OMB No. 0607-0670: Approval Expires 09/30/92

FORM **SIPP-10700** (9-30-91)

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

SURVEY OF INCOME AND PROGRAM PARTICIPATION

1990 PANEL

WAVE 7 QUESTIONNAIRE

(Covers Waves 2-8 Core)

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

PGM 6

1. Book ____ of ____ | **2.** *(cc 1)* R.O. code | **3a.** *(cc 2)* PSU Segment Serial Sample 10 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. Field representative 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 item 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. Field representative edit time
Start time → a.m. p.m.
Finish time → a.m. p.m.
b. Total 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

INTRODUCTION

FIELD REPRESENTATIVE INSTRUCTIONS — Read introduction once to each respondent.

(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 ____.

Do you have the flashcard pamphlet that we included with the letter? *(Allow time for respondent to locate pamphlet.)* **Please look at Card J. Card J is a calendar that shows the 4 months we will be talking about. 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 you have available.

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, 1990, was . . . living in an Armed Forces barracks, outside the United States, or in a nonhousehold setting?
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*

ASK OR VERIFY —
b. Which kind of place ?
0916
1 ☐ Armed Forces barracks
2 ☐ Outside the United States
3 ☐ Nonhousehold setting

NOTES

REMINDER — Fill at the end of interview.

Respondent used flashcards?
☐ Yes
☐ No

LABOR FORCE AND RECIPIENCY

Section 1 — LABOR FORCE AND RECIPIENCY

1. During the 4-month period outlined on the 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 / 1050 / 1052 / 1054
1 ☐ Last month
2 ☐ 2 months ago
3 ☐ 3 months ago
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 without pay 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

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Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

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, vacations, 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 weeks 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. (Absent without pay any full weeks.)* 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 workers' compensation for any kind of job-related illness or injury?	1246 1☐ Yes — *Mark "10" on ISS* 2☐ No
CHECK ITEM R6 *Refer to cc items 44—47.* Was an interview obtained for . . . last reference period?	1248 1☐ Yes 2☐ No — *SKIP to Check Item R11, page 6*
CHECK ITEM R7 *Refer to item 11b, page 5.* Are any income types listed in the Income Roster?	1250 1☐ Yes 2☐ No — *SKIP to 12a*

NOTES

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

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

At any time during the past 4 months, that is _____, _____, _____, **and** _____, **did . . . get income from** *(Read income types in item 11b, column (2))***?**

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

b. INCOME ROSTER (ISS CODES 1 – 56)

C. *If "No" in column (4)* – **In which month did . . . *last* receive** *(Read income type)***?**

Note *– If last received in a month within the reference period, change the entry in column (4) to "Yes" and mark ISS.*

Line No. (1)	Income type (2)	Income code (3)	This reference period (4)	(5)
1		1252 ☐☐	1254 1 ☐ Yes – *Mark ISS* 2 ☐ No – *Fill col. (5).*	1255 ☐☐ Month last rec'd x3 ☐ Never received
2		1256 ☐☐	1258 1 ☐ Yes – *Mark ISS* 2 ☐ No – *Fill col. (5).*	1259 ☐☐ Month last rec'd x3 ☐ Never received
3		1260 ☐☐	1262 1 ☐ Yes – *Mark ISS* 2 ☐ No – *Fill col. (5).*	1263 ☐☐ Month last rec'd x3 ☐ Never received
4		1264 ☐☐	1266 1 ☐ Yes – *Mark ISS* 2 ☐ No – *Fill col. (5).*	1267 ☐☐ Month last rec'd x3 ☐ Never received
5		1268 ☐☐	1270 1 ☐ Yes – *Mark ISS* 2 ☐ No – *Fill col. (5).*	1271 ☐☐ Month last rec'd x3 ☐ Never received
6		1272 ☐☐	1274 1 ☐ Yes – *Mark ISS* 2 ☐ No – *Fill col. (5).*	1275 ☐☐ Month last rec'd x3 ☐ Never received
7		1276 ☐☐	1278 1 ☐ Yes – *Mark ISS* 2 ☐ No – *Fill col. (5).*	1279 ☐☐ Month last rec'd x3 ☐ Never received
8		1280 ☐☐	1282 1 ☐ Yes – *Mark ISS* 2 ☐ No – *Fill col. (5).*	1283 ☐☐ Month last rec'd x3 ☐ Never received

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 Department of Veterans Affairs (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 ☐ Workers' 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 Department of Veterans Affairs (VA)) – *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 *Refer to cc item 47.*

Is "Medicare" (code 172) marked for . . .?

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 — *Refer to cc item 47.* Is "Disabled" (code 171) marked for . . .?

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

CHECK ITEM R10 — *Refer to cc item 24.* Is . . . 65 years of age or older?

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 any payments from the Department of Veterans Affairs (VA)? (Exclude regular military retirement pay, insurance proceeds, and GI Bill benefits.)

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

CHECK ITEM R12 — *Refer to cc item 24.* Is . . . 18 years of age or older?

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*

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

Mark (X) only one.

1344 ☐ 1 **Retired?**
☐ 2 **Disabled?**
☐ 3 **Widowed 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?

1346 ☐ 1 Retired
☐ 2 Disabled
☐ 3 Widowed or surviving child
☐ 4 Spouse or dependent child
☐ 5 No other reason
☐ X1 DK

CHECK ITEM R13 — *Refer to item 15b and 15c above.* Is "Disabled" (box 2) marked in either item?

1348 ☐ 1 Yes
☐ 2 No — *SKIP to 16a*

15d. At what age did . . . begin receiving Social Security because of (his/her) disability?

1349 ☐☐ Age in years
☐ X1 DK
☐ X2 Ref.
} *SKIP to 16a*

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

1350 ☐ 1 Yes
☐ 2 No — *SKIP to 16a*

15e. 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 — *Refer to cc item 24.* Is . . . 40 years of age or older?

1358 ☐ 1 Yes
☐ 2 No — *SKIP to 18a*

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

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*

c. **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 Department of Veterans Affairs (VA)) — *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 *Refer to cc item 24.* Is . . . 70 years of age or older?

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

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

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

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

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

c. **What kind of income?**

Anything else?

Mark (X) all that apply.

1390 1 ☐ U.S. Government Railroad Retirement — *Mark "2" on ISS*
1392 2 ☐ Black Lung payments — *Mark "9" on ISS*
1394 3 ☐ Workers' 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 Department of Veterans Affairs (VA)) — *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?** *If "Yes," mark previous marital status.*

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

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

CHECK ITEM R18 — *Refer to cc items 24, 25 and 27.* Is . . . the parent or guardian of children under 21 years old 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.

CHECK ITEM R19 — *Refer to item 20, page 7.* Is "Both widowed and divorced" (box 3) marked?

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

22a. **(Please look at Card K in the flashcard pamphlet.) During this 4-month period, did . . . receive any pensions or annuities as a widow(er) (other than Social Security)?**

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

b. **What kind of income was this?**
Was there anything else?
(Read all of Flashcard K if necessary.)
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 Department of Veterans Affairs (VA)) — *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 — *Refer to item 22b above.* Is "Veterans Compensation or pension" (box 2) marked?

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 — *Refer to cc item 24.* Is . . . 65 years of age or older?

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 years old or over. Was . . . covered by Medicare?**

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

b. **Could you please read me the claim number and type of coverage indicated on your Medicare card?** ★

1464 ☐☐☐-☐☐-1466 ☐☐☐☐-1467 ☐☐

TYPE OF COVERAGE
1468 1 ☐ Hospital only (Type A)
2 ☐ Medical only (Type B) } *SKIP to Check Item R23*
3 ☐ Both hospital and medical (Types A and B) }
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 years old who live in this household?

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

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

CHECK ITEM R24 — *Refer to cc item 24.* Is . . . 18 years of age or older?

1476 1 ☐ Yes
2 ☐ No — *SKIP to 27a*

CHECK ITEM R25 — Interview status of . . .'s spouse.

1480 1 ☐ No spouse in household
2 ☐ Interview for spouse not yet conducted
3 ☐ Interview for spouse already conducted — *SKIP to Check Item R27*

CHECK ITEM R26 — Is ISS code "27" (Food stamps) listed in the Income Roster (item 11b, page 5)?

1481 1 ☐ Yes — *SKIP to 25a*
2 ☐ No

24. Was . . . (or . . .'s spouse) 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.)

1482 1 ☐ Yes — *Mark "27" on ISS*
2 ☐ No

25a. (Other than what we have already mentioned) During the 4-month period, did . . . receive any (other) welfare such as AFDC, WIC, Foster Child Care, 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 1 ☐ AFDC — *Mark "20" on ISS*
1488 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 — *Refer to cc item 47.* Is "Medicaid" (code 173) marked for . . .?

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 years old 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 — *Refer to items 26a–26d above.* Was . . . or any of . . .'s children under 18 years old covered by Medicaid?

1524 1 ☐ Yes
2 ☐ No — *SKIP to 27a*

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

1526 1 ☐ Yes — *SKIP to 27a*
2 ☐ No

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

Mark (X) all that apply.

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

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

27a. **Was . . . covered by a health insurance plan at any time during the past 4 months?**
(Include CHAMPUS, CHAMPVA, and military coverage.)
(Exclude Medicaid, Medicare, and plans paying benefits only for accidents or specific diseases.)

1536
1 ☐ Yes
2 ☐ No — *SKIP to Check Item R30*

ASK OR VERIFY —
b. **Was . . . covered by a health insurance plan during the entire 4-month period?**

1538
1 ☐ Yes — *SKIP to 27d*
2 ☐ No

c. **In which months was . . . covered?**
Mark (X) all that apply.

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

d. **Was . . .'s health insurance coverage from a plan in . . .'s own name (primary policy holder), or was . . . covered as a family member on someone else's plan?**

1547
1 ☐ Plan in own name — *SKIP to 27f*
2 ☐ Someone else's plan
3 ☐ Both — *SKIP to 27f*

e. **Whose plan covered . . .?**

Household member
Person No. Name
1548 ☐☐☐ _____
x4 ☐ Not a Household member
SKIP to Check Item R30

f. **Was . . .'s policy obtained through . . .'s current employer or union, through a former employer, through the CHAMPUS or CHAMPVA programs, or in some other way?**

1549
1 ☐ Current employer or union
2 ☐ Former employer
3 ☐ CHAMPUS
4 ☐ CHAMPVA
5 ☐ Military
6 ☐ Other
x1 ☐ DK
SKIP to 27h

g. **Did . . .'s employer or union (former employer) pay all, part, or none of the cost of this plan?**

1550
1 ☐ All
2 ☐ Part
3 ☐ None

h. **Was . . .'s plan an individual plan or a family plan?**

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

i. **Other than . . ., which persons in this household were covered by . . .'s plan?**
(Include children as well as adults.)

1554 x5 ☐ All persons

Person No. Name
1556 ☐☐☐ _____
1558 ☐☐☐ _____
1560 ☐☐☐ _____
1562 ☐☐☐ _____
1564 ☐☐☐ _____
1566 x3 ☐ None

j. **Did . . .'s plan cover anyone who did not live in this household during the past 4 months?**
Mark (X) all that apply.
If "Yes," **"Who did the plan cover?"**

1567 1 ☐ Yes, spouse
1568 2 ☐ Yes, child(ren)
1569 3 ☐ Yes, someone else
1570 4 ☐ No

NOTES

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

CHECK ITEM R30

Refer to cc items 24 and 27.
Is . . . the designated parent or guardian of children under 15 years old who live in this household?

1572
1 ☐Yes
2 ☐No — *SKIP to Check Item R31, page 12*

ASK OR VERIFY —

27k. Were all of . . .'s children under 15 years old covered by a health insurance plan?
(Include CHAMPUS, CHAMPVA, and military plans.)
(Exclude Medicare, Medicaid, and plans paying benefits only for accidents or specific diseases.)

1574
1 ☐Yes — *SKIP to 27m*
2 ☐No

l. Which children were covered by a health insurance plan?

Person No. | Name

1575 ☐☐☐ _____
1576 ☐☐☐ _____
1577 ☐☐☐ _____
1578 ☐☐☐ _____
1579 ☐☐☐ _____

OR

1580 x3 ☐None — *SKIP to Check Item R31, page 12*

m. Were any of these children covered by the plan of someone who did not live in the household during the past 4 months?

1581
1 ☐Yes — **Which children?**

Person No. | Name

1582 ☐☐☐ _____
1583 ☐☐☐ _____
1584 ☐☐☐ _____
1585 ☐☐☐ _____
1586 ☐☐☐ _____

1587 2 ☐No

NOTES

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

CHECK ITEM R31 — *Refer to item 28b.* Are any assets listed in the Asset Roster? 1588 1 ☐ Yes 2 ☐ No — *SKIP to 29a*

28a. According to the information we obtained last time, . . . had *(Read asset types in item 28b, column (2))* **during** *(8 months ago)* **through** *(5 months ago).*
At any time during the past 4 months, that is _____, _____, _____, and _____, did . . . still own (have) *(Read asset types in item 28b, column (2))?*
(Exclude IRA, Keogh, and 401K accounts.)
MARK (X) APPROPRIATE BOX IN ITEM 28b, COLUMN (4) FOR EACH ASSET TYPE LISTED.

b. ASSET ROSTER (ISS CODES 100—150, 174)

Line No. (1)	Asset type (2)	Asset code (3)	This reference period (4)
1		1590 ☐☐☐	1592 1 ☐ Yes — *Mark ISS* 2 ☐ No
2		1594 ☐☐☐	1596 1 ☐ Yes — *Mark ISS* 2 ☐ No
3		1598 ☐☐☐	1600 1 ☐ Yes — *Mark ISS* 2 ☐ No
4		1602 ☐☐☐	1604 1 ☐ Yes — *Mark ISS* 2 ☐ No
5		1606 ☐☐☐	1608 1 ☐ Yes — *Mark ISS* 2 ☐ No
6		1610 ☐☐☐	1612 1 ☐ Yes — *Mark ISS* 2 ☐ No
7		1614 ☐☐☐	1616 1 ☐ Yes — *Mark ISS* 2 ☐ No
8		1618 ☐☐☐	1620 1 ☐ Yes — *Mark ISS* 2 ☐ No

29a. (Please look at Card N in the flashcard pamphlet.) (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 that Card N? (Exclude assets held in IRA, Keogh, and 401K accounts.)
(Read all of Flashcard N if necessary.)

1622 1 ☐ Yes 2 ☐ No X1 ☐ DK X2 ☐ Ref. } *SKIP to 30a*

b. Which kinds of these assets did . . . own?
Any others?
(Exclude IRA, Keogh, and 401K 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* ↘ _____

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 R32*

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 R32*
2 ☐ High school grades 9—12 }
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 R32*

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

Mark (X) all that apply.

1672 1674 1 ☐ GI Bill — *Mark "40" on ISS*
2 ☐ Other Veterans' 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 R32 *Refer to cc item 26a.* Is code 2 (married, spouse absent) the current entry?

1694
1 ☐ Yes
2 ☐ No — *SKIP to Check Item R33*

ASK OR VERIFY —

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

1696
1 ☐ Yes
2 ☐ No

CHECK ITEM R33 Are any codes (excluding codes 171—173, 200—201) 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 marked on the ISS, except codes 171—173, 200—201).* **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, page 15*

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 56*

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

Enter codes from income source list and mark ISS.

1706 ☐☐☐
1708 ☐☐☐
1710 ☐☐☐

NOTES

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 56*

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 20*
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 *Refer to item 1a above.* Is "Both worked for employer and self-employed" (box 3) marked?

1718 1 ☐ Yes
2 ☐ No — *SKIP to 2a, page 16*

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

NOTES

EARNINGS AND EMPLOYMENT

Section 2 — EARNINGS AND EMPLOYMENT (Continued)

Part A1 — EMPLOYER IDENTIFICATION NUMBER 1

2a. **What is the name of the employer for whom . . . worked during this 4-month period?**
(If . . . worked for 2 employers, enter one employer here and the other in part A2, page 18. If . . . worked for 3 or more employers, enter in A1 and A2 the 2 employers for whom . . . worked the most hours.)

PGM 8 — 2000 — Employer name _____

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

PGM 8 — 2002 — Employer I.D. No. ☐

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 on this job?**
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?**

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 7a*

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 9a*

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

2029
1 ☐ Once a week
2 ☐ Once each 2 weeks
3 ☐ Once a month
4 ☐ Twice a month
5 ☐ Unpaid in family business or farm — *SKIP to Check Item E5*
6 ☐ Some other way — *Specify* _____

b. **On what date was . . . last paid during this 4-month period?**

2030 ☐☐ Month — x1 ☐ DK — x2 ☐ Ref.
2031 ☐☐ Day — x1 ☐ DK — x2 ☐ Ref.

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. Please remember that certain months contain 5 paydays for workers paid weekly and 3 paydays for workers paid every 2 weeks. 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 cash housing allowances and any other special types of pay.)*

★

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

FIELD REPRESENTATIVE USE ONLY

$ _____ .00	$ _____ .00	$ _____ .00	$ _____ .00
$ _____ .00	$ _____ .00	$ _____ .00	$ _____ .00
$ _____ .00	$ _____ .00	$ _____ .00	$ _____ .00
$ _____ .00	$ _____ .00	$ _____ .00	$ _____ .00
$ _____ .00	$ _____ .00	$ _____ .00	$ _____ .00
Total $ _____ .00	**Total** $ _____ .00	**Total** $ _____ .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 I were to call back later would you (or . . .) be able to provide me 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 this survey.)

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

9a. On this job, was . . . a member of a labor union or a member of an employee association similar to a union during the 4-month period?

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

b. Was . . . covered by a union or employee association contract during the 4-month period?

2046 1 ☐ Yes
2 ☐ No

CHECK ITEM E5 Number of employers in item 1b, page 15?

2048 1 ☐ 1 employer — *SKIP to Check Item E8, page 19*
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 — Employer name
2100 _____

CHECK ITEM E6 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.
2102 ☐

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 on this job?**
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?**

ASK OR VERIFY —
11a. **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)*?
Mark (X) only one.

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

ASK OR VERIFY —
12. **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 15a*

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 17a*

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

2129
1 ☐ Once a week
2 ☐ Once each 2 weeks
3 ☐ Once a month
4 ☐ Twice a month
5 ☐ Unpaid in family business or farm — *SKIP to Check Item E8*
6 ☐ Some other way — *Specify* _____

b. **On what date was . . . last paid during this 4-month period?**

2130 ☐☐ Month 2131 ☐☐ Day
X1 ☐ DK X1 ☐ DK
X2 ☐ Ref. X2 ☐ Ref.

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. Please remember that certain months contain 5 paydays for workers paid weekly and 3 paydays for workers paid every 2 weeks. 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 cash housing allowances and any other special types of pay.)*

		FIELD REPRESENTATIVE 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 I were to call back later would you (or . . .) be able to provide me 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 this survey.)**

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

17a. **On this job was . . . a member of a labor union or a member of an employee association similar to a union during the 4-month period?**

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

b. **Was . . . covered by a union or employee association contract during the 4-month period?**

2146 1☐ Yes
2☐ No

CHECK ITEM E8 — Is "Both worked for employer and self-employed" (box 3) marked in item 1a, page 15?

2148 1☐ Yes — *Read Statement B, page 20*
2☐ No — *SKIP to first ISS Code or Statement A, page 56*

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 22. 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 at this business?

PGM 8 2208 _____

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

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 10*
X1 ☐ DK

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

2216
1 ☐ Yes — *SKIP to 6a*
2 ☐ No

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

2218 ☐☐☐ Employees
X1 ☐ DK

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 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)***?**

NOTE — Include total gross earnings before any deductions.

★

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

CHECK ITEM S4 Is "DK" marked in all parts of item 7?

2246 1 ☐ Yes
2 ☐ No — *SKIP to Check Item S5*

8. If I were to call back later would you (or . . .) be able to provide me 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 this survey.)

2248 1 ☐ Yes — *Mark Reminder Card and Callback Summary, Item 4a*
2 ☐ No

CHECK ITEM S5 *Refer to item 4a, page 20.* Is this business incorporated?

2250 1 ☐ Yes — *SKIP to 11*
2 ☐ No

CHECK ITEM S6 Has information about the net profit (or loss) for this business already been obtained from another household member?

2252 1 ☐ Yes — *SKIP to 11*
2 ☐ No

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

2254 1 ☐ Yes
2 ☐ No — *SKIP to 11*

b. What was the net profit or loss?

If "broke even," enter $1 in box.

2256 $. 00
2258 x4 ☐ Loss in amount box

} *SKIP to 11*

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

2260 $. 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref.

11. Was . . . self-employed in any other business (professional practice/farm) during the 4-month period?

2262 1 ☐ Yes
2 ☐ No — *SKIP to first ISS Code or Statement A, page 56*

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 earnings.)

PGM 8 — Business name
2300 _____

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

PGM 8 — Business I.D. No.
2301 ☐

CHECK ITEM S7.1 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 at this business?

PGM 8
2308 _____
_____

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

PGM 8
2310 _____
_____

ASK OR VERIFY —
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 21*
X1 ☐ DK

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

2316 1 ☐ Yes — *SKIP to 17a*
2 ☐ No

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

2318 ☐☐☐ Employees
X1 ☐ DK

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

2336 1 ☐ Yes
2 ☐ No — *SKIP to Check Item S11*

FORM SIPP-10700 (9-30-91)

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)***?**

NOTE — Include total gross earnings before any deductions.

★

		FIELD REPRESENTATIVE USE ONLY
LAST MONTH	2338 $ ____ . 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ ____ .00 $ ____ .00 $ ____ .00 $ ____ .00 Total $ ____ .00
2 MONTHS AGO	2340 $ ____ . 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ ____ .00 $ ____ .00 $ ____ .00 $ ____ .00 Total $ ____ .00
3 MONTHS AGO	2342 $ ____ . 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ ____ .00 $ ____ .00 $ ____ .00 $ ____ .00 Total $ ____ .00
4 MONTHS AGO	2344 $ ____ . 00 x3 ☐ None x1 ☐ DK x2 ☐ Ref.	$ ____ .00 $ ____ .00 $ ____ .00 $ ____ .00 Total $ ____ .00

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

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

19. If I were to call back later would you (or . . .) be able to provide me 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 this survey.)

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

CHECK ITEM S11 *Refer to item 15a, page 22.* Is this business incorporated?

2350 1 ☐ Yes — *SKIP to first ISS Code or Statement A, page 56*
2 ☐ No

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

2352 1 ☐ Yes — *SKIP to first ISS Code or Statement A, page 56*
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 first ISS Code or Statement A, page 56*

b. What was the net profit or loss?

If "broke even," enter $1 in box.

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

SKIP to first ISS Code or Statement A, page 56

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

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

SKIP to first ISS Code or Statement A, page 56

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 27*
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 Check Item A4.1*

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 — *Refer to cc item 26a.* Is . . . married?

3010
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A4.1*

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

3012
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A4.1*

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 56*
2 ☐ No

CHECK ITEM A4.1 — *Refer to item 11b, page 5.* Is this income source listed on the income roster?

3015
1 ☐ Yes — *ASK 5b*
2 ☐ No — *ASK 5a*

5a. In which month, during the 4-month reference period, did . . . begin to receive *(Read name of income type)***?**

Mark "Yes" in item 5b for the first month received and mark "No" for the previous months. Then ask if it was received in each of the remaining months of the reference period and mark item 5b.

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

NOTE — Social Security and SSI payments may be adjusted for inflation each January.

5c. Some persons receive more than one payment per month for certain income types.

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

	5b		5c	
(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.

Section 3 — AMOUNTS (Continued)

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

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

3032
1 ☐ ISS Code 1 or 2 — *SKIP to Check Item A6.1*
2 ☐ ISS Code 8 or 20 through 24
3 ☐ All other income codes — *SKIP to next ISS Code or Statement A, page 56*

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

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

b. 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 56*

7a. What type of Veterans' payments did . . . receive?

3058
1 ☐ Service connected disability compensation
2 ☐ Survivor benefits
3 ☐ Veterans' pension
4 ☐ Other Veterans' payments

b. 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 56*

CHECK ITEM A6.1 *Refer to cc item 45.* Was Social Security/Railroad Retirement (code 1 or code 2) marked for . . . in the previous reference period?

3062
1 ☐ Yes — *SKIP to Check Item A7*
2 ☐ No

8a. (Social Security/Railroad Retirement) sends out checks in two different colored envelopes — blue and buff. Which color envelope does . . .'s check come 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 A7 *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 56*

NOTES

AMOUNTS — PART A

Section 3 — AMOUNTS (Continued)

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

9a. Were (Social Security/Railroad Retirement) payments received for . . .'s children in *(Read each month)*?
NOTE — Social Security payments may be adjusted for inflation each January.

9b. *If "Yes" in item 9a* — **How much was received?**

		9a	9b
(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 56*
2 ☐ No

b. Which children were covered?

	Person No.	Name
3088	☐☐☐	
3090	☐☐☐	
3092	☐☐☐	
3094	☐☐☐	
3096	☐☐☐	
3098	☐☐☐	

SKIP to next ISS Code or Statement A, page 56

11a. Were all the people living here covered under . . .'s food stamp allotment? 3100
1 ☐ Yes — *SKIP to Check Item A7.1*
2 ☐ No

b. Which persons were covered?

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

Section 3 — AMOUNTS

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

CHECK ITEM A7.1 *Refer to item 11b, page 5.*
Is food stamps (code 27) listed on the income roster?

3121 1 ☐ Yes — *ASK 12b*
2 ☐ No — *ASK 12a*

12a. In which month, during the 4 month reference period, did . . . begin to receive food stamps? Was it in *(Read each month)*?

Mark "Yes" in item 12b for the first month received and mark "No" for the previous months. Then ask if it was received in each remaining month of the reference period.

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

NOTE — Food stamp benefits may be adjusted for inflation in July and October.

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

		12b	12c
(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 56

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 56

NOTES

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 ____ Name of income type ____ — 3200

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 31*
3 ☐ ISS Code 27 (Food Stamps) — *SKIP to 11a, page 30*
4 ☐ ISS Codes 37, 50, 51, 52, 53, or 56 — *SKIP to Check Item A4*
5 ☐ Other ISS Codes — *SKIP to Check Item A4.1*

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 *Refer to cc item 26a.* Is . . . married? — 3210

1 ☐ Yes
2 ☐ No — *SKIP to Check Item A4.1*

4. Did . . . receive (Social Security/Railroad Retirement) jointly with . . .'s spouse? — 3212

1 ☐ Yes
2 ☐ No — *SKIP to Check Item A4.1*

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 56*
2 ☐ No

CHECK ITEM A4.1 *Refer to item 11b, page 5.* Is this income source listed on the income roster? — 3215

1 ☐ Yes — *ASK 5b*
2 ☐ No — *ASK 5a*

5a. In which month, during the 4-month reference period, did . . . begin to receive *(Read name of income type)***?**

Mark "Yes" in item 5b for the first month received and mark "No" for the previous months. Then ask if it was received in each of the remaining months of the reference period and mark item 5b.

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

NOTE — Social Security and SSI payments may be adjusted for inflation each January.

5c. Some persons receive more than one payment per month for certain income types.

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

(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.

Section 3 — AMOUNTS (Continued)

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

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

3232
1 ☐ ISS Code 1 or 2 — *SKIP to Check Item A6.1*
2 ☐ ISS Code 8 or 20 through 24
3 ☐ All other income codes — *SKIP to next ISS Code or Statement A, page 56*

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

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

b. 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 56*

7a. What type of Veterans' payments did . . . receive?

3258
1 ☐ Service connected disability compensation
2 ☐ Survivor benefits
3 ☐ Veterans' pension
4 ☐ Other Veterans' payments

b. 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 56*

CHECK ITEM A6.1 *Refer to cc item 45.* Was Social Security/Railroad Retirement (code 1 or code 2) marked for . . . in the previous reference period?

3262
1 ☐ Yes — *SKIP to Check Item A7*
2 ☐ No

8a. (Social Security/Railroad Retirement) sends out checks in two different colored envelopes — blue and buff. Which color envelope does . . . 's check come 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 A7 *Refer to item 2, page 28.* 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 56*

NOTES

Section 3 — AMOUNTS (Continued)

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

9a. Were (Social Security/Railroad Retirement) payments received for . . .'s children in *(Read each month)*?
NOTE — Social Security payments may be adjusted for inflation each January.

9b. *If "Yes" in item 9a* — **How much was received?**

		9a	9b
(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 56*
2 ☐ No

b. Which children were covered?

	Person No.	Name
3288	☐☐☐	
3290	☐☐☐	
3292	☐☐☐	
3294	☐☐☐	
3296	☐☐☐	
3298	☐☐☐	

SKIP to next ISS Code or Statement A, page 56

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

1 ☐ Yes — *SKIP to Check Item A7.1*
2 ☐ No

b. Which persons were covered?

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

Section 3 — AMOUNTS

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

CHECK ITEM A7.1 *Refer to item 11b, page 5.*
Is food stamps (code 27) listed on the income roster?

3321 1 ☐ Yes — *ASK 12b*
2 ☐ No — *ASK 12a*

12a. In which month, during the 4 month reference period, did . . . begin to receive food stamps? Was it in *(Read each month)*?

Mark "Yes" in item 12b for the first month received and mark "No" for the previous months. Then ask if it was received in each remaining month of the reference period.

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

NOTE — Food stamp benefits may be adjusted for inflation in July and October.

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

		12b	12c
(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 56

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 56

NOTES

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 ____ Name of income type ____ — 3400

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 35*
3 ☐ ISS Code 27 (Food Stamps) — *SKIP to 11a, page 34*
4 ☐ ISS Codes 37, 50, 51, 52, 53, or 56 — *SKIP to Check Item A4*
5 ☐ Other ISS Codes — *SKIP to Check Item A4.1*

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 *Refer to cc item 26a.* Is . . . married? — 3410

1 ☐ Yes
2 ☐ No — *SKIP to Check Item A4.1*

4. Did . . . receive (Social Security/Railroad Retirement) jointly with . . .'s spouse? — 3412

1 ☐ Yes
2 ☐ No — *SKIP to Check Item A4.1*

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 56*
2 ☐ No

CHECK ITEM A4.1 *Refer to item 11b, page 5.* Is this income source listed on the income roster? — 3415

1 ☐ Yes — *ASK 5b*
2 ☐ No — *ASK 5a*

5a. In which month, during the 4-month reference period, did . . . begin to receive *(Read name of income type)***?**

Mark "Yes" in item 5b for the first month received and mark "No" for the previous months. Then ask if it was received in each of the remaining months of the reference period and mark item 5b.

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

NOTE — Social Security and SSI payments may be adjusted for inflation each January.

5c. Some persons receive more than one payment per month for certain income types.

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

	5b		5c	
(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.

Section 3 — AMOUNTS (Continued)

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

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

3432
1 ☐ ISS Code 1 or 2 — *SKIP to Check Item A6.1*
2 ☐ ISS Code 8 or 20 through 24
3 ☐ All other income codes — *SKIP to next ISS Code or Statement A, page 56*

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

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

b. 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 56*

7a. What type of Veterans' payments did . . . receive?

3458
1 ☐ Service connected disability compensation
2 ☐ Survivor benefits
3 ☐ Veterans' pension
4 ☐ Other Veterans' payments

b. 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 56*

CHECK ITEM A6.1 *Refer to cc item 45.* Was Social Security/Railroad Retirement (code 1 or code 2) marked for . . . in the previous reference period?

3462
1 ☐ Yes — *SKIP to Check Item A7*
2 ☐ No

8a. (Social Security/Railroad Retirement) sends out checks in two different colored envelopes — blue and buff. Which color envelope does . . .'s check come 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 A7 *Refer to item 2, page 32.* 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 56*

NOTES

Section 3 — AMOUNTS (Continued)

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

9a. Were (Social Security/Railroad Retirement) payments received for . . .'s children in *(Read each month)*?

NOTE — Social Security payments may be adjusted for inflation each January.

9b. *If "Yes" in item 9a* — **How much was received?**

		9a	9b
(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 56*

2 ☐ No

b. Which children were covered?

	Person No.	Name
3488		
3490		
3492		
3494		
3496		
3498		

SKIP to next ISS Code or Statement A, page 56

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

1 ☐ Yes — *SKIP to Check Item A7.1*

2 ☐ No

b. Which persons were covered?

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

Section 3 — AMOUNTS

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

CHECK ITEM A7.1 *Refer to item 11b, page 5.*
Is food stamps (code 27) listed on the income roster?

3521 — 1 ☐ Yes — *ASK 12b*; 2 ☐ No — *ASK 12a*

12a. In which month, during the 4 month reference period, did . . . begin to receive food stamps? Was it in *(Read each month)*?

Mark "Yes" in item 12b for the first month received and mark "No" for the previous months. Then ask if it was received in each remaining month of the reference period.

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

NOTE — Food stamp benefits may be adjusted for inflation in July and October.

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

	12b	12c
(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 56

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 56

NOTES

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 39*
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 Check Item A4.1*

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 *Refer to cc item 26a.*
Is . . . married?

3610
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A4.1*

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

3612
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A4.1*

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 56*
2 ☐ No

CHECK ITEM A4.1 *Refer to item 11b, page 5.*
Is this income source listed on the income roster?

3615
1 ☐ Yes — *ASK 5b*
2 ☐ No — *ASK 5a*

5a. In which month, during the 4-month reference period, did . . . begin to receive *(Read name of income type)*?

Mark "Yes" in item 5b for the first month received and mark "No" for the previous months. Then ask if it was received in each of the remaining months of the reference period and mark item 5b.

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

NOTE — Social Security and SSI payments may be adjusted for inflation each January.

5c. Some persons receive more than one payment per month for certain income types.

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

(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.

Section 3 — AMOUNTS (Continued)

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

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

3632
1 ☐ ISS Code 1 or 2 — *SKIP to Check Item A6.1*
2 ☐ ISS Code 8 or 20 through 24
3 ☐ All other income codes — *SKIP to next ISS Code or Statement A, page 56*

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

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

b. 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 56*

7a. What type of Veterans' payments did . . . receive?

3658
1 ☐ Service connected disability compensation
2 ☐ Survivor benefits
3 ☐ Veterans' pension
4 ☐ Other Veterans' payments

b. 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 56*

CHECK ITEM A6.1 *Refer to cc item 45.* Was Social Security/Railroad Retirement (code 1 or code 2) marked for . . . in the previous reference period?

3662
1 ☐ Yes — *SKIP to Check Item A7*
2 ☐ No

8a. (Social Security/Railroad Retirement) sends out checks in two different colored envelopes — blue and buff. Which color envelope does . . .'s check come 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 A7 *Refer to item 2, page 36.* 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 56*

NOTES

Section 3 — AMOUNTS (Continued)

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

9a. Were (Social Security/Railroad Retirement) payments received for . . .'s children in *(Read each month)*?

NOTE — Social Security payments may be adjusted for inflation each January.

9b. *If "Yes" in item 9a* — **How much was received?**

		9a	9b
(Last month)		3670	3672 $ .00
(2 months ago)		3674	3676 $ .00
(3 months ago)		3678	3680 $ .00
(4 months ago)		3682	3684 $ .00

1 ☐ Yes
2 ☐ No
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 56*
2 ☐ No

b. Which children were covered?

	Person No.	Name
3688		
3690		
3692		
3694		
3696		
3698		

SKIP to next ISS Code or Statement A, page 56

11a. Were all the people living here covered under . . .'s food stamp allotment? 3700

1 ☐ Yes — *SKIP to Check Item A7.1*
2 ☐ No

b. Which persons were covered?

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

Section 3 — AMOUNTS

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

CHECK ITEM A7.1 *Refer to item 11b, page 5.*
Is food stamps (code 27) listed on the income roster?

3721
1 ☐ Yes — *ASK 12b*
2 ☐ No — *ASK 12a*

12a. **In which month, during the 4 month reference period, did . . . begin to receive food stamps? Was it in** *(Read each month)*?

Mark "Yes" in item 12b for the first month received and mark "No" for the previous months. Then ask if it was received in each remaining month of the reference period.

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

NOTE — Food stamp benefits may be adjusted for inflation in July and October.

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

		12b.	12c.
(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 56

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

Mark (X) all that apply.

3738 3740 3742 3744
1 ☐ Last month
2 ☐ 2 months ago
3 ☐ 3 months ago
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 56

NOTES

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 ____ Name of income type ____ — 3800

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 43*
3 ☐ ISS Code 27 (Food Stamps) — *SKIP to 11a, page 42*
4 ☐ ISS Codes 37, 50, 51, 52, 53, or 56 — *SKIP to Check Item A4*
5 ☐ Other ISS Codes — *SKIP to Check Item A4.1*

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 *Refer to cc item 26a.* Is . . . married? — 3810

1 ☐ Yes
2 ☐ No — *SKIP to Check Item A4.1*

4. Did . . . receive (Social Security/Railroad Retirement) jointly with . . .'s spouse? — 3812

1 ☐ Yes
2 ☐ No — *SKIP to Check Item A4.1*

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 56*
2 ☐ No

CHECK ITEM A4.1 *Refer to item 11b, page 5.* Is this income source listed on the income roster? — 3815

1 ☐ Yes — *ASK 5b*
2 ☐ No — *ASK 5a*

5a. In which month, during the 4-month reference period, did . . . begin to receive *(Read name of income type)*?

Mark "Yes" in item 5b for the first month received and mark "No" for the previous months. Then ask if it was received in each of the remaining months of the reference period and mark item 5b.

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

NOTE — Social Security and SSI payments may be adjusted for inflation each January.

5c. Some persons receive more than one payment per month for certain income types.

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

(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.

Section 3 — AMOUNTS (Continued)

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

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

3832
1 ☐ ISS Code 1 or 2 — *SKIP to Check Item A6.1*
2 ☐ ISS Code 8 or 20 through 24
3 ☐ All other income codes — *SKIP to next ISS Code or Statement A, page 56*

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

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

b. 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 56*

7a. What type of Veterans' payments did . . . receive?

3858
1 ☐ Service connected disability compensation
2 ☐ Survivor benefits
3 ☐ Veterans' pension
4 ☐ Other Veterans' payments

b. 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 56*

CHECK ITEM A6.1 *Refer to cc item 45.* Was Social Security/Railroad Retirement (code 1 or code 2) marked for . . . in the previous reference period?

3862
1 ☐ Yes — *SKIP to Check Item A7*
2 ☐ No

8a. (Social Security/Railroad Retirement) sends out checks in two different colored envelopes — blue and buff. Which color envelope does . . .'s check come 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 A7 *Refer to item 2, page 40.* 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 56*

NOTES

Section 3 — AMOUNTS (Continued)

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

9a. Were (Social Security/Railroad Retirement) payments received for . . .'s children in *(Read each month)*?
NOTE — Social Security payments may be adjusted for inflation each January.

9b. *If "Yes" in item 9a* — **How much was received?**

		9a	9b
(Last month)		3870	3872
(2 months ago)		3874	3876
(3 months ago)		3878	3880
(4 months ago)		3882	3884

9a: 1 ☐ Yes; 2 ☐ No; X1 ☐ DK

9b: $ ____ . 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 56*

2 ☐ No

b. Which children were covered?

	Person No.	Name
3888		
3890		
3892		
3894		
3896		
3898		

SKIP to next ISS Code or Statement A, page 56

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

1 ☐ Yes — *SKIP to Check Item A7.1*

2 ☐ No

b. Which persons were covered?

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

Section 3 — AMOUNTS

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

CHECK ITEM A7.1 *Refer to item 11b, page 5.*
Is food stamps (code 27) listed on the income roster?

3921 1 ☐ Yes — *ASK 12b*
2 ☐ No — *ASK 12a*

12a. In which month, during the 4 month reference period, did . . . begin to receive food stamps? Was it in *(Read each month)*?

Mark "Yes" in item 12b for the first month received and mark "No" for the previous months. Then ask if it was received in each remaining month of the reference period.

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

NOTE — Food stamp benefits may be adjusted for inflation in July and October.

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

	12b	12c
(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 56

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

Mark (X) all that apply.

3938 1 ☐ Last month
3940 2 ☐ 2 months ago
3942 3 ☐ 3 months ago
3944 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 56

NOTES

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 ____ Name of income type ____ 4000

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 47*
3 ☐ ISS Code 27 (Food Stamps) — *SKIP to 11a, page 46*
4 ☐ ISS Codes 37, 50, 51, 52, 53, or 56 — *SKIP to Check Item A4*
5 ☐ Other ISS Codes — *SKIP to Check Item A4.1*

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 *Refer to cc item 26a.*
Is . . . married?

4010
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A4.1*

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

4012
1 ☐ Yes
2 ☐ No — *SKIP to Check Item A4.1*

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 56*
2 ☐ No

CHECK ITEM A4.1 *Refer to item 11b, page 5.*
Is this income source listed on the income roster?

4015
1 ☐ Yes — *ASK 5b*
2 ☐ No — *ASK 5a*

5a. **In which month, during the 4-month reference period, did . . . begin to receive** *(Read name of income type)***?**
Mark "Yes" in item 5b for the first month received and mark "No" for the previous months. Then ask if it was received in each of the remaining months of the reference period and mark item 5b.

b. **Did . . . receive any** *(Read name of income type)* **in** *(Read each month)***?**
NOTE — Social Security and SSI payments may be adjusted for inflation each January.

5c. **Some persons receive more than one payment per month for certain income types.**
How much did . . . receive in *(Read each month marked "Yes" in item 5b)***? Please answer by giving the total amount each month before any deductions (including deductions for Medicare premiums).**

	5b	5c
(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.

Section 3 — AMOUNTS (Continued)

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

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

4032
1 ☐ ISS Code 1 or 2 — *SKIP to Check Item A6.1*
2 ☐ ISS Code 8 or 20 through 24
3 ☐ All other income codes — *SKIP to next ISS Code or Statement A, page 56*

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

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

b. 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 56*

7a. What type of Veterans' payments did . . . receive?

4058
1 ☐ Service connected disability compensation
2 ☐ Survivor benefits
3 ☐ Veterans' pension
4 ☐ Other Veterans' payments

b. 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 56*

CHECK ITEM A6.1 *Refer to cc item 45.* Was Social Security/Railroad Retirement (code 1 or code 2) marked for . . . in the previous reference period?

4062
1 ☐ Yes — *SKIP to Check Item A7*
2 ☐ No

8a. (Social Security/Railroad Retirement) sends out checks in two different colored envelopes — blue and buff. Which color envelope does . . .'s check come 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 A7 *Refer to item 2, page 44.* 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 56*

NOTES

Section 3 — AMOUNTS (Continued)

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

9a. Were (Social Security/Railroad Retirement) payments received for . . .'s children in *(Read each month)*?
NOTE — Social Security payments may be adjusted for inflation each January.

9b. *If "Yes" in item 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 56*
2 ☐ No

b. Which children were covered?

	Person No.	Name
4088	☐☐☐	
4090	☐☐☐	
4092	☐☐☐	
4094	☐☐☐	
4096	☐☐☐	
4098	☐☐☐	

SKIP to next ISS Code or Statement A, page 56

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

4100
1 ☐ Yes — *SKIP to Check Item A7.1*
2 ☐ No

b. Which persons were covered?

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

Section 3 — AMOUNTS

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

CHECK ITEM A7.1

Refer to item 11b, page 5.
Is food stamps (code 27) listed on the income roster?

4121
1 ☐ Yes — *ASK 12b*
2 ☐ No — *ASK 12a*

12a. In which month, during the 4 month reference period, did . . . begin to receive food stamps? Was it in *(Read each month)*?

Mark "Yes" in item 12b for the first month received and mark "No" for the previous months. Then ask if it was received in each remaining month of the reference period.

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

NOTE — Food stamp benefits may be adjusted for inflation in July and October.

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

		12b	12c
(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 56

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 56

NOTES

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 A8 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, Keogh, and 401K accounts.**

CHECK ITEM A9 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 (including even small amounts credited to . . .'s account(s))?**

4312 $ _____ . 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 56*

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 56*

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 5*
2 ☐ No

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

4318
1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Statement A, page 56*

b. What is your best estimate of the total amount of interest earned on these *(Read asset types)* **during the 4-month period (including even small amounts credited to . . .'s account(s))?**

4320 $ _____ . 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 56*

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 56*
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 56*

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 6* — *SKIP to next ISS Code or Statement A, page 56*
2 ☐ No

NOTES

AMOUNTS – PARTS B & C

Section 3 — AMOUNTS (Continued)

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

CHECK ITEM A10 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, Keogh, and 401K accounts.**

CHECK ITEM A11 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 (including even small amounts credited to . . .'s account(s))?**

4412 $ _____ . 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 56*

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 56*

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 7*
2 ☐ No

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

4418
1 ☐ Yes
2 ☐ No — *SKIP to next ISS Code or Statement A, page 56*

b. What is your best estimate of the total amount of interest . . . earned on these *(Read asset types)* **during the 4-month period (including even small amounts credited to . . .'s account(s))?**

4420 $ _____ . 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 56*

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 56*
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 56*

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 8* — *SKIP to next ISS Code or Statement A, page 56*
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, Keogh, and 401K 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 A12 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 56*

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

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

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 56*

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

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

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 A14

AMOUNTS — PARTS D & E

CHECK ITEM A13 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 56*

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 56*

CHECK ITEM A14 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.) ★

8034 $. 00 — *SKIP to 5a*
x3 ☐ None — *SKIP to 5a*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 56*

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 11*
2 ☐ No

Section 3 — AMOUNTS (Continued)

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

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 or Statement A, page 56*

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.) ★

8044 $. 00 } *SKIP to next ISS Code or Statement A, page 56*

x2 ☐ Ref.

x1 ☐ DK

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 12* } *SKIP to next ISS Code or Statement A, page 56*

2 ☐ No

NOTES

Section 3 — AMOUNTS (Continued)

Part E — RENTAL INCOME (ISS Code 120)

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

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

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

2a. Did . . . receive any rental income from property owned jointly by . . . and . . .'s (husband/wife) 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 56*

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 56*

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 } *SKIP to 3a*
x1 ☐ DK

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 56*

f. Were any of these properties attached to or located on the same land as . . .'s own residence?

8056
1 ☐ Yes — All rental properties on residence — *SKIP to 3a*
2 ☐ Yes — Some rental properties on residence
3 ☐ No

g. (Excluding properties attached to or located on . . .'s own residence), 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 56*

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 13*
2 ☐ No

i. (Excluding properties attached to or located on . . .'s own residence), was there a mortgage, deed of trust, or other debt on the property(ies)?

8072
1 ☐ Yes
2 ☐ No } *SKIP to 3a*
x1 ☐ DK

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

8074 $ _____ . 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref.

Section 3 — AMOUNTS (Continued)

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

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*

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

4612 $ _____ . 00
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 56*

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 56*

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 56*

f. **Were any of these properties attached to or located on the same land as . . .'s own residence?**

8080
1 ☐ Yes — All rental properties on residence — *SKIP to 4a*
2 ☐ Yes — Some rental properties on residence
3 ☐ No

g. **(Excluding properties attached to or located on . . .'s own residence), 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 56*

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 14*
2 ☐ No

i. **(Excluding properties attached to or located on . . .'s own residence), 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
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 56*

NOTES

Section 3 — AMOUNTS (Continued)

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

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 56*

4622 x4 ☐ Lost money — *Enter amount of loss in box — SKIP to 4d*

c. **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 } *SKIP to next ISS Code or Statement A, page 56*
x1 ☐ DK

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 56*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 56*

e. **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 56*

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

8118
1 ☐ Yes
2 ☐ No } *SKIP to 4h*
x1 ☐ DK

g. **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 56*

h. **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 56*
x1 ☐ DK
x2 ☐ Ref. — *SKIP to next ISS Code or Statement A, page 56*

i. **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 15* } *SKIP to next ISS Code or Statement A, page 56*
2 ☐ No

NOTES

Section 3 — AMOUNTS (Continued)

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

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

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

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

4706 1 ☐ Yes
2 ☐ No — *SKIP to 3*

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

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

1a. Earlier you said . . . held a mortgage. Did . . . own this jointly with . . .'s spouse?

4710 1 ☐ Yes
2 ☐ No — *SKIP to 2b*

b. During the past 4 months how much interest was paid to . . . and . . .'s (husband/wife) by the borrower?

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

2a. (Besides any jointly held mortgages,) did . . . hold any mortgages in . . .'s own name?

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

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

4716 $ _____ . 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref.

CHECK ITEM A19 — Is ISS Code 140 or 150 marked in Check Item A16?

4718 1 ☐ Yes
2 ☐ No — *SKIP to Statement A, page 56*

3. Earlier you said . . . had *(Read asset types).* **During the past 4 months, how much income did . . . receive from these** *(Read asset types)***?**

If income was shared, count only . . .'s share.

4720 $ _____ . 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref. — *SKIP to Statement A, page 56*
4722 x4 ☐ Lost money — *Enter amount of loss in box*

CHECK ITEM A20 — Is ISS Code 150 marked in Check Item A16?

8130 1 ☐ Yes
2 ☐ No — *SKIP to Statement A, page 56*

4. As of *(Read last day of reference period)*, **what was . . .'s equity in other financial investments? (By equity we mean the total market value less any debts held against it.)**

If investment is jointly owned, count only . . .'s share of equity.

8132 $ _____ . 00
x3 ☐ None
x1 ☐ DK
x2 ☐ Ref.

SKIP to Statement A, page 56

NOTES

Section 5 — PROGRAM QUESTIONS

CHECK ITEM P1 — *Refer to cc item 19b.* Is this the reference person's questionnaire?

4800 1 ☐ Yes
2 ☐ No — *SKIP to Check Item C1, page 64*

CHECK ITEM P2 — *Refer to cc items 16a and 16b.* Is this residence owned by the local housing authority OR does the government pay part of the rent? *("Yes" marked in cc item 16a or 16b)*

4802 1 ☐ Yes
2 ☐ No — *SKIP to 2a*

1a. What is your monthly rent?

4804 $ _____ . 00
X3 ☐ None
X1 ☐ DK
X2 ☐ Ref. } *SKIP to 2a*

b. (In addition to rent,) do you pay for any utilities such as water, electricity, gas, or oil?
Exclude telephone.

4806 1 ☐ Yes
2 ☐ No
X1 ☐ DK

2a. The government has an energy assistance program which helps pay heating and cooling costs. This assistance can be received directly 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 P3*

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 P3 — Are there any children 5 to 18 years old who live in this household?

4826 1 ☐ Yes
2 ☐ No — *SKIP to Check Item C1, page 64*

3a. 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, page 64*

b. How many children?

4830 ☐☐ Children

c. How many complete school lunches do all of the children eat per week?

4832 ☐☐ Number of lunches
X1 ☐ DK

d. Did you (or another person) apply for the children to receive free or reduced-price lunches under the Federal School Lunch Program during this school year?

4834 1 ☐ Yes
2 ☐ No — *SKIP to 3f*

e. In the past 4 months, were the lunches free, reduced-price, or were they full-price?
Mark (X) all that apply.

4836 1 ☐ Free lunch — *SKIP to 3g*
2 ☐ Reduced-price lunch
3 ☐ Full-price lunch

f. What was the average price paid by all of the children for a complete school lunch?

4838 $ _____ ☐
X1 ☐ DK

g. Do any of the children usually eat breakfast at school under the Federal School Breakfast Program?

4840 1 ☐ Yes
2 ☐ No — *SKIP to Check Item C1, page 64*

h. How many children?

4842 ☐☐ Children

i. How many complete school breakfasts do all of the children eat per week?

4844 ☐☐ Number of breakfasts
X1 ☐ DK

j. In the past 4 months, were the breakfasts free, reduced-price, or were they full-price?
Mark (X) all that apply.

4846 1 ☐ Free breakfast
2 ☐ Reduced-price breakfast
3 ☐ Full-price breakfast

PROGRAM QUESTIONS