2 ☐ No

NOTES

AMOUNTS — PARTS B&C

Section 3 — AMOUNTS (Continued)

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

1a. **Earlier you told me that . . . owned stocks or mutual fund shares which excluded IRA and KEOGH accounts. Did . . . receive any dividend checks during these 4 months? (Include checks made out jointly to . . . and . . .'s spouse.)**

4500
1 ☐ Yes
2 ☐ No
X1 ☐ DK
SKIP to 3a

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*

1b. **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 Statement A, page 50*

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 10*
2 ☐ No

2a. **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 Statement A, page 50*

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 11*
2 ☐ No

3a. **(Besides the money that . . . received in dividend checks) 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
X1 ☐ DK
SKIP to Check Item A15

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*

3b. **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 Statement A, page 50*

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 Statement A, page 50*

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

8032
1 ☐ No spouse in household — *SKIP to 5b*
2 ☐ Interview for spouse not yet conducted
3 ☐ Interview for spouse already conducted — *SKIP to 5a*

4a. **As of** *(read last day of reference period)*, **what was the market value of the stocks or mutual funds held jointly by . . . and . . .'s (husband/wife)?**
(Exclude stock in own corporation if value of that corporation was already obtained in Section 2, Part B.) ★

8034 $ _____ . 00 — *SKIP to 4c*
X3 ☐ None — *SKIP to 5a*
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

8035 1 ☐ Office Use Only

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

8036
1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 12*
2 ☐ No

AMOUNTS — PARTS D&E

Section 3 — AMOUNTS (Continued)

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

4c. **Was any debt or margin account held against these jointly held stocks or mutual funds as of** *(Read last day of reference period)***?**

8038
1 ☐ Yes
2 ☐ No — *SKIP to 5a*

d. **As of** *(Read last day of reference period)*, **what was the amount of the debt or margin account?**

8040 $ _____ . 00
x1 ☐ DK — *Probe*
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

5a. **Besides any stocks or mutual fund shares held jointly with . . .'s (husband/wife), did . . . hold any other stocks or mutual fund shares?**

8042
1 ☐ Yes
2 ☐ No — *SKIP to next ISS code or Statement A, page 50*

b. **As of** *(Read last day of reference period)*, **what was the market value of the stocks or mutual funds . . . held in (his/her) OWN name?**

(Exclude stock in own corporation if value of that corporation was already obtained in Section 2, Part B.) ★

8044 $ _____ . 00 — *SKIP to 5d*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

8045 1 ☐ Office Use Only

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

8046
1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 13*
2 ☐ No

d. **Was any debt or margin account held against . . .'s stocks or mutual funds as of** *(Read last day of reference period)***?**

8048
1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Statement A, page 50*

e. **As of** *(Read last day of reference period)*, **what was the amount of the debt or margin account?**

8050 $ _____ . 00
x1 ☐ DK — *Probe*
x2 ☐ Ref.

SKIP to next ISS Code or Statement A, page 50

NOTES

AMOUNTS – PARTS D&E

Section 3 — AMOUNTS (Continued)

Part E — RENTAL INCOME (ISS Code 120)

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

CHECK ITEM A16 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) during the last 4 months?
Include only property owned entirely by couple.

4602
1 ☐ Yes
2 ☐ No — *SKIP to 2d*

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 Statement A, page 50*

c. What is your best estimate of the amount that was cleared after expenses?

4606 $ _____ . 00 — *SKIP to 2e*
X3 ☐ None
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*
4608 X4 ☐ Lost money — *Enter amount of loss in box — SKIP to 2e*

d. As of *(Read last day of reference period)*, **did . . . own any rental property jointly with . . .'s (husband/wife)? (Include only property owned entirely by . . . and . . .'s (husband/wife).)**

8052
1 ☐ Yes
2 ☐ No
X1 ☐ DK — *SKIP to 3a*

e. How many properties did . . . own jointly with . . .'s (husband/wife) as of *(Read last day of reference period)*?

8054 ☐☐ Number of properties
X3 ☐ None — *SKIP to 3a*
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

f. What type of property(ies) (was it/were they)?

Mark (X) all that apply.

8056 1 ☐ Vacation home
8058 2 ☐ Other residential property
8060 3 ☐ Farm property
8062 4 ☐ Commercial property
8064 5 ☐ Equipment
8066 6 ☐ Other — *Specify* _____

g. As of *(Read last day of reference period)*, **what was the total market value of the property(ies) ?**

★

8068 $ _____ . 00 — *SKIP to 2i*
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*
8069 1 ☐ Office Use Only

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

8070
1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 14*
2 ☐ No

i. Was there a mortgage, deed of trust, or other debt on the property(ies)?

8072
1 ☐ Yes
2 ☐ No
X1 ☐ DK — *SKIP to 3a*

j. As of *(Read last day of reference period)*, **how much principal was owed on the property(ies)?**

8074 $ _____ . 00
X3 ☐ None
X1 ☐ DK — *Probe*
X2 ☐ Ref.
8075 1 ☐ Office Use Only

3a. Did . . . receive rental income from property owned entirely in . . .'s OWN name during the last 4 months?

4610
1 ☐ Yes
2 ☐ No — *SKIP to 3d*

Section 3 — AMOUNTS (Continued)

Part E — RENTAL INCOME (ISS Code 120) (Continued)

3b. **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 Statement A, page 50*

c. **What is your best estimate of the amount that was cleared after expenses?**

4614 $ _____ . 00 } *SKIP to 3e*
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*
4616 x4 ☐ Lost money — *Enter amount of loss in box — SKIP to 3e*

d. **As of** *(Read last day of reference period)*, **did . . . own any rental property in . . .'s OWN name?**

8076 1 ☐ Yes
2 ☐ No } *SKIP to 4a*
x1 ☐ DK }

e. **How many properties did . . . own in . . .'s OWN name as of** *(Read last day of reference period)*?

8078 ☐☐ Number of properties
x3 ☐ None — *SKIP to 4a*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

f. **What type of property(ies) (was it/were they)?**

Mark (X) all that apply.

8080 1 ☐ Vacation home
8082 2 ☐ Other residential property
8084 3 ☐ Farm property
8086 4 ☐ Commercial property
8088 5 ☐ Equipment
8090 6 ☐ Other — *Specify* _____

g. **As of** *(Read last day of reference period)*, **what was the total market value of the property(ies)?**

★

8092 $ _____ . 00 .— *SKIP to 3i*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*
8093 1 ☐ Office Use Only

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

8094 1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 15*
2 ☐ No

i. **Was there a mortgage, deed of trust, or other debt on the property(ies)?**

8096 1 ☐ Yes
2 ☐ No } *SKIP to 4a*
x1 ☐ DK }

j. **As of** *(Read last day of reference period)*, **how much principal was owed on the property(ies)?**

8098 $ _____ . 00
x3 ☐ None
x1 ☐ DK — *Probe*
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*
8099 1 ☐ Office Use Only

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

4618 1 ☐ Yes
2 ☐ No — *SKIP to 4c*

b. **What is your best estimate of . . .'s share of the amount cleared on this property during the last 4 months?**

4620 $ _____ . 00 } *SKIP to 4d*
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*
4622 x4 ☐ Lost money — *Enter amount of loss in box — SKIP to 4d*

Section 3 — AMOUNTS (Continued)

Part E — RENTAL INCOME (ISS Code 120) (Continued)

4c. **Did . . . own any rental property jointly with others as of** *(Read last day of reference period)*? **(Not including property owned entirely by . . . and . . .'s spouse.)**

8100 1 ☐ Yes
2 ☐ No
X1 ☐ DK
} *SKIP to next ISS Code or Statement A, page 50*

d. **How many properties did . . . own jointly with others as of** *(Read last day of reference period)*?

8102 ☐☐ Number of properties
X3 ☐ None — *SKIP to next ISS Code or Statement A, page 50*
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*

e. **What type of property(ies) (was it/were they)?**

Mark (X) all that apply.

8104 1 ☐ Vacation home
8106 2 ☐ Other residential property
8108 3 ☐ Farm property
8110 4 ☐ Commercial property
8112 5 ☐ Equipment
8114 6 ☐ Other — *Specify* ↓

_____

f. **As of** *(Read last day of reference period)*, **what was the total market value of the property(ies)?**

8116 $ _____ . 00
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*
8117 1 ☐ Office Use Only

g. **Was there a mortgage, deed of trust, or other debt on the property(ies)?**

8118 1 ☐ Yes
2 ☐ No
X1 ☐ DK
} *SKIP to 4i*

h. **As of** *(Read last day of reference period)*, **how much principal was owed on the property(ies)?**

8120 $ _____ . 00
X3 ☐ None
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*
8121 1 ☐ Office Use Only

i. **As of** *(Read last day of reference period)*, **what was the total value of . . .'s SHARE of equity in the property(ies)? (By equity we mean the total market value less any debts held against it.)** ★

8122 $ _____ . 00 — *SKIP to next ISS Code or Statement A, page 50*
X1 ☐ DK
X2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 50*
8123 1 ☐ Office Use Only

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

8124 1 ☐ Yes — *Mark Callback Summary and Reminder Card, Item 16*
2 ☐ No
} *SKIP to next ISS Code or Statement A, page 50*

NOTES

Section 5 — PROGRAM QUESTIONS

CHECK ITEM P1 Is this the reference person's questionnaire?

4800
1 ☐ Yes
2 ☐ No — *SKIP to Check Item C1*

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 Check Item C1*

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 Check Item C1*

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 Check Item C1*

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 Check Item C1*

NOTES

PROGRAM QUESTIONS