

**Survey of Income and Program
Participation (SIPP)
1990 Panel
Wave 5 Educational Financing/Enrollment
Topical Module Microdata File (Rerelease)
and
Wave 5 Topical Module Research File (Rerelease)**

TECHNICAL DOCUMENTATION

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SURVEY OF INCOME AND PROGRAM PARTICIPATION (SIPP)

1990 PANEL

**WAVE 5 EDUCATIONAL FINANCING/ENROLLMENT
TOPICAL MODULE MICRODATA FILE (RERELEASE)
AND
WAVE 5 TOPICAL MODULE RESEARCH FILE (RERELEASE)**

Technical Documentation

Washington, D.C.

1996



U.S. DEPARTMENT OF COMMERCE

Mickey Kantor, Secretary

Vacant, Deputy Secretary

Economic and Statistics Administration

**Everett M. Ehrlich, Under Secretary
for Economic Affairs**

Bureau Of The Census

Martha Farnsworth Riche, Director



BUREAU OF THE CENSUS

Martha Farnsworth Riche, Director

ADMINISTRATIVE AND CUSTOMER SERVICES DIVISION

Walter C. Odom, Jr., Chief

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The file should be cited as follows:

Survey of Income and Program Participation (SIPP) 1990 Panel, Wave 5 Educational Financing/Enrollment Topical Module Microdata File (Rerelease) and Wave 5 Topical Module Research File (Rerelease) [machine-readable data file] / prepared by the Bureau of the Census. -Washington: The Bureau [producer and distributor], 1996.

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Survey of Income and Program Participation (SIPP) 1990 Panel, Wave 5 Educational Financing/Enrollment Topical Module Microdata File (Rerelease) and Wave 5 Topical Module Research File (Rerelease) Technical Documentation / prepared by the Administrative and Customer Services Division, Bureau of the Census. -Washington: The Bureau, 1996.

For additional information concerning the **file**, contact Administrative and Customer Services Division, Customer Services (Order Desk), Bureau of the Census, Washington, DC 20233. Phone: (301) 457-4100.

For additional information concerning the **technical documentation**, contact Administrative and Customer Services Division, Microdata Access Branch, Bureau of the Census, Washington, DC 20233. Phone: (301) 457-1214.

For additional information concerning the **questionnaire content**, contact Enrique Lamas (763-8578) in Housing and Household Economics Statistics Division, Bureau of the Census, Washington, DC 20233.

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ABSTRACT

Survey of Income and Program Participation (SIPP) 1990 Panel Wave 5 Educational Financing/Enrollment Topical Module Microdata File (Rerelease) and Wave 5 Topical Module Research File (Rerelease) [machine-readable data file] / conducted by the U.S. Bureau of the Census. Washington: The Bureau [producer and distributor], 1996.

Type of File:

Microdata; unit of observation is an individual.

Universe Description:

The universe is the resident population of the United States, excluding persons living in institutions and military barracks.

Subject-Matter Description:

The file contains data primarily from the topical module portion of the questionnaire. However, for purposes of matching persons to the core file, which was released separately, the beginning of the file contains identifying information as well as some basic demographic and social characteristics that are also contained in the core file. The identifying information includes sample unit, household address, and entry address identification. Demographic and social characteristics include age, sex, race (White; Black; American Indian, Eskimo, and Aleut; Asian or Pacific Islander; and Other), ethnic origin (23 categories including 7 Spanish origin categories), marital status, and education. Data in this topical module file include educational financing and enrollment.

The sample consists of 4 rotation groups, each interviewed in a different month from June to September 1991. For each group the reference period for reporting labor force activity and income is the four calendar months preceding the interview month.

SIPP is a longitudinal survey where each sampled household and each descendent household is reinterviewed at 4-month intervals for 6 interviews or "waves." This file contains the results of the fifth interview. Unique codes are included on each record to allow linking together the same persons from the preceding and subsequent waves.

Geographic Coverage:

United States. Codes are included for 41 individual States and the District of Columbia, **although the sample was not designed to produce State estimates.** Areas in the SIPP sample in nine other States are identified in three groups for confidentiality reasons. The file identifies a subsample of metropolitan residents, along with codes for selected metropolitan statistical areas (MSA's) and consolidated metropolitan statistical areas (CMSA's).

Technical Description:

File Structure: Each logical record for a sampled person includes information on the household and family of which the person was a part during each month of the reference period, as well as characteristics of the person and each source of income received during the period.

File Size: 58,726 logical records;

File 1 - 180 characters logical record length.

File 2 - 400 characters logical record length.

File Sort Sequence of Sample Units: Sampling unit identification number by entry address ID and person number within sampling unit.

Reference Materials:

Survey of Income and Program Participation (SIPP) 1990 Panel, Wave 5 Educational Financing/Enrollment Topical Module Microdata File (Rerelease) and Wave 5 Topical Module Research File (Rerelease) Technical Documentation. The documentation includes this abstract, the data dictionary, an index to the data dictionary, relevant code lists, a questionnaire facsimile, and general information relative to SIPP. One copy of the technical documentation accompanies each file order but also may be purchased separately for \$25 from Administrative and Customer Services Division, Customer Services, Bureau of the Census, Washington, D.C. 20233.

Interviewers' Manual (1985). Survey of Income and Program Participation. U.S. Department of Commerce, Bureau of the Census. The manual is available from Administrative and Customer Services Division, Customer Services, Bureau of the Census, Washington, D.C. 20233.

Survey of Income and Program Participation Users' Guide. The Users' Guide contains a general overview of the file as well as chapters on survey design and content, structure and use of cross-sectional files, linking waves and reliability of the data. A single copy accompanies each technical documentation or tape order. Additional copies are available from Customer Services, Administrative and Customer Services Division, Bureau of the Census, Washington, D.C. 20233.

Related Printed Reports:

Related printed reports include working papers, compilations of papers presented at annual meetings of the American Statistical Association, articles appearing in the *Journal of Economic and Social Measurement*, and reports in the P-70 series of the Current Population Reports. See the Users' Guide that accompanies the documentation for ordering information.

Related Machine-Readable Data Files:

SIPP files from all Waves of the 1984 through 1988 Panels along with Waves 1 through 6 (core only for Waves 1, 5, and 6) from the 1990 Panel and core files for Waves 1, 2, and 3 from the 1991 Panel, are available from Customer Services, Administrative and Customer Services Division, Bureau of the Census, Washington, D.C. 20233. An order form is on the following page for your convenience.

File Availability:

Survey of Income and Program (SIPP) 1990 Panel, Wave 5 Topical Module File is available on computer tape for \$175 at either 6250 or 1600 bpi; ASCII or EBCDIC, labeled or unlabeled. The file is also available on tape cartridges (IBM 3480 compatible) for the same price. A machine-readable dictionary is contained at the end of the file. The dictionary is also available separately on one tape reel for \$175. When ordering, please use the order form on the following page.

FILE INFORMATION

Matching Topical Module File with Core File

Since the core and topical module data are released as separate files it may be necessary to match the two files. The two files contain the following information for linking purposes.

Sample Unit ID (scrambled)	Race
Household Address ID	Sex
Item36B	MS(5)
Entry Address ID	PNSP(5)
Person Number	PNPT(5)
PP-Intvw	Higrade
Finalwgt(5)	Grd-Cmpl
RRP(5)	Ethnicity
Age(5)	

Geographic Coverage

State codes are shown except for nine States which are identified in three groups. A subsample of metropolitan residents is identified along with codes for selected metropolitan statistical areas (MSA's) and consolidated metropolitan statistical areas (CMSA's). **The sample was not designed to produce State or MSA/CMSA level estimates.** State codes are primarily useful in relating a respondent's reciprocity of benefits to thresholds which may vary from State to State. MSA/CMSA codes may be used in relating respondent characteristics with contextual variables.

Identification Number System

The SIPP identification scheme is designed to uniquely identify individuals in each wave, provide a means of linking the same individuals over time, and group individuals into households and families over time.

The various components of the identification scheme are listed below:

- Sample Unit Identification Number
- Address ID
- Entry Address ID
- Person Number

The sample unit identification number was created by scrambling together the PSU, segment, and serial numbers used for Census Bureau administrative purposes. This identifier is constructed the same way on each wave regardless of moves, to enable matching from wave to wave.

The two-digit address ID code identifies each household associated with the same sample unit identification number. The first digit of the address ID code indicates the wave in which that address was first assigned for interview. The second digit sequentially numbers multiple households that have the same serial number. The address ID code is 11 for all sample addresses that are the same as in Wave 1. As SIPP sample persons move to new addresses, new address ID codes are assigned. Any new address to which sample unit members moved during Wave 4 is numbered in the 40's.

The person ID is a five-digit number consisting of the two-digit entry address ID and a three-digit person number. Person numbers 101, 102, etc., are assigned in Wave 1; 201, 202, etc., are assigned to persons added to the roster in Wave 2, and so forth. This five-digit number is not changed or updated, regardless of moves.

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The sampling unit serial number and address ID code uniquely identifies each household in any given wave. The sampling unit serial number can link all households in subsequent waves back to the original Wave 1 household.

Topcoding of Income Variables

To protect against the possibility that a user might recognize the identity of a SIPP respondent with very high income, income from every source is "topcoded" so that no individual income amounts above \$100,000 are revealed. While the data dictionary indicates a topcode of \$33,332 for monthly income, this topcode will rarely be used. In most cases the monthly income is shown as an individual dollar amount of \$8,333, with \$8,333 actually representing "\$8,333 or more." (the \$100,000 annual income topcode is \$8,333 multiplied by 12 months). Individual monthly amounts above \$8333 may occasionally be shown if the respondent's income varied considerably from month to month, as long as the average does not exceed \$8,333. For example, if a respondents' income from a single job were concentrated in only one of the four reference months, a figure as high as \$33,332 could be shown. (Income from interest or property have lower topcodes).

Summary income figures on the person, family, and household records are simple sums of the components shown on the file after topcoding, and are not independently topcoded. Thus, a person with high income from several sources (jobs, businesses, property) could have aggregate monthly income well over the topcode for each source. Families and households with a number of high income members could theoretically have aggregate income shown well over \$100,000, through well below the \$1.5 million shown as the highest allowable value in the data dictionary.

The user is cautioned against trying to make much use of the occasional monthly figures above \$8,333, except in calculating aggregates or observing patterns across the 4-month period for a single individual, family, or household. Those units with higher monthly amounts shown are a biased sample of high income units, more likely to include units with income from multiple sources than other units with equally high aggregate income which comes from a single source.

GLOSSARY OF SELECTED TERMS

Absent 1 or more weeks. Absent 1 or more weeks means absent without pay from a job or business. Persons were absent without pay in a month if they were 'with a job' during the entire month, but were not at work at that job during at least 1 full week (Sunday through Saturday) during the month, and did not receive wages or a salary for any time during that week. Reasons for an unpaid absence include vacation, illness, layoff, bad weather, labor disputes, and waiting to start a new job.

Family household. A family household is a household maintained by a family; any unrelated persons (unrelated subfamily members and/or secondary individuals) who may be residing there are included. The number of family households is equal to the number of families. The count of family household members differs from the count of family members, however, in that the family household members include all persons living in the household, whereas family members include only the householder and his/her relatives.

Family. A family is a group of two or more persons (one of whom is the householder) related by birth, marriage, or adoption and residing together; all such persons (including related subfamily members) are considered members of one family.

Farm-nonfarm residence. The farm population refers to rural residents living on farms. Under this definition, a farm is any place in rural territory from which sales of crops, livestock, and other agricultural products amounted to \$1,000 or more during the previous 12-month period.

Full-time and part-time. The data on full- and part-time workers pertain to the number of hours a person usually worked per week during the weeks worked in the 4-month reference period of the survey. If the hours worked per week varied considerably, the respondent was asked to report an approximate average of the actual hours worked each week.

Persons 16 years old and over who reported usually working 35 or more hours each week during the weeks they worked are classified as 'full-time' workers; persons who reported that they usually worked fewer than 35 hours are classified as 'part-time' workers. The same definitions are used in the CPS.

Household. A household consists of all persons who occupy a housing unit. A house, an apartment or other group of rooms, or a single room is regarded as a housing unit when it is occupied or intended for occupancy as separate living quarters; that is, when the occupants do not live and eat with any other persons in the structure and there is either (1) direct access from the outside or through a common hall or (2) a kitchen or cooking equipment for the exclusive use of the occupants.

A household includes the related family members and all the unrelated persons, if any, such as lodgers, foster children, wards, or employees who share the housing unit. A person living alone in a housing unit or a group of unrelated persons sharing a housing unit as partners is also counted as a household. The count of households excludes group quarters. Examples of group quarters include rooming and boarding houses, college dormitories, and convents and monasteries.

Householder. Survey procedures call for listing first the person (or one of the persons) in whose name the home is owned or rented. If the house is owned jointly by a married couple, either the husband or the wife may be listed first, thereby becoming the reference person, or householder, to whom the relationship of the other household members is recorded. One person in each household is designated as the 'householder.' The number of householders, therefore, is equal to the number of households.

Layoff. In general, the word 'layoff' means release from a job because of slack work, material shortages, inventory taking, plant remodeling, installation of machinery, or other similar reasons. For this survey, persons were also on 'layoff' who did not have job but who responded that they has spent at least 1 week on layoff from a job and that they were available to accept a job.

In addition, persons were on 'layoff' in a given month if they were 16 years old or over and (a) were 'with a job' but 'absent without pay' from that job for at least 1 full week during that month, and (b) they responded that their main reason for being absent from their job or business was 'layoff.' 'On layoff' also includes a small number of persons who responded that they were waiting to report to a new wage and salary job that was to begin within 30 days. In other words, persons waiting to begin a new job are classified together with persons waiting to return to a job from which they have been laid off.

Looking for work. Persons who 'looked for work' in a given month are those who were 16 years old or over and (a) were without a job during at least 1 week during the month, (b) tried to get work or establish a business or profession in that week, and (c) were available to accept a job. Examples of jobseeking activities are (1) registering at a public or private employment office, (2) meeting with prospective employers, (3) investigating possibilities for starting a professional practice or opening a business, (4) placing or answering advertisements, (5) writing letters of application, and (6) being on a professional register.

The CPS uses a similar concept of 'looking for work.' The term 'unemployed' as used in the CPS includes persons who were looking for work in the reference week and those who were 'on layoff' or 'waiting to begin a new job in 30 days."

Low-Income Home Energy Assistance Program. Benefits from the Federally funded LIHEAP authorized by Title XXVI of the Omnibus Budget Reconciliation Act of 1981, or comparable assistance provided through State funded assistance programs, may be received in the form of direct payment to the household as reimbursement for heating or cooling expenses or paid directly to the fuel dealer or landlord.

Means-tested benefits. The term means-tested benefits refers to programs that require the income or assets (resources) of the individual or family be below specified guidelines in order to qualify for benefits. These programs provide cash and noncash assistance to the low-income population. The major sources of means-tested cash and noncash assistance are shown in Appendix A-3.

Medicaid. This term refers to the Federal-State program of medical assistance for low-income individuals and their families as provided for by Title XIX of the Social Security Act. The phrase 'Medicaid covered' refers to persons enrolled in the Medicaid program, regardless of whether they actually utilized any Medicaid covered health care services during the survey reference period.

Medicare. This term refers to the Federal Health Insurance Program for the Aged and Disabled as provided for by Title XVIII of the Social Security Act. The phrase 'Medicare covered' refers to persons enrolled in the Medicare program, regardless of whether they actually utilized any Medicare covered health care services during the survey reference period.

Monthly income. The monthly income estimates for households are based on the sum of the monthly income received by each household member age 15 years old or over.

Cash income includes all income received from any of the sources listed in Appendix B-1. Rebates, refunds, loans, and capital gain or loss amounts from the sale of assets, and interhousehold transfers of cash such as allowances are not included. Accrued interest on Individual Retirement Accounts, KEOUGH retirement plans, and U.S. Savings bonds are also excluded. This definition differs somewhat from that used in the annual income reports based on the March CPS Income supplement questionnaire. These data, published in the Consumer Income Series, P-60, are based only on income received in a regular or periodic manner and, therefore, exclude lump-sum or one-time payments such as inheritances and insurance settlements. The March CPS income definition, however, does exclude the same income sources excluded by SIPP.

The income amounts represent amounts actually received during the month, before deductions for income and payroll taxes, union dues, Part B Medicare premiums, etc.

The SIPP income definition includes three types of earnings: wages and salary, nonfarm self-employment, and farm self-employment. The definition of nonfarm self-employment and farm self-employment is not based on the net difference between gross receipts or sales and operating expenses, depreciation, etc. The monthly amounts for these income types are based on the salary or other income received from the business by the owner of the business or farm during the 4-month reference period.

The Bureau of Labor Statistics publishes quarterly averages for an earnings concept called 'usual weekly earnings' for employed wage and salary workers. The concept differs from the SIPP earnings concept since it is based on usual, not actual earnings, excludes the self-employed, and excludes earnings from secondary jobs.

While the income amounts from most sources are recorded monthly for the 4-month reference period, property income amounts, interest, dividends, rental income, etc., were recorded as totals for the 4-month period. These totals were distributed equally between months of the reference period for purposes of calculating monthly averages.

Nonfamily household. A nonfamily household is a household maintained by a person living alone or with nonrelatives only.

Persons of Spanish origin. Persons of Spanish origin were determined on the basis of a question that asked for self-identification of the person's origin or descent. Respondents were asked to select their origin (or the origin of some other household member) from a 'flash card' listing ethnic origins. Persons of Spanish origin, in particular, were those who indicated that their origin was Mexican, Puerto Rican, Cuban, Central or South American, or some other Spanish origin. It should be noted that persons of Spanish origin may be of any race.

Population coverage. The estimates are restricted to the civilian noninstitutional population of the 50 States and members of the Armed Forces living off post or with their families on post.

Race. The population is divided into groups on the basis of race: White; Black; American Indian, Eskimo, or Aleut; Asian or Pacific Islander; and 'other races.'

Special Supplemental Food Program for women, Infants, and Children (WIC). Benefits are received in the form of vouchers that are redeemed at retail stores for specific supplemental nutritious foods. Eligible low-income recipients are infants and children up to age five and pregnant, postpartum, and breastfeeding women.

Unemployment compensation. This term refers to cash benefits paid to unemployed workers through a State or local unemployment agency. These include all benefits paid under the Federal-State unemployment insurance program as established under the Social Security Act, as well as those benefits paid to State and local government employees, Federal civilian employees, and veterans.

With a Job. Persons are classified 'with a job' in a given month if they were 16 years old or over and, during the month, either (a) worked as paid employees or worked in their own business or profession or on their own farm or worked without pay in a family business or farm or (b) were temporarily absent from work either with or without pay. In general, the word 'job' implies an arrangement for regular work for pay where payment is in cash wages or salaries, at piece rates, in tips, by commission, or in kind (meals, living quarters, supplies received). 'Job' also includes self-employment at a business, professional practice, or farm. A business is defined as an activity which involves the use of machinery or equipment in which money has been invested or an activity requiring an office or 'place of business' or an activity which requires advertising; payment may be in the form of profits or fees.

The Current Population Survey (CPS), the official source of labor force statistics for the Nation, uses the same definition for a job or business. The term 'with a job,' however, should not be confused with the term 'employed' as used in the CPS. 'With a job' includes those who were temporarily absent from a job because of layoff and those waiting to begin a new job in 30 days; in the CPS these persons are not considered 'employed.' See 'Worked each week' below.

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With labor force activity. The term 'with labor force activity' includes all persons with a job (as defined above) and those looking for work or on layoff from a job for at least 1 week during a given month. Conversely, those persons 'with no labor force activity' had no job, were not on layoff from a job and made no effort to find a job during the month.

Work disability. Persons were classified as having a work disability if they were identified by the respondent as having a physical, mental, or other health condition that limits the kind or amount of work they can do.

Worked each week. Persons 'worked each week' in a month if, for the entire month, they were 'with a job' and not 'absent without pay' from the job. In other words, a person worked each week in any month when they were (a) on the job the entire month, or (b) they received wages or a salary for all weeks in the month, whether they were on the job or not. Persons also worked each week if they were self-employed and spent time during each week of the month at or on behalf of the business or farm they owned, as long as they received or expected to receive profit or fees for their work.

In the CPS, the concept at 'work' includes those persons who spent at least 1 hour during the reference week at their job or business. In the CPS, however, 'at work' does not include persons who were temporarily absent from their jobs during the entire reference week on paid vacation, sick leave, etc. In SIPP, 'worked each week' does include persons on paid absences.

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First Business is a Sole Proprietorship	TM8126	116
First Business Owned Entirely by Household Members	TM8112	97
First Business Percentage Owned by Household Members	TM8114	98
First Business Percentage Owned by Respondent	TM8116	100
First Business Primary Location	TM8020	87
First Business Type	TM8018	85
Form 1040 Filed	TM9430	331
Grade Attended Was Completed, Highest	GRDCMPL	62
Grade or Year of School Attended, Highest	HIGRADE	60
Gross Receipts of First Business	TM8118	102
Gross Receipts of Second Business	TM8168	174
Household Interview Status Code	ITEM36B	22
Household Members Part Owners of First Business	TM8208	124
Household Members Part Owners of Second Business	TM8258	196
ID Number of First Business	TM8010	77

SIPP 1990 WAVE 5 TOPICAL MODULE RESEARCH FILE (RERELEASE)

<u>Description</u>	<u>Variable</u>	<u>Position</u>
ID Number of Second Business	TM8060	149
Income from First Business for First Co-Owner.....	TM8214	130
Income from First Business for Second Co-Owner.....	TM8220	139
Income from Second Business for First Co-Owner.....	TM8264	202
Income from Second Business for Second Co-Owner	TM8270	211
Income Received by Other Household Owners of First Business.....	TM8210	125
Income Received by Other Household Owners of Second Business	TM8260	197
Individual Retirement Account (IRA)	TM9330	224
Individual Retirement Account Contribution Amount	TM9334	228
Individual Retirement Account Contributions	TM9332	226
Individual Retirement Account Total Earnings.....	TM9340	240
Individual Retirement Account Withdrawal Amount	TM9338	235
Individual Retirement Account Withdrawal Made	TM9336	233
Industry Code for First Business	TMIND1	74
Industry Code for Second Business.....	TMIND2	146
Interview Status of Spouse	TM9488	381
Interviewed in Waves 1-4	TM8002	70
IRA Asset Type - Certificates of Deposit or Other Savings Certificate	TM9342	245
IRA Asset Type - Don't Know.....	TM9356	252
IRA Asset Type - Money Market Funds	TM9344	246
IRA Asset Type - Municipal or Corporate Bonds	TM9348	248
IRA Asset Type - Other Assets.....	TM9354	251
IRA Asset Type - Stocks or Mutual Fund Shares.....	TM9352	250
IRA Asset Type - U S Government Securities	TM9346	247
IRA Asset Type - U S Savings Bonds	TM9350	249
Items With Data on the Annual Income and Retirement Record.....	TMEBCNT	291
Items With Data on the Taxes Record.....	TMPICNT	396
Keogh Account.....	TM9358	253
Keogh Account Amount of Withdrawals	TM9366	264
Keogh Account Contributions	TM9360	255
Keogh Account Contributions Amount	TM9362	257
Keogh Account Total Earnings.....	TM9368	269
Keogh Account Withdrawals.....	TM9364	262
Keogh Asset Types - Certificates of Deposit or Other Savings Certificates	TM9370	274
Keogh Asset Types - Don't Know	TM9384	281
Keogh Asset Types - Money Market Funds	TM9372	275
Keogh Asset Types - Municipal or Corporate Bonds	TM9376	277
Keogh Asset Types - Other Assets.....	TM9382	280
Keogh Asset Types - Stocks or Mutual Shares.....	TM9380	279
Keogh Asset Types - U S Government Securities.....	TM9374	276
Keogh Asset Types - U S Savings Bonds.....	TM9378	278
Marital Status.....	MS	53
Monthly Interview Status for Persons.....	PPMIS1:5	25
Net Federal Tax Liability.....	TM9464	365
Net Income Estimate Callback for First Business.....	TM8206	123
Net Income Estimate Callback for Second Business	TM8256	195
Net Income From First Business	TM8202	117
Net Income From Other Businesses in 1990	TM8278	218
Net Income From Second Business.....	TM8252	189
Number of Businesses Owned and Operated During 1990	TM8006	72
Number of Current Household Members.....	TM9400	304
Person Index From Core.....	PINX	18
Person Number	PNUM	32

<u>Description</u>	<u>Variable</u>	<u>Position</u>
Person Number of Other Owner of First Business	TM8014	80
Person Number of Other Owner of Second Business	TM8064	152
Person Number of Parent	PNPT	57
Person Number of Spouse	PNSP	54
Person Weight	FINALWGT	35
Person's Interview Status	INTVW	24
Property Tax Amount	TM9498	390
Property Taxes Paid Jointly	TM9492	383
Property Taxes Paid Jointly - First Person Number	TM9494	384
Property Taxes Paid Jointly - Second Person Number	TM9496	387
Property Taxes Paid on Residence	TM9490	382
Race	RACE	52
Receipts or Expenses Callback for 2nd Business	TM8174	187
Receipts or Expenses Callback for First Business	TM8124	115
Receipts/Expenses of 2nd Business Collected	TM8172	186
Receipts/Expenses of First Business Collected	TM8122	114
Relationship of First Dependent to Respondent	TM9416	322
Relationship to Reference Person	RRP	47
Relationship to Second Dependent to Respondent	TM9418	323
Rotation Group	ROTATION	15
Sample Unit Identifier	ID	6
Schedule A Filed	TM9432	332
Schedule D, Capital Gains and Losses	TM9458	352
Second Business Co-Owner, First Person Number	TM8262	199
Second Business Co-Owner, Second Person Number	TM8268	208
Second Business Co-Owner-First Person Number	TM8158	163
Second Business Co-Owner-Second Person Number	TM8160	166
Second Business Co-Owners are Household Members	TM8156	161
Second Business ID Number for Other Owner	TM8066	155
Second Business Information Already Obtained	TM8062	151
Second Business is a Sole Proprietorship	TM8154	160
Second Business is a Sole Proprietorship	TM8176	188
Second Business Listed	TM8274	145
Second Business Owned Entirely by Household Members	TM8162	169
Second Business Percentage Owned by Household Members	TM8164	170
Second Business Type	TM8068	157
Second Business, Percentage Owned by Respondent	TM8166	172
Second Business, Primary Location	TM8070	159
Sequence Number of Sample Unit	SUSEQNUM	1
Sex	SEX	51
Tax Credit Amount for Child and Dependent Care Expense	TM9448	340
Tax Credit Amount for the Elderly or Disabled	TM9452	347
Tax Credit for Child and Dependent Care Expense	TM9446	339
Tax Credit for the Elderly or Disabled	TM9450	346
Tax Information Obtained Already	TM9390	297
Tax Itemized Deductions Amount	TM9434	333
Tenure of Residence	TM9486	380
Three or More Businesses Listed	TM8276	217
Thrift Plan Amount of Contribution	TM9388	285
Thrift Plan Participation	TM9386	283
Total Expenses of First Business	TM8120	108
Total Expenses of Second Business	TM8170	180
Wave Number Within Panel	WAVE	65

**ALPHABETICAL VARIABLE INDEX:
1990 WAVE 5 TOPICAL MODULE MICRODATA FILE**

Educational Financing/Enrollment (Rerelease)

<u>Variable</u>	<u>Description</u>	<u>Position</u>
ADDID	Address Identification	20
AGE	Age as of Last Birthday - Edited and Imputed	48
ENTRY	Address Identification - Edited Entry	30
ETHNICTY	Ethnic Origin	63
FILLER	Filler	66
FINALWGT	Weight, Second Stage Factor	35
GRD-CMPL	Grade Attended Was Completed, Highest	62
HIGRADE	Grade or Year of School Attended, Highest	60
ID	Sample unit identifier	6
INTVW	Interview Status, Person's	24
ITEM36B	Interview Status Code	22
MS	Marital Status	53
PINX	Index From Core, Person	18
PNPT	Person Number of Parent	57
PNSP	Person Number of Spouse	54
PNUM	Person Number, Edited	32
PP-MIS(5)	Monthly person's interview status	25
RACE	Race - Edited and Imputed	52
ROTATION	Rotation	15
RRP	Relationship to Reference Person, Edited	47
SEX	Sex - Edited and Imputed	51
STATE	Fips State code from the MST/GRIN file	16
SUSEQNUM	Sequence number of sample unit primary sort key	1
TM-IFC1:18	Educational Financing Imputation Flags	158
TM-IFC1:18	Imputation Flags for Educational Financing	158
TM9610	School Enrollment Status	69
TM9612	Grade or Level in Which Enrolled	70
TM9614	Enrolled in Elementary or High School	72
TM9616	Enrolled in Public School	73
TM9618	Cost of Tuition and Fees, Total	74
TM9620	Cost of Books and Supplies, Total	79
TM9622	Live Away From Home While Attending School	83
TM9624	Cost for Room and Board, Total	84
TM9626	Educational Assistance Received	89
TM9626	Receipt of Educational Assistance	89
TM9628	GI Bill Educational Assistance	91
TM9630	GI Bill, Amount Received From	92
TM9632	Veteran's Educational Assistance Program	96
TM9634	Veteran's Programs, Amount Received From	97
TM9636	College Work Study Program	102
TM9638	College Work Study, Amount Received From	103
TM9640	Pell Grant Educational Assistance	107
TM9642	Pell Grant, Amount Received From	108
TM9644	Supplement Educational Opportunity Grant(SEOG)	112
TM9646	SEOG, Amount Received From	113
TM9648	National Direct Student Loan	117
TM9650	National Direct Student Loan, Amount Received From	118
TM9652	Guaranteed Student Loan	122
TM9654	Guaranteed Student Loan, Amount Received From	123

**SIPP 1990 WAVE 5 EDUCATIONAL FINANCING/ENROLLMENT
TOPICAL MODULE MICRODATA FILE (RERELEASE)**

<u>Variable</u>	<u>Description</u>	<u>Position</u>
TM9656	JTPA Training Educational Assistance	128
TM9658	JTPA Training Program, Amount Received From	129
TM9660	Employer Educational Assistance	133
TM9662	Employer Educational Assistance, Amount Received From	134
TM9664	Fellowship or Scholarship Assistance	139
TM9666	Fellowship or Scholarship, Amount Received From	140
TM9668	Tuition Reduction Educational Assistance	145
TM9670	Tuition Reduction, Amount Received From	146
TM9672	Educational Assistance, Other Type of	150
TM9674	Educational Assistance From Other Source, Amount of	151
TMETCNT	Items With Data on This Record, Number of	156
TMTEDFIN	Educational Assistance, Total Amount of	176
WAVE	Wave Number Within Panel	65

**ALPHABETICAL VARIABLE INDEX:
1990 WAVE 5 TOPICAL MODULE RESEARCH FILE (RERELEASE)**

<u>Variable</u>	<u>Description</u>	<u>Position</u>
ADDID	Current Address Identification	20
AGE	Age as of Last Birthday	48
ENTRY	Entry Address Identification	30
ETHNICTY	Ethnic Origin	63
FINALWGT	Person Weight	35
GRDCMPL	Grade Attended Was Completed, Highest	62
HIGRADE	Grade or Year of School Attended, Highest	60
ID	Sample Unit Identifier	6
INTVW	Person's Interview Status	24
ITEM36B	Household Interview Status Code	22
MS	Marital Status	53
PINX	Person Index From Core	18
PNPT	Person Number of Parent	57
PNSP	Person Number of Spouse	54
PNUM	Person Number	32
PPMIS1:5	Monthly Interview Status for Persons	25
RACE	Race	52
ROTATION	Rotation Group	15
RRP	Relationship to Reference Person	47
SEX	Sex	51
STATE	FIPS State Code	16
SUSEQNUM	Sequence Number of Sample Unit	1
TM8000	Business Ownership During Panel	69
TM8002	Interviewed in Waves 1-4	70
TM8004	Business Owned and Operated During Calendar Year 1990	71
TM8006	Number of Businesses Owned and Operated During 1990	72
TM8010	ID Number of First Business	77
TM8012	First Business Information Already Obtained	79
TM8014	Person Number of Other Owner of First Business	80
TM8016	First Business ID Number For Other Owner	83
TM8018	First Business Type	85
TM8020	First Business Primary Location	87
TM8060	ID Number of Second Business	149
TM8062	Second Business Information Already Obtained	151
TM8064	Person Number of Other Owner of Second Business	152
TM8066	Second Business ID Number for Other Owner	155
TM8068	Second Business Type	157
TM8070	Second Business, Primary Location	159
TM8104	First Business is a Sole Proprietorship	88
TM8106	First Business Co-Owners are Household Members	89
TM8108	First Business Co-Owner First Person Number	91
TM8110	First Business Co-Owner Second Person Number	94
TM8112	First Business Owned Entirely by Household Members	97
TM8114	First Business Percentage Owned by Household Members	98
TM8116	First Business Percentage Owned by Respondent	100
TM8118	Gross Receipts of First Business	102
TM8120	Total Expenses of First Business	108
TM8122	Receipts/Expenses of First Business Collected	114
TM8124	Receipts or Expenses Callback for First Business	115
TM8126	First Business is a Sole Proprietorship	116
TM8154	Second Business is a Sole Proprietorship	160

SIPP 1990 WAVE 5 TOPICAL MODULE RESEARCH FILE (RERELEASE)

<u>Variable</u>	<u>Description</u>	<u>Position</u>
TM8156	Second Business Co-Owners are Household Members	161
TM8158	Second Business Co-Owner-First Person Number	163
TM8160	Second Business Co-Owner-Second Person Number	166
TM8162	Second Business Owned Entirely by Household Members	169
TM8164	Second Business Percentage Owned by Household Members	170
TM8166	Second Business, Percentage Owned by Respondent	172
TM8168	Gross Receipts of Second Business	174
TM8170	Total Expenses of Second Business	180
TM8172	Receipts/Expenses of 2nd Business Collected	186
TM8174	Receipts or Expenses Callback for 2nd Business	187
TM8176	Second Business is a Sole Proprietorship	188
TM8202	Net Income From First Business	117
TM8206	Net Income Estimate Callback for First Business	123
TM8208	Household Members Part Owners of First Business	124
TM8210	Income Received by Other Household Owners of First Business	125
TM8212	First Business Co-Owner, First Person Number	127
TM8214	Income from First Business for First Co-Owner	130
TM8218	First Business Co-Owner, Second Person Number	136
TM8220	Income from First Business for Second Co-Owner	139
TM8252	Net Income From Second Business	189
TM8256	Net Income Estimate Callback for Second Business	195
TM8258	Household Members Part Owners of Second Business	196
TM8260	Income Received by Other Household Owners of Second Business	197
TM8262	Second Business Co-Owner, First Person Number	199
TM8264	Income from Second Business for First Co-Owner	202
TM8268	Second Business Co-Owner, Second Person Number	208
TM8270	Income from Second Business for Second Co-Owner	211
TM8274	Second Business Listed	145
TM8276	Three or More Businesses Listed	217
TM8278	Net Income From Other Businesses in 1990	218
TM9330	Individual Retirement Account (IRA)	224
TM9332	Individual Retirement Account Contributions	226
TM9334	Individual Retirement Account Contribution Amount	228
TM9336	Individual Retirement Account Withdrawal Made	233
TM9338	Individual Retirement Account Withdrawal Amount	235
TM9340	Individual Retirement Account Total Earnings	240
TM9342	IRA Asset Type - Certificates of Deposit or Other Savings Certificate	245
TM9344	IRA Asset Type - Money Market Funds	246
TM9346	IRA Asset Type - U S Government Securities	247
TM9348	IRA Asset Type - Municipal or Corporate Bonds	248
TM9350	IRA Asset Type - U S Savings Bonds	249
TM9352	IRA Asset Type - Stocks or Mutual Fund Shares	250
TM9354	IRA Asset Type - Other Assets	251
TM9356	IRA Asset Type - Don't Know	252
TM9358	Keogh Account	253
TM9360	Keogh Account Contributions	255
TM9362	Keogh Account Contributions Amount	257
TM9364	Keogh Account Withdrawals	262
TM9366	Keogh Account Amount of Withdrawals	264
TM9368	Keogh Account Total Earnings	269
TM9370	Keogh Asset Types - Certificates of Deposit or Other Savings Certificates	274
TM9372	Keogh Asset Types - Money Market Funds	275
TM9374	Keogh Asset Types - U S Government Securities	276
TM9376	Keogh Asset Types - Municipal or Corporate Bonds	277

<u>Variable</u>	<u>Description</u>	<u>Position</u>
TM9378	Keogh Asset Types - U S Savings Bonds.....	278
TM9380	Keogh Asset Types - Stocks or Mutual Shares.....	279
TM9382	Keogh Asset Types - Other Assets	280
TM9384	Keogh Asset Types - Don't Know	281
TM9385	Employer During Panel	282
TM9386	Thrift Plan Participation	283
TM9388	Thrift Plan Amount of Contribution	285
TM9390	Tax Information Obtained Already.....	297
TM9392	Federal Income Tax Return Filed.....	298
TM9394	Federal Tax Form Copy of Worksheet	299
TM9396	Federal Tax Form Filing Status.....	300
TM9398	Federal Tax Form Number of Exemptions	302
TM9400	Number of Current Household Members.....	304
TM9402	Federal Tax Form Exemptions - First Person Number	305
TM9404	Federal Tax Form Exemptions - Second Person Number	308
TM9406	Federal Tax Form Exemptions - Third Person Number	311
TM9408	Federal Tax Form Exemptions - Fourth Person Number	314
TM9410	Federal Tax Form Exemptions - Fifth Person Number	317
TM9412	Federal Tax Form Exemptions - None in Household Except Self.....	320
TM9414	Federal Tax Exemptions for Persons Outside of Home	321
TM9416	Relationship of First Dependent to Respondent	322
TM9418	Relationship to Second Dependent to Respondent	323
TM9420	Federal Tax Type of Form Filed.....	324
TM9422	Federal Tax Schedule A, Itemized Deductions	326
TM9424	Federal Tax Schedule D, Capital Gains and Losses.....	328
TM9428	Federal Tax Form or Worksheet Copy	330
TM9430	Form 1040 Filed.....	331
TM9432	Schedule A Filed.....	332
TM9434	Tax Itemized Deductions Amount.....	333
TM9446	Tax Credit for Child and Dependent Care Expense.....	339
TM9448	Tax Credit Amount for Child and Dependent Care Expense.....	340
TM9450	Tax Credit for the Elderly or Disabled.....	346
TM9452	Tax Credit Amount for the Elderly or Disabled.....	347
TM9458	Schedule D, Capital Gains and Losses	352
TM9460	Capital Gains or Losses From Sale or Exchange of Personal Assets.....	353
TM9462	Adjusted Gross Income.....	359
TM9464	Net Federal Tax Liability.....	365
TM9466	Adjusted Gross Income Amount.....	371
TM9472	Earned Income Credit Claim.....	372
TM9474	Earned Income Credit Amount Claimed.....	374
TM9486	Tenure of Residence	380
TM9488	Interview Status of Spouse	381
TM9490	Property Taxes Paid on Residence	382
TM9492	Property Taxes Paid Jointly	383
TM9494	Property Taxes Paid Jointly - First Person Number.....	384
TM9496	Property Taxes Paid Jointly - Second Person Number	387
TM9498	Property Tax Amount	390
TMEBCNT	Items With Data on the Annual Income and Retirement Record.....	291
TMIND1	Industry Code for First Business.....	74
TMIND2	Industry Code for Second Business.....	146
TMPICNT	Items With Data on the Taxes Record	396
WAVE	Wave Number Within Panel	65

HOW TO USE THE DATA DICTIONARY

The Data Dictionary describes the contents and record layout of the public-use computer tape file. The first line of each data item description gives the data name, size of the data field, and the begin position of the field.

The next few lines contain descriptive text and any applicable notes. Categorical value codes and labels are given where needed. Comment notes marked by an (*) are provided throughout. Comments should be removed from the machine-readable version of the data dictionary before using it to help access the data file.

Data. Alphabetic, numeric, and the special character (-). No other special characters are used. It may be a mnemonic such as "STATE" or "SE1-OCC", or a sequential identifier such as "SC1176" or "WS-IMP01". Data item names are unique throughout the entire file.

Size. Numeric. The size of a data item is given in characters. Indication of implied decimal places is provided in notes.

Begin. Numeric. Contains the location in the data record of the first character position of the data item field.

The first line of each data item description begins with the character "D" (left-justified, two characters). The "D" flag indicates lines in the data dictionary containing the name, size, relative begin and begin position of each data item. This information (in machine-readable form) can be used to help access the data file. The line beginning with the character "U" describes the universe for that item. Lines containing categorical value codes and labels follow next and begin with the character "V". The special character (.) denotes the start of the value labels. Two examples of data item descriptions follow:

```
D SC1218  1 2805
  What was the main reason ... could
  not take a job during those weeks
U Persons 15 years old or older
V   0 .Not in universe
V   1 .Already had a job
V   2 .Temporary illness
V   3 .School
V   4 .Other

D RR3064  2 3760
  Railroad retirement sends out two types
  of checks; which color check does ...
  receive.
U Persons age 15 years or older receiving
  railroad retirement
V  -1 .DK
V   00 .Not in universe
V   01 .Blue
V   02 .Buff
V   03 .Direct deposit
V   04 .Other
```


**SIPP 1990 WAVE 5 EDUCATIONAL FINANCING/ENROLLMENT
TOPICAL MODULE MICRODATA FILE (RERELEASE)
DATA DICTIONARY**

DATA	SIZE	BEGIN	
D SUSEQNUM	5	1	(00001:32000)
			Sequence number of sample unit primary sort key
D ID	9	6	(000000000: 999999999)
			Sample unit identifier this identifier is created by scrambling together the PSU, segment and serial of the original sample address. It may be used in matching sample units from different waves
D ROTATION	1	15	(1:4)
			Rotation
D STATE	2	16	(00:63)
			Fips State code from the MST/GRIN file
V	01		.Alabama
V	04		.Arizona
V	05		.Arkansas
V	06		.California
V	08		.Colorado
V	09		.Connecticut
V	10		.Delaware
V	11		.District of Columbia
V	12		.Florida
V	13		.Georgia
V	15		.Hawaii
V	17		.Illinois
V	18		.Indiana
V	20		.Kansas
V	21		.Kentucky
V	22		.Louisiana
V	24		.Maryland
V	25		.Massachusetts
V	26		.Michigan
V	27		.Minnesota
V	28		.Mississippi
V	29		.Missouri
V	31		.Nebraska
V	32		.Nevada
V	33		.New Hampshire
V	34		.New Jersey
V	35		.New Mexico
V	36		.New York
V	37		.North Carolina
V	39		.Ohio
V	40		.Oklahoma
V	41		.Oregon
V	42		.Pennsylvania
V	44		.Rhode Island
V	45		.South Carolina
V	47		.Tennessee
V	48		.Texas
V	49		.Utah
V	51		.Virginia
V	53		.Washington
V	54		.West Virginia
V	55		.Wisconsin
V	61		.Maine,Vermont
V	62		.Iowa,North Dakota,South Dakota
V	63		.Alaska,Idaho,Montana,Wyoming
D PINX	2	18	(1:60)
			Person index from core

DATA	SIZE	BEGIN	
D ADDID	2	20	(0:89)
			Address ID. - this field differentiates households within the same PSU, segment and serial, that is, households which originate out of an original sample household
U All households			
D ITEM368	2	22	(0:26,28:28)
			Control card item 368 - interview status code
U All households			
V	01		.Interviewed
Type A noninterview			
V	02		.No one home
V	03		.Temporarily absent
V	04		.Refused
V	05		.Unable to locate
V	06		.Other Type A
Type B noninterview (Wave 1)			
V	09		.Vacant
V	10		.Occupied by persons with URE
V	11		.Unfit or to be demolished
V	12		.Under construction, not ready
V	13		.Converted to temporary .business or storage
V	14		.Unoccupied site for mobile .home, trailer, or tent
V	15		.Permit granted, construction .not started
V	16		.Other Type B
Type B noninterview (Wave 2+)			
V	16		.Entire hh institutionalized or .temporarily ineligible
Type C noninterview (Wave 1)			
V	17		.Demolished
V	18		.House or trailer moved
V	19		.Converted to permanent .business or storage
V	20		.Merged
V	21		.Condemned
V	22		.OtherType C
Type C noninterview (Wave 2+)			
V	22		.Deleted (sample adjustment, .error)
V	23		.Entire household deceased, .moved out of country, or .living in armed forces .barracks
Type D noninterview (Wave 2+)			
V	24		.Moved, address unknown
V	25		.Moved within country beyond .limit
V	26		.All sample persons relisted .on new control card (s)
V	28		.Merged hhlds across panels
D INTWV	1	24	(0:4)
			Person's interview status
U All persons, including children			
V	0		.Not applicable (children .under 15)
V	1		.Interview (self)
V	2		.Interview (proxy)
V	3		.Noninterview - type Z refusal
V	4		.Noninterview - type Z other

**SIPP 1990 WAVE 5 EDUCATIONAL FINANCING/ENROLLMENT
TOPICAL MODULE MICRODATA FILE (RERELEASE)**

DATA SIZE BEGIN

D PP-MIS(5) 5 25 (1:2)
Monthly person's interview status
U All persons, including children
V 00001 .Interview
V 00002 .Non-interview

D ENTRY 2 30 (11:89)
Edited entry address ID
address of the household that this
person belonged to at the time this
person first became part of the sample
U All persons, including children

D PNUM 3 32 (101:899)
Edited person number
U All persons, including children

D FINALWGT 12 35
'Stage1wt' * second stage factor.
U All persons, including children

D RRP 1 47 (0:7)
Edited relationship to reference person
U All persons, including children
V 0 .Not a sample person in this
.month
V 1 .Household reference person,
.living with relatives
V 2 .Household reference person
.living alone or with only non-
.relatives (primary individual)
V 3 .Spouse of household reference
.person
V 4 .Child of household reference
.person
V 5 .Other relative of household
.reference person
V 6 .Non-relative of household
.reference person but related
.to others in the household -
.member of an unrelated sub
.family (secondary)
V 7 .Non-relative of household
.reference person and not
.related to anyone else in the
.household (secondary
.individual)

D AGE 3 48 (0:120)
Edited and imputed age as of last
birthday.
U All persons, including children
V 000 .Less than 1 full year
V 001 .1 year etc.

D SEX 1 51 (1:2)
Sex of this person
edited and imputed
U All persons, including children
V 1 .Male
V 2 .Female

D RACE 1 52 (1:4)
Race of this person
edited and imputed
U All persons, including children
V 1 .White
V 2 .Black
V 3 .American Indian, Eskimo or
.Aleut
V 4 .Asian or Pacific Islander

DATA SIZE BEGIN

D MS 1 53 (0:6)
Marital status.
If a persons marital status changed
during any month, the marital status
shown is the status maintained for
the greatest part of the month - edited
and imputed
U Persons 15 years old or older
V 0 .Not a sample person in this
.month
V 1 .Married, spouse present
V 2 .Married, spouse absent
V 3 .Widowed
V 4 .Divorced
V 5 .Separated
V 6 .Never married

D PNSP 3 54 (0:999)
Person number of spouse.
U Persons 15 years old or older
V 000 .Not a sample person in this
.month
V 999 .Not applicable

D PNPT 3 57 (0:999)
Person number of parent.
U Persons 15 years old or older
V 000 .Not a sample person in this
.month
V 999 .Not applicable

D HIGRADE 2 60 (0:26)
What is the highest grade or year of
regular school this person attended ?
U Persons 15 years old or older
V 00 .Not applicable if under 15,
Did not attend or attended
only kindergarten
V 01-08 .Elementary
V 09-12 .High school
V 21-26 .College

D GRD-CMPL 1 62 (0:2)
Did he/she complete that grade
U Persons 15 years old or older
V 0 .Not applicable
V 1 .Yes
V 2 .No

D ETHNICITY 2 63 (1:39)
Ethnic origin
U All persons, including children
V 01 .German
V 02 .English
V 03 .Irish
V 04 .French
V 05 .Italian
V 06 .Scottish
V 07 .Polish
V 08 .Dutch
V 09 .Swedish
V 10 .Norwegian
V 11 .Russian
V 12 .Ukrainian
V 13 .Welsh
V 14 .Mexican-American
V 15 .Chicano
V 16 .Mexican
V 17 .Puerto Rican
V 18 .Cuban
V 19 .Central or South American
. (Spanish speaking)
V 20 .Other Spanish

DATA DICTIONARY

DATA SIZE BEGIN
 V 21 .Afro-American (Black or Negro)
 V 30 .Another group not listed
 V 39 .Don't know

D WAVE 1 65 (5:5)
 Wave of the panel

D FILLER 3 66 (000:000)
 Filler

 * Part C - Education and Training *

D TM9610 1 69 (0:2)
 Was ... enrolled in school anytime during the past year? (Include any regular school, such as elementary, high school, or college, or any vocational, technical or business school.)

V 0 .Not applicable
 V 1 .Yes
 V 2 .No - end of interview

D TM9612 2 70 (0:12)
 At what level or grade was ... enrolled (If enrolled at more than one level in the past year, check level in which greatest amount of time was spent.)

V 00 .Not applicable
 V 01 .Elementary grades 1-8
 V 02 .High school grades 9-12
 V 03 .College year 1
 V 04 .College year 2
 V 05 .College year 3
 V 06 .College year 4
 V 07 .College year 5
 V 08 .College year 6+
 V 09 .Vocational school
 V 10 .Technical school
 V 11 .Business school
 V 12 .Other or Dk

D TM9614 1 72 (0:2)
 Check item T37 was ... enrolled in elementary school or high school?

V 0 .Not applicable
 V 1 .Yes
 V 2 .No - skip to TM9618

D TM9616 1 73 (0:2)
 Was ... enrolled in a public school?

V 0 .Not applicable
 V 1 .Yes - end of interview
 V 2 .No

D TM9618 5 74 (-3:99999)
 During the past year what was the total cost of ...'s tuition and fees?

 * Total cost of tuition and fees *
 * 1) shows actual amounts between \$0 *
 * and \$3999 *
 * 2) recodes amounts greater than \$3999 *

V 00000 .Not applicable
 V 1-3999 .Dollars, tuition fees
 V 04500 . \$4000 - 4999
 V 05500 . \$5000 - 5999
 V 06500 . \$6000 - 6999
 V 07000 . \$7000 +

DATA SIZE BEGIN
 D TM9620 4 79 (-3:9999)
 What was the total cost of ...'s books and supplies?

V 0000 .Not applicable
 V 1-9999 .Dollars in school costs
 V -001 .Dk
 V -003 .None

D TM9622 1 83 (0:2)
 Did ... live away from home while attending school?

V 0 .Not applicable
 V 1 .Yes
 V 2 .No - skip to 9626

D TM9624 5 84 (-3:99999)
 What was the total cost for room and board while away at school?

V 00000 .Not applicable
 V 1-99999 .Dollars in school costs
 V -0001 .Dk

 * The next twenty-five fields *
 * (TM9626-TM9674) are possible res- *
 * ponses to the question: *
 * please look at this card and tell *
 * me if ... received any of these types *
 * of educational assistance during the *
 * past year and how much did ... receive? *

D TM9626 2 89 (-3:0)
 V 00 .Not applicable
 V -3 .None - end of interview

D TM9628 1 91 (0:1)
 The GI bill?

V 0 .Not marked as received or not applicable
 V 1 .Received

D TM9630 4 92 (0:100)
 Percent of TM9630 from the sum of all educational financing received

D TM9632 1 96 (0:1)
 Other veteran's educational assistance programs? (Include survivors and dependents, vocational rehabilitation and post-vietnam veterans assistance.)

V 0 .Not marked as received or not applicable
 V 1 .Received

D TM9634 5 97 (0:100)
 Percent of TM9634 from the sum of all educational financing received

D TM9636 1 102 (0:1)
 College work study program?

V 0 .Not marked as received or not applicable
 V 1 .Received

D TM9638 4 103 (0:100)
 Percent of TM9638 from the sum of all educational financing received

SIPP 1990 WAVE 5 EDUCATIONAL FINANCING/ENROLLMENT
TOPICAL MODULE MICRODATA FILE (RERELEASE)

DATA	SIZE	BEGIN	
D TM9640	1	107	(0:1)
	A Pell grant?		
V	0	.Not marked as received or not	
V		.applicable	
V	1	.Received	
D TM9642	4	108	(0:100)
	percent of TM9642 from the sum of all educational financing received		
D TM9644	1	112	(0:1)
	A supplemental educational opportunity grant (SEOG)		
V	0	.Not marked as received or not	
V		.applicable	
V	1	.Received	
D TM9646	4	113	(0:100)
	Percent of TM9646 from the sum of all educational financing received		
D TM9648	1	117	(0:1)
	A national direct student loan?		
V	0	.Not marked as received or not applicable	
V	1	.Received	
D TM9650	4	118	(0:100)
	Percent of TM9650 from the sum of all educational financing received		
D TM9652	1	122	(0:1)
	A guaranteed student loan		
V	0	.Not marked as received or not	
V		.applicable	
V	1	.Received	
D TM9654	5	123	(0:100)
	Percent of TM9654 from the sum of all educational financing received		
D TM9656	1	128	(0:1)
	A JTPA training program		
V	0	.Not marked as received or not	
V		.applicable	
V	1	.Received	
D TM9658	4	129	(0:100)
	Percent of TM9658 from the sum of all educational financing received		
D TM9660	1	133	(0:1)
	Employer assistance		
V	0	.Not marked as received or not	
V		.applicable	
V	1	.Received	
D TM9662	5	134	(0:100)
	Percent of TM9662 from the sum of all educational financing received		
D TM9664	1	139	(0:1)
	A fellowship or scholarship?		
V	0	.Not marked as received or not	
V		.applicable	
V	1	.Received	
D TM9666	5	140	(0:100)
	Percent of TM9666 from the sum of all educational financing received		

DATA	SIZE	BEGIN	
D TM9668	1	145	(0:1)
	A tuition reduction?		
V	0	.Not marked as received or not	
V		.applicable	
V	1	.Received	
D TM9670	4	146	(0:100)
	Percent of TM9670 from the sum of all educational financing received		
D TM9672	1	150	(0:1)
	Anything else (other than assistance from relatives and friends)?		
V	0	.Not marked as received or not	
V		.applicable	
V	1	.Received	
D TM9674	5	151	(0:100)
	Percent of TM9674 from the sum of all educational financing received number of items with data on this record		
D TMETCNT	2	156	(1:99)
	Number of items with data on this record		

* Part C - Imputation flags			

D TM-IFC1	1	158	(0:1)
	Part C imputation flag #01		
	Imputation flag for field 'TM9612'		
V	0	.Not imputed	
V	1	.Imputed	
D TM-IFC2	1	159	(0:1)
	Part C imputation flag #02		
	Imputation flag for field 'TM9616'		
V	0	.Not imputed	
V	1	.Imputed	
D TM-IFC3	1	160	(0:1)
	Part C imputation flag #03		
	Imputation flag for field 'TM9618'		
V	0	.Not imputed	
V	1	.Imputed	
D TM-IFC4	1	161	(0:1)
	Part C imputation flag #04		
	Imputation flag for field 'TM9620'		
V	0	.Not imputed	
V	1	.Imputed	
D TM-IFC5	1	162	(0:1)
	Part C imputation flag #05		
	Imputation flag for field 'TM9622'		
V	0	.Not imputed	
V	1	.Imputed	
D TM-IFC6	1	163	(0:1)
	Part C imputation flag #06		
	Imputation flag for field 'TM9624'		
V	0	.Not imputed	
V	1	.Imputed	
D TM-IFC7	1	164	(0:1)
	Part C imputation flag #07		
	Imputation flag for field 'TM9630'		
V	0	.Not imputed	
V	1	.Imputed TM9630	

DATA DICTIONARY

DATA	SIZE	BEGIN	
D TM-IFC8	1	165	(0:1)
Part C imputation flag #08			
Imputation flag for field 'TM9634'			
V	0	.Not imputed	
V	1	.Imputed TM9634	
D TM-IFC9	1	166	(0:1)
Part C imputation flag #09			
Imputation flag for field 'TM9638'			
V	0	.Not imputed	
V	1	.Imputed TM9638	
D TM-IFC10	1	167	(0:1)
Part C imputation flag #10			
Imputation flag for field 'TM9642'			
V	0	.Not imputed	
V	1	.Imputed TM9642	
D TM-IFC11	1	168	(0:1)
Part C imputation flag #11			
Imputation flag for field 'TM9646'			
V	0	.Not imputed	
V	1	.Imputed TM9646	
D TM-IFC12	1	169	(0:1)
Part C imputation flag #12			
Imputation flag for field 'TM9650'			
V	0	.Not imputed	
V	1	.Imputed TM9650	
D TM-IFC13	1	170	(0:1)
Part C imputation flag #13			
Imputation flag for field 'TM9654'			
V	0	.Not imputed	
V	1	.Imputed TM9654	
D TM-IFC14	1	171	(0:1)
Part C imputation flag #14			
Imputation flag for field 'TM9658'			
V	0	.Not imputed	
V	1	.Imputed TM9658	

DATA	SIZE	BEGIN	
D TM-IFC15	1	172	(0:1)
Part C imputation flag #15			
Imputation flag for field 'TM9662'			
V	0	.Not imputed	
V	1	.Imputed TM9662	
D TM-IFC16	1	173	(0:1)
Part C imputation flag #16			
Imputation flag for field 'TM9666'			
V	0	.Not imputed	
V	1	.Imputed TM9666	
D TM-IFC17	1	174	(0:1)
Part C imputation flag #17			
Imputation flag for field 'TM9670'			
V	0	.Not imputed	
V	1	.Imputed TM9670	
D TM-IFC18	1	175	(0:1)
Part C imputation flag #18			
Imputation flag for field 'TM9674'			
V	0	.Not imputed	
V	1	.Imputed TM9674	
D TMTEDFIN	5	176	(0:11000)
Total education finance recode			

* 1) shows actual amounts between \$0 and *			
* \$4099 *			
* 2) shows recoded amounts greater *			
* than \$4099 *			

V	0-4099	.Dollars, education finance	
V	4500	.\$4100 - 4999	
V	5500	.\$5000 - 5999	
V	6500	.\$6000 - 6999	
V	7500	.\$7000 - 7999	
V	8500	.\$8000 - 8999	
V	9500	.\$9000 - 9999	
V	10500	.\$10000 - 10999	
V	11000	.\$11000 +	

**SIPP 1990 WAVE 5 TOPICAL MODULE RESEARCH FILE
(RERELEASE)
DATA DICTIONARY**

DATA	SIZE	BEGIN	DATA	SIZE	BEGIN
D SUSEQNUM	5	1	V	62	.Iowa, North Dakota, South Dakota
			V	63	.Alaska, Idaho, Montana, Wyoming
			D PINX	2	18
					Person index from core
					Not to be used for matching observations
U All persons, including children			U All persons, including children		
D ID	9	6	D ADDID	2	20
					Current address Id. - This field
					differentiates households within
					the same sample unit (i.e., the
					same psu, segment and serial numbers)
					that is, households which originate
					out of an original sample household
U All persons, including children			U All persons, including children		
D ROTATION	1	15	D ITEM368	2	22
					Household interview status code
			U All persons, including children		
V 1		.Interview month: September 1991	V	01	.Interviewed
V 2		.Interview month: June 1991	*		Type A noninterview
V 3		.Interview month: July 1991	V	02	.No one home
V 4		.Interview month: August 1991	V	03	.Temporarily absent
U All persons, including children			V	04	.Refused
			V	05	.Unable to locate
D STATE	2	16	V	06	.Other Type A
			*		Type B noninterview (Wave 2+)
U All persons, including children			V	16	.Type B Entire HH
V	01	.Alabama	V		.institutionalized
V	04	.Arizona	V		.or temporarily ineligible
V	05	.Arkansas	*		Type C noninterview (Wave 2+)
V	06	.California	V	22	.Deleted (sample adjustment,
V	08	.Colorado	V		.error)
V	09	.Connecticut	V	23	.Entire household deceased,
V	10	.Delaware	V		.moved
V	11	.District of Columbia	V		.out of country, or living in
V	12	.Florida	V		.armed forces barracks
V	13	.Georgia	*		Type D noninterview (Wave 2+)
V	15	.Hawaii	V	24	.Moved, address unknown
V	17	.Illinois	V	25	.Moved within country beyond
V	18	.Indiana	V		.limit
V	20	.Kansas	V	26	.All sample persons relisted on
V	21	.Kentucky	V		.new control card(s)
V	22	.Louisiana	V	28	.Merged hhlts across panels
V	24	.Maryland			
V	25	.Massachusetts	D INTW	1	24
V	26	.Michigan			Person's interview status
V	27	.Minnesota	U All persons, including children		
V	28	.Mississippi	V	0	.Not applicable (children
V	29	.Missouri	V		.under 15) or not in sample
V	31	.Nebraska	V	1	.Interview (self)
V	32	.Nevada	V	2	.Interview (proxy)
V	33	.New Hampshire	V	3	.Noninterview - Type Z refusal
V	34	.New Jersey	V	4	.Noninterview - Type Z other
V	35	.New Mexico			
V	36	.New York	D PPHIS1	1	25
V	37	.North Carolina			Monthly person's interview status:
V	39	.Ohio			Reference month 1
V	40	.Oklahoma	U All persons, including children		
V	41	.Oregon	V	1	.Interview
V	42	.Pennsylvania	V	2	.Non-interview
V	44	.Rhode Island			
V	45	.South Carolina			
V	47	.Tennessee			
V	48	.Texas			
V	49	.Utah			
V	51	.Virginia			
V	53	.Washington			
V	54	.West Virginia			
V	55	.Wisconsin			
V	61	.Maine, Vermont			

**SIPP 1990 WAVE 5 TOPICAL MODULE
RESEARCH FILE (RERELEASE)**

DATA SIZE BEGIN

D PPMIS2 1 26
 Monthly person's interview status:
 Reference month 2

U All persons, including children
V 1 .Interview
V 2 .Non-interview

D PPMIS3 1 27
 Monthly person's interview status:
 Reference month 3

U All persons, including children
V 1 .Interview
V 2 .Non-interview

D PPMIS4 1 28
 Monthly person's interview status:
 Reference month 4

U All persons, including children
V 1 .Interview
V 2 .Non-interview

D PPMIS5 1 29
 Monthly person's interview status:
 Interview month

U All persons, including children
V 1 .Interview
V 2 .Non-interview

D ENTRY 2 30
 Entry address ID
 Address of the household that this
 person belonged to at the time this
 person first became part of the sample

U All persons, including children

D PNUM 3 32
 Person number

U All persons, including children

D FINALWGT 12 35
 Person weight (interview month)

U All persons, including children

D RRP 1 47
 Relationship to reference person

U All persons, including children
V 0 .Not a sample person in this
 .month
V 1 .Household reference person,
 .living with relatives
V 2 .Household reference person
 .living alone or with only non-
 .relatives (primary individual)
V 3 .Spouse of household reference
 .person
V 4 .Child of household reference
 .person
V 5 .Other relative of household
 .reference person
V 6 .Non-relative of household
 .reference person but related to
 .others in the household -
 .member
 .of an unrelated subfamily
 .(secondary family)
V 7 .Non-relative of household
 .reference person and not
 .related
 .to anyone else in the household
 .(secondary individual)

DATA SIZE BEGIN

D AGE 3 48
 Age as of last birthday

U All persons, including children
V 000 .Less than 1 full year
V 001 .1 year
V .etc., topcoded to 84

D SEX 1 51
 Sex

U All persons, including children
V 1 .Male
V 2 .Female

D RACE 1 52
 Race

U All persons, including children
V 1 .White
V 2 .Black
V 3 .American Indian, Eskimo or Aleut
V 4 .Asian or Pacific Islander

D MS 1 53
 Marital status

U Persons 15 years old or older
V 0 .Not a sample person in this
 .month
V 1 .Married, spouse present
V 2 .Married, spouse absent
V 3 .Widowed
V 4 .Divorced
V 5 .Separated
V 6 .Never married

D PNSP 3 54
 Person number of spouse

U Persons 15 years old or older
V 000 .Not a sample person in this
 .month
V 999 .Not applicable

D PNPT 3 57
 Person number of parent

U All persons, including children
V 000 .Not a sample person in this
 .month
V 999 .Not applicable

D HIGRADE 2 60
 What is the highest grade or year of
 regular school this person attended ?

U Persons 15 years old or older
V 00 .Not applicable if under 15,
 .did not attend or attended only
V .kindergarten
V 01-08 .Elementary
V 09-12 .High school
V 21-26 .College

D GRDCMPL 1 62
 Did he/she complete that grade

U Persons 15 years old or older
V 0 .Not applicable
V 1 .Yes
V 2 .No

D ETHNICITY 2 63
 Ethnic origin

U All persons, including children
V 01 .German
V 02 .English
V 03 .Irish
V 04 .French
V 05 .Italian
V 06 .Scottish

DATA	SIZE	BEGIN
V	07	.Polish
V	08	.Dutch
V	09	.Swedish
V	10	.Norwegian
V	11	.Russian
V	12	.Ukrainian
V	13	.Welsh
V	14	.Mexican-American
V	15	.Chicano
V	16	.Mexican
V	17	.Puerto Rican
V	18	.Cuban
V	19	.Central or South American (Spanish speaking)
V	20	.Other Spanish
V	21	.Afro-American (Black or Negro)
V	30	.Another group not listed
V	39	.Don't know

D WAVE 1 65
Wave of the panel
U All persons, including children

D FILLER1 3 66
Blank or Zero filler

* TOPICAL MODULE: ANNUAL INCOME AND *
* RETIREMENT ACCOUNTS *

D TM8000 1 69
Check item T1
Did the respondent own at least one
business during waves 1-5
U Persons 15 years of age or older
V 0 .Not applicable
V 1 .Yes - skip to TM8006
V 2 .No

D TM8002 1 70
Check item T2
Were interviews obtained for ... for
each of the 1st, 2nd, 3rd and 4th waves?
U Persons 15 years of age or older who
did not own a business during this panel
V 0 .Not applicable
V 1 .Yes - skip to TM9330
V 2 .No

D TM8004 1 71
Did ... own and operate a business
at any time during calendar year
1990? Include farms
U Persons 15 years of age or older who
were not interviewed for all waves 1-4
and did not own a business during this
panel
V 0 .Not applicable
V 1 .Yes
V 2 .No - skip to TM9330

D TM8006 2 72
How many different businesses did
... own and operate during calendar
year 1990?
U Persons 15 and older who owned and
operated a business during the panel
V 00 .Not applicable
V 01 .1 business
V 02 .2 businesses
V 03 .3 + businesses
V -3 .None

DATA SIZE BEGIN

* The next 27 variables TMIND1-TM8020, *
* TM8104-TM8126, TM8202-TM8220 refer to *
* the respondent's first business. *
* Respondents were asked to report up to *
* two businesses, ranking them according *
* to net income beginning with the business *
* providing the largest net income. *

D TMIND1 3 74
Three digit industry code for
business 1 in TM8010. Industry coding
was not done for any observation.
U Persons 15 or older who owned and operated
a business during 1990
V 000 .Not applicable or not coded

D TM8010 2 77
Check item T3 for business 1
Business 1 ID number
U Persons 15 or older who owned and operated
a business during 1990
V -3 .Not listed on control card
V 00 .Not applicable
V 01-09 .ID number of business

D TM8012 1 79
Check item T4 for business 1
Has information about business 1
already been obtained in an inter-
view for another household member?
U Persons 15 or older who owned and
operated a business during 1990
V 0 .Not applicable
V 1 .Yes
V 2 .No - skip to TM8018

D TM8014 3 80
Person number of other owner of
business 1 who reported information
U Persons 15 or older who owned and
operated a business during 1990 in
for which information has already
been obtained
V 000 .Not applicable
V 101-999 .Person number

D TM8016 2 83
Business ID number of business 1
for other owner who reported
information
U Persons 15 or older who owned and
operated a business in 1990 for which
information has already been obtained
V -3 .None - skip to TM8274
V 00 .Not applicable
V 01-09 .ID number of business -
V .skip to TM8274

D TM8018 2 85
What was the form of business 1 -
was it a sole proprietorship, a
partnership, or a corporation?
U Persons 15 or older who owned and
operated a business during 1990 for
which information has not been obtained
elsewhere
V -1 .Don't know
V 00 .Not applicable
V 01 .Sole proprietorship
V 02 .Partnership
V 03 .Corporation

**SIPP 1990 WAVE 5 TOPICAL MODULE
RESEARCH FILE (RERELEASE)**

DATA	SIZE	BEGIN	DATA	SIZE	BEGIN
D TM8020	1	87	D TM8112	1	97
Was business 1 primarily located in ...'s own home or somewhere else?			Was this business 1 owned entirely by members of this household?		
U Persons 15 or older who owned and operated a business during 1990 for which information has not been obtained elsewhere			U Persons 15 or older who owned and operated a business (exclude sole proprietorships) in 1990 that is part-owned by other household members. Information on this business has not been obtained elsewhere.		
V 0 .Not applicable			V 0 .Not applicable		
V 1 .Own home			V 1 .Yes - skip to TM8116		
V 2 .Somewhere else			V 2 .No		
D TM8104	1	88	D TM8114	2	98
Check item T5 for business 1 Was business 1 a sole proprietorship (see TM8018)			What percentage of business 1 was owned by members of this household?		
U Persons 15 or older who owned and operated a business during 1990 for which information has not been obtained elsewhere			U Persons 15 or older who owned and operated a business (exclude sole proprietorships) in 1990 that is not owned entirely by members of this household. Information on this business has not been obtained elsewhere.		
V 0 .Not applicable			V -1 .Don't know		
V 1 .Yes - skip to TM8118			V 00 .Not applicable		
V 2 .No			V 01 .1-50 Percent		
D TM8106	2	89	V 02 .51-100 Percent		
Were any other members of this household part owners of business 1			D TM8116	2	100
U Persons 15 or older who owned and operated a business (exclude sole proprietorships) in 1990 for which information has not been obtained elsewhere			What percentage of business 1 did ... own in ...'s own name?		
V -1 .Don't know - skip to TM8116			U Persons 15 or older who owned and operated a business (exclude sole proprietorships) in 1990 for which information has not been obtained elsewhere		
V 00 .Not applicable			V -1 .Don't know		
V 01 .Yes			V 00 .Not applicable		
V 02 .No - skip to TM8116			V 01 .1-25 Percent		
D TM8108	3	91	V 02 .26-49 Percent		
Person number of other household member who was an owner of business 1 (first co-owner)			V 03 .50-100 Percent		
U Persons 15 or older who owned and operated a business (exclude sole proprietorships) in 1990 that is part-owned by other household members. Information on this business has not been obtained elsewhere.			D TM8118	6	102
V 000 .Not applicable			What were the gross receipts of business 1 in 1990?		
V 101-999 .Person number			U Persons 15 or older who owned and operated a business during 1990 for which information has not been obtained elsewhere		
D TM8110	3	94	V -00001 .Don't know		
Person number of other household member who was an owner of business 1 (second co-owner)			V -00002 .Refused		
U Persons 15 or older who owned and operated a business (exclude sole proprietorships) in 1990 that is part-owned by other household members. Information on this business has not been obtained elsewhere.			V 000000 .Not applicable		
V 000 .Not applicable			V 1-100000 .Dollars in gross receipts		
V 101-999 .Person number			D TM8120	6	108
			What were the total expenses of business 1 in 1990?		
			U Persons 15 or older who owned and operated a business during 1990 for which information has not been obtained elsewhere		
			V -00001 .Don't know		
			V -00002 .Refused		
			V 000000 .Not applicable		
			V 1-100000 .Dollars in total expenses		

DATA	SIZE	BEGIN	DATA	SIZE	BEGIN
D TM8122	1	114	D TM8208	1	124
Check item T6 for business 1 Is "Don't know" marked in either TM8118 or TM8120?			Check item T8 for business 1 Were any other household members part owners of business 1		
U Persons 15 or older who owned and operated a business during 1990 for which information has not been obtained elsewhere			U Persons 15 or older who owned and operated a business (exclude sole proprietorships) in 1990 for which information has not been obtained elsewhere.		
V 0 .Not applicable			V 0 .Not applicable		
V 1 .Yes			V 1 .Yes		
V 2 .No - skip to TM8126			V 2 .No - skip to TM8274		
D TM8124	1	115	D TM8210	2	125
If we were to call you back later could you provide us with an estimate of TM8118 and/or TM8120			Apart from the net income already reported for ..., did (other house- hold owners) receive any net income in 1990 from business 1		
U Persons 15 or older who owned and operated a business during 1990 for which information has not been obtained elsewhere. Amounts not reported for both TM8118 and TM8120			U Persons 15 or older who owned and operated a business (exclude sole proprietorships) in 1990 for which information has not been obtained elsewhere. Other members of the household were part-owners (see TM8106-TM8110).		
V 0 .Not applicable			V -1 .Don't know - skip to TM8274		
V 1 .Yes			V 00 .Not applicable		
V 2 .No			V 01 .Yes		
D TM8126	1	116	V 02 .No - skip to TM8274		
Check item T7 for business 1 Was business 1 a sole proprietorship (see TM8018)			D TM8212	3	127
U Persons 15 or older who owned and operated a business during 1990 for which information has not been obtained elsewhere.			Person number of first co-owner of business 1		
V 0 .Not applicable			U Persons 15 or over who owned and operated a business (exclude sole proprietorships) in 1990 that is part-owned by other household members who received income from the business in 1990. Information on this business has not been obtained elsewhere.		
V 1 .Yes - skip to TM8274			V 000 .Not applicable		
V 2 .No			V 101-999 .Person number		
D TM8202	6	117	D TM8214	6	130
Respondent's net income from business 1 in 1990			Amount of net income or loss from business 1 for first co-owner		
U Persons 15 or older who owned and operated a business (exclude sole proprietorships) in 1990 for which information has not been obtained elsewhere			U Persons 15 or over who owned and operated a business (exclude sole proprietorships) in 1990 that is part-owned by other household members who received income from the business in 1990. Information on this business has not been obtained elsewhere.		
V -00001 .Don't know			V -00001 .Don't know		
V -00002 .Refused - skip to TM8208			V -00002 .Refused		
V -00003 .None - skip to TM8208			V -00003 .None		
V 000000 .Not applicable			V 000000 .Not applicable		
V 1-100000 .Dollars in income or loss - .skip to TM8208			V 1-100000 .Dollars in income or loss		
D TM8206	1	123	D TM8218	3	136
If we were to call back later could you provide us with an estimate of TM8202			Person number of second co-owner of business 1		
U Persons 15 or older who owned and operated a business (exclude sole proprietorships) in 1990 for which information has not been obtained elsewhere. Amount not reported for TM8202			U Persons 15 or over who owned and operated a business (exclude sole proprietorships) in 1990 that is part-owned by other household members who received income from the business in 1990. Information on this business has not been obtained elsewhere.		
V 0 .Not applicable			V 000 .Not applicable		
V 1 .Yes			V 101-999 .Person number		
V 2 .No					

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DATA SIZE BEGIN

D TM8220 6 139
Amount of net income or loss from
business 1 for second co-owner

U Persons 15 or over who owned and operated
a business (exclude sole proprietorships)
in 1990 that is part-owned by other
household members who received income from
the business in 1990. Information on this
business has not been obtained elsewhere.

V -00001 .Don't know
V -00002 .Refused
V -00003 .None
V 000000 .Not applicable
V 1-100000 .Dollars in income or loss

D TM8274 1 145
Check item T9
Did the respondent report a second
business?

U Persons who owned and operated a business

V 0 .Not applicable
V 1 .Yes - skip to TM8060
V 2 .No - skip to TM9330

* The next 27 variables TMIND2-TM8070, *
* TM8154-TM8176, TM8252-TM8270 refer to *
* the respondent's second business. *

D TMIND2 3 146
Three digit industry code for
business 2 in TM8060. Industry
coding was not done for any
observation.

U Persons 15 or older who owned and
operated a second business during 1990

V 000 .Not applicable, not coded

D TM8060 2 149
Check item T3 for business 2
Business 2 ID number

U Persons 15 or older who owned and
operated a second business during 1990

V -3 .Not listed on control card
V 00 .Not applicable
V 01-09 .ID number of business

D TM8062 1 151
Check item T4 for business 2
Has information about business 2
already been obtained in an inter-
view for another household member?

U Persons 15 or older who owned and
operated a second business during 1990

V 0 .Not applicable
V 1 .Yes
V 2 .No - skip to TM8068

D TM8064 3 152
Person number of other owner of
business 2 who reported information

U Persons 15 or older who owned and
operated a second business during 1990
for which information has already been
obtained

V 000 .Not applicable
V 101-999 .Person number

DATA SIZE BEGIN

D TM8066 2 155
Business ID number of business 2
for other owner who reported information

U Persons 15 or older who owned and
operated a second business during 1990
for which information has already been
obtained

V -3 .None - skip to TM8276
V 00 .Not applicable
V 01-09 .ID number of business - skip
V .to TM8276

D TM8068 2 157
What was the form of business 2
- was it a sole proprietorship, a
partnership, or a corporation?

U Persons 15 or older who owned and operated
a second business during 1990 for which
information has not been obtained
elsewhere.

V -1 .Don't know
V 00 .Not applicable
V 01 .Sole proprietorship
V 02 .Partnership
V 03 .Corporation

D TM8070 1 159
Was business 2 primarily
located in ...'s own home or
somewhere else?

U Persons 15 or older who owned and operated
a second business during 1990 for which
information has not been obtained
elsewhere.

V 0 .Not applicable
V 1 .Own home
V 2 .Somewhere else

D TM8154 1 160
Check item T5 for business 2
Was business 2 a sole proprietorship
(see TM8086)

U Persons 15 or older who owned and operated
a second business during 1990 for which
information has not been obtained
elsewhere.

V 0 .Not applicable
V 1 .Yes - skip to TM8168
V 2 .No

D TM8156 2 161
Were any other members of this
household part owners of business 2

U Persons 15 or older who owned and operated
a second business (exclude sole
proprietorships) in 1990 for which
information has not been
obtained elsewhere.

V -1 .Don't know - skip to TM8166
V 00 .Not applicable
V 01 .Yes
V 02 .No - skip to TM8166

DATA	SIZE	BEGIN	DATA	SIZE	BEGIN
D TM8158	3	163	D TM8168	6	174
Person number of other household member who was an owner of business 2 (first co-owner)			What were the gross receipts of business 2 in 1990?		
U Persons 15 or older who owned and operated a second business (exclude sole proprietorships) in 1990 that is part-owned by other household members. Information on this business has not been obtained elsewhere.			U Persons 15 or older who owned and operated a second business during 1990 for which information has not been obtained elsewhere.		
V 000 .Not applicable			V -00001 .Don't know		
V 101-999 .Person number			V -00002 .Refused		
			V 000000 .Not applicable		
			V 1-100000 .Dollars in gross receipts		
D TM8160	3	166	D TM8170	6	180
Person number of other household member who was an owner of business 2 (second co-owner)			What were the total expenses of business 2 in 1990?		
U Persons 15 or older who owned and operated a second business (exclude sole proprietorships) in 1990 that is part-owned by other household members. Information on this business has not been obtained elsewhere.			U Persons 15 or older who owned and operated a second business during 1990 for which information has not been obtained elsewhere.		
V 000 .Not applicable			V -00001 .Don't know		
V 101-999 .Person number			V -00002 .Refused		
			V 000000 .Not applicable		
			V 1-100000 .Dollars in total expenses		
D TM8162	1	169	D TM8172	1	186
Was business 2 owned entirely by members of this household?			Check item T6 for business 2		
U Persons 15 or older who owned and operated a second business (exclude sole proprietorships) in 1990 that is part-owned by other household members. Information on this business has not been obtained elsewhere.			Is "Don't know" marked in either TM8168 or TM8170?		
V 0 .Not applicable			U Persons 15 or older who owned and operated a second business during 1990 for which information has not been obtained elsewhere.		
V 1 .Yes - skip to TM8166			V 0 .Not applicable		
V 2 .No			V 1 .Yes		
			V 2 .No - skip to TM8176		
D TM8164	2	170	D TM8174	1	187
What percentage of business 2 was owned by members of this household?			If we were to call you back later could you provide us with an estimate of TM8168 and/or TM8170		
U Persons 15 or older who owned and operated a second business (exclude sole proprietorships) in 1990 that is not owned entirely by members of this household. Information on this business has not been obtained elsewhere.			U Persons 15 or older who owned and operated a second business during 1990 for which information has not been obtained elsewhere. Amounts not reported for both TM8168 and TM8170.		
V -1 .Don't know			V 0 .Not applicable		
V 00 .Not applicable			V 1 .Yes		
V 01 .1-50 Percent			V 2 .No		
V 02 .51-100 Percent					
D TM8166	2	172	D TM8176	1	188
What percentage of business 2 did ... own in ...'s own name?			Check item T7 for business 2		
U Persons 15 or older who owned and operated a second business (exclude sole proprietorships) in 1990 for which information has not been obtained elsewhere.			Was business 2 a sole proprietorship (see TM8068)?		
V -1 .Don't Know			U Persons 15 or older who owned and operated a second business during 1990 for which information has not been obtained elsewhere.		
V 00 .Not applicable			V 0 .Not applicable		
V 01 .1-25 Percent			V 1 .Yes - skip to TM8276		
V 02 .26-49 Percent			V 2 .No		
V 03 .50-100 Percent					
			D TM8252	6	189
			Respondent's net income from business 2 in 1990		
			U Persons 15 or older who owned and operated a second business (exclude sole proprietorships) in 1990 for which information has not been obtained elsewhere.		
			V -00001 .Don't know		
			V -00002 .Refused - skip to TM8258		
			V -00003 .None - skip to TM8258		
			V 000000 .Not applicable		
			V 1-100000 .Net income or loss -		
			V .skip to TM8258		

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DATA SIZE BEGIN

D TM8256 1 195
If we were to call back later could you provide us with an estimate of TM8252
U Persons 15 or older who owned and operated a second business (exclude sole proprietorships) in 1990 for which information has not been obtained elsewhere. Amount not reported for TM8252.
V 0 .Not applicable
V 1 .Yes
V 2 .No

D TM8258 1 196
Check item T8 for business 2
Were any other household members part owners of business 2
U Persons 15 or older who owned and operated a second business (exclude sole proprietorships) in 1990 for which information has not been obtained elsewhere.
V 0 .Not applicable
V 1 .Yes
V 2 .No - skip to TM8276

D TM8260 2 197
Apart from the net income already reported for ..., did (other household owners) receive any net income in 1990 from business 2
U Persons 15 or older who owned and operated a second business (exclude sole proprietorships) in 1990 for which information has not been obtained elsewhere. Other members in the household who were part-owners (see TM8156-TM8160)
V -1 .Don't know - skip to TM8276
V 00 .Not applicable
V 01 .Yes
V 02 .No - skip to TM8276

D TM8262 3 199
Person number of first co-owner of business 2
U Persons 15 or older who owned and operated a second business in 1990 with other household members who received income from business 2 in 1990. Information on this business has not been obtained elsewhere.
V 000 .Not applicable
V 101-999 .Person number

D TM8264 6 202
Amount of net income or loss from business 2 for first co-owner
U Persons 15 or older who owned and operated a second business in 1990 with other household members who received income from business 2 in 1990. Information on this business has not been obtained elsewhere.
V -00001 .Don t know
V -00002 .Refused
V -00003 .None
V 000000 .Not applicable
V 1-100000 .Dollars in income or loss

DATA SIZE BEGIN

D TM8268 3 208
Person number of second co-owner of business 2
U Persons 15 or older who owned and operated a second business in 1990 with other household members who received income from business 2 in 1990. Information on this business has not been obtained elsewhere.
V 000 .Not applicable
V 101-999 .Person number

D TM8270 6 211
Amount of net income or loss from business 2 for second co-owner
U Persons 15 or older who owned and operated a second business in 1990 with other household members who received income from business 2 in 1990. Information on this business has not been obtained elsewhere.
V -00001 .Don't know
V -00002 .Refused
V -00003 .None
V 000000 .Not applicable
V 1-100000 .Dollars in income or loss

D TM8276 1 217
Check item T10
Is the number of businesses marked in TM8006 three or more?
U Persons 15 or over who owned and operated two businesses in 1990
V 0 .Not applicable
V 1 .Yes
V 2 .No - skip to TM9330

D TM8278 6 218
Respondent's net income or loss from other businesses in 1990
U Persons 15 or over who owned and operated 3 or more businesses in 1990
V -00001 .Don't know
V -00002 .Refused
V -00003 .None
V 000000 .Not applicable
V 1-100000 .Dollars in income or loss

D TM9330 2 224
Does ... have an individual retirement account (IRA) in ...'s own name?
U Persons 15 or over
V -1 .Don't know - skip to TM9358
V 00 .Not applicable
V 01 .Yes
V 02 .No - skip to TM9358

D TM9332 2 226
Did ... make any contributions to IRA accounts which applied to ...'s 1990 tax return?
U Persons 15 or over with IRA in own name
V -1 .Don't know - skip to TM9336
V 00 .Not applicable
V 01 .Yes
V 02 .No - skip to TM9336

DATA SIZE BEGIN
 D TM9334 5 228
 How much were ...'s contributions to IRA accounts which applied to ...'s 1990 tax return? (Form 1040 line 24a; Form 1040A, line 15a)
 U Persons 15 or over who made contributions to IRA accounts which applied to 1990 tax return
 V 00000 .Not applicable
 V 1-30000 .Dollars in contributions
 V -0001 .Don't know
 V -0002 .Refused

D TM9336 2 233
 Did ... make any withdrawals from ...'s IRA accounts during 1990? If funds were rolled over within 60 days of the withdrawal, mark "No"
 U Persons 15 or older with IRA in own name
 V -1 .Don't know - skip to TM9340
 V 00 .Not applicable
 V 01 .Yes
 V 02 .No - skip to TM9340

D TM9338 5 235
 How much did ... withdraw from IRA accounts during 1990?
 U Persons 15 or older who made IRA withdrawals in 1990
 V -0001 .Don't know
 V -0002 .Refused
 V 00000 .Not applicable
 V 1-30000 .Dollars in withdrawals

D TM9340 5 240
 Including all IRA accounts in ...'s own name, how much did ...'s IRA accounts earn during 1990?
 U Persons 15 or older with IRA in own name
 V -0001 .Don't know
 V -0002 .Refused
 V 00000 .Not applicable
 V 1-30000 .Dollars in earnings

 * The next eight fields are possible *
 * responses to the question: *
 * *
 * What types of assets did ... have in *
 * ...'s IRA accounts during 1990? *
 * *
 * V 0 .Not marked as an asset *
 * V .or not applicable *
 * V 1 .Marked as an asset *

D TM9342 1 245
 IRA asset type owned: Certificates of deposit or other savings certificates
 U Persons 15 or older with IRA in own name
 V 0. No or not applicable
 V 1. Yes, asset owned

D TM9344 1 246
 IRA asset type owned: Money market funds
 U Persons 15 or older with IRA in own name
 V 0. No or not applicable
 V 1. Yes, asset owned

DATA SIZE BEGIN
 D TM9346 1 247
 IRA asset type owned: U.S. government securities
 U Persons 15 or older with IRA in own name
 V 0. No or not applicable
 V 1. Yes, asset owned

D TM9348 1 248
 IRA asset type owned: Municipal or corporate bonds
 U Persons 15 or older with IRA in own name
 V 0. No or not applicable
 V 1. Yes, asset owned

D TM9350 1 249
 IRA asset type owned: U.S. Savings Bonds
 U Persons 15 or older with IRA in own name
 V 0. No or not applicable
 V 1. Yes, asset owned

D TM9352 1 250
 IRA asset type owned: Stocks or mutual fund shares
 U Persons 15 or older with IRA in own name
 V 0. No or not applicable
 V 1. Yes, asset owned

D TM9354 1 251
 IRA asset type owned: Other assets
 U Persons 15 or older with IRA in own name
 V 0. No or not applicable
 V 1. Yes, asset owned

D TM9356 1 252
 IRA asset type owned: Don't know types of assets
 U Persons or older with IRA in own name
 V 0 .No or Not applicable
 V 1 .Yes, asset type unknown

D TM9358 2 253
 Does ... have a KEOGH account in ...'s own name?
 U Persons 15 years of age or over
 V -1 .Don't know - skip to TM9385
 V 00 .Not applicable
 V 01 .Yes
 V 02 .No - skip to TM9385

D TM9360 2 255
 Did ... make any contributions to a KEOGH account which applied to ...'s 1990 tax return?
 U Persons 15 or older with KEOGH account in own name
 V -1 .Don't know - skip to TM9364
 V 00 .Not applicable
 V 01 .Yes
 V 02 .No - skip to TM9364

D TM9362 5 257
 How much were ...'s contributions to KEOGH accounts which applied to ...'s 1990 tax return? (Form 1040, line 27)
 U Persons 15 or older with KEOGH account who made tax-deductible contributions which applied to 1990 taxes
 V -0001 .Don't know
 V -0002 .Refused
 V 00000 .Not applicable
 V 1-30000 .Dollars in contributions

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DATA	SIZE	BEGIN	DATA	SIZE	BEGIN
D TM9364	2	262	D TM9380	1	279
Did ... make any withdrawals from ...'s KEOGH accounts during 1990?			KEOGH asset type owned: Stocks or mutual fund shares		
U Persons 15 or older with KEOGH account in own name			U Persons 15 or over with KEOGH account in own name		
V -1 .Don't know - skip to TM9368			V 0 .No or not applicable		
V 00 .Not applicable			V 1 .Yes, asset owned		
V 01 .Yes					
V 02 .No - skip to TM9368			D TM9382	1	280
D TM9366	5	264	KEOGH asset type owned: Other assets		
How much did ... withdraw from KEOGH accounts during 1990?			U Persons 15 or over with KEOGH account in own name		
U Persons 15 or older who made withdrawals from KEOGH account in 1990			V 0 .No or not applicable		
V -0001 .Don't know			V 1 .Yes, asset owned		
V -0002 .Refused			D TM9384	1	281
V 00000 .Not applicable			KEOGH asset type owned: Don't know types of assets		
V 1-30000 .Dollars in withdrawals			U Persons 15 or over with KEOGH account in own name		
D TM9368	5	269	V 0 .No or Not applicable		
Including all KEOGH accounts in ...'s own name, how much did ...'s KEOGH accounts earn during 1990?			V 1 .Yes, asset type unknown		
U Persons 15 or older with KEOGH account in own name			D TM9385	1	282
V -0001 .Don't know			Are the names of any employers listed for the respondent on the control card		
V -0002 .Refused			U Persons 15 years of age or over		
V 00000 .Not applicable			V 0 .Not applicable		
V 1-30000 .Dollars in earnings			V 1 .Yes		
D TM9370	1	274	V 2 .No - skip to TM9390		
KEOGH asset type owned: Certificates of deposit or other savings certificates			D TM9386	2	283
U Persons 15 or over with KEOGH account in own name			During 1990, did ... participate in a salary reduction plan, sometimes called a 401K plan?		
V 0 .No or not applicable			U Persons 15 or over with at least 1 employer listed on the control card		
V 1 .Yes, asset owned			V -1 .Don't know - skip to TM9390		
D TM9372	1	275	V 00 .Not applicable		
KEOGH asset type owned: Money market funds			V 01 .Yes		
U Persons 15 or over with KEOGH account in own name			V 02 .No - skip to TM9390		
V 0 .No or not applicable			D TM9388	6	285
V 1 .Yes, asset owned			How much did ... contribute to a 401K plan during 1990?		
D TM9374	1	276	U Persons 15 or older participating in a 401K plan in 1990		
KEOGH asset type owned: U.S. government securities			V -00001 .Don't know		
U Persons 15 or over with KEOGH account in own name			V -00002 .Refused		
V 0 .No or not applicable			V -00003 .None		
V 1 .Yes, asset owned			V 000000 .Not applicable		
D TM9376	1	277	V 1 - 030000 .Total amount		
KEOGH asset type owned: Municipal or corporate bonds			D TMEBCNT	3	291
U Persons 15 or over with KEOGH account in own name			Number of items with data on the annual income and retirement accounts topical module		
V 0 .No or not applicable			U Persons 15 years of age or over		
V 1 .Yes, asset owned			D FILLER2	3	294
D TM9378	1	278	Blank or zero filler		
KEOGH asset type owned: U.S. Savings Bonds					
U Persons 15 or over with KEOGH account in own name					
V 0 .No or not applicable					
V 1 .Yes, asset owned					

DATA SIZE BEGIN

 * TOPICAL MODULE: TAXES *

D TM9390 1 297
 Check item T12
 Has tax information for ... already
 been obtained in an interview for a
 spouse with whom ... filed a joint
 return?
 U Persons 15 years of age or over
 V 0 .Not applicable
 V 1 .Yes - skip to TM9486
 V 2 .No

D TM9392 1 298
 Did ... file a Federal income tax
 return for 1990?
 U Persons 15 or older for whom tax
 information has not been obtained
 elsewhere.
 V 0 .Not applicable
 V 1 .Yes
 V 2 .No - skip to TM9486

D TM9394 1 299
 Do you have a copy of the 1990 Federal
 tax form or a worksheet that you could
 refer to for the next few questions?
 U Persons 15 or older who filed a 1990
 Federal tax return. Tax information has
 not been collected elsewhere.
 V 0 .Not applicable
 V 1 .Yes
 V 2 .No

D TM9396 2 300
 What was ...'s filing status on ...'s
 1990 Federal tax return?
 U Persons 15 or older who filed a 1990
 Federal tax return. Tax information has
 not been collected elsewhere.
 V 00 .Not applicable
 V 01 .Single taxpayer
 V 02 .Married, filing a joint return
 V 03 .Married, filing separately
 V 04 .Unmarried head of household or
 .Qualifying widow(er) with
 .dependent child(ren)
 V 06 .Don't know

D TM9398 2 302
 What were the total number of exemp-
 tions claimed on ...'s 1990 Federal
 tax return?
 U Persons 15 or older who filed a 1990
 Federal tax return. Tax information has
 not been collected elsewhere.
 V -1 .Don't know
 V 01 .1 exemption - skip to TM9420
 V 02 .2 exemptions
 V 03 .3-5 exemptions
 V 04 .6 or more exemptions

D TM9400 1 304
 Check item T13
 Number of current household members
 U Persons 15 or older who filed a 1990
 Federal tax return. Tax information has
 not been collected elsewhere. Excludes
 those claiming one exemption.
 V 0 .Not applicable
 V 1 .One - skip to TM9414
 V 2 .Two or more

DATA SIZE BEGIN

D TM9402 3 305
 Beside ... which persons in this
 household did ... claim as an exemption?
 Person Number of Person one
 U Persons 15 or older who filed a 1990
 Federal tax return-excludes those claiming
 one exemption. Tax information has not
 been collected elsewhere.
 V 000 .Not applicable
 V 101 - 999 .Person number

D TM9404 3 308
 Beside ... which persons in this
 household did ... claim as an exemption?
 Person Number of Person two
 U Persons 15 or older who filed a 1990
 Federal tax return-excludes those claiming
 one exemption. Tax information has not
 been collected elsewhere.
 V 000 .Not applicable
 V 101 - 999 .Person number

D TM9406 3 311
 Beside ... which persons in this
 household did ... claim as an exemption?
 Person Number of Person three
 U Persons 15 or older who filed a 1990
 Federal tax return - excludes those
 claiming one exemption. Tax information
 has not been collected elsewhere.
 V 000 .Not applicable
 V 101 - 999 .Person number

D TM9408 3 314
 Beside ... which persons in this
 household did ... claim as an exemption?
 Person Number of Person four
 U Persons 15 or older who filed a 1990
 Federal tax return - excludes those
 claiming one exemption. Tax information
 has not been collected elsewhere.
 V 000 .Not applicable
 V 101 - 999 .Person number

D TM9410 3 317
 Beside ... which persons in this
 household did ... claim as an exemption?
 Person Number of Person five
 U Persons 15 or older who filed a 1990
 Federal tax return - excludes those
 claiming one exemption. Tax information
 has not been collected elsewhere.
 V 000 .Not applicable
 V 101 - 999 .Person number

D TM9412 1 320
 No one in the household besides the
 respondent has been claimed as an
 exemption
 U Persons 15 or older who filed a 1990
 Federal tax return - excludes those
 claiming one exemption. Tax information
 has not been collected elsewhere.
 V 0 .Not applicable
 V 1 .No one in the household

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DATA	SIZE	BEGIN	DATA	SIZE	BEGIN
D TM9414	1	321	V	01	.Yes
		Did ... claim exemptions for any persons who lived outside of ...'s home for the entire year?	V	02	.No
U Persons 15 or older who filed a 1990 Federal tax return - excludes those claiming one exemption. Tax information has not been collected elsewhere.			D TM9428	1	330
V	0	.Not applicable			Check item T14
V	1	.Yes			Does the respondent have a copy of ...'s federal income tax form or a worksheet to refer to?
V	2	.No - skip to TM9420	U Persons 15 or older who filed a 1990 Federal tax return. Tax information has not been collected elsewhere.		
D TM9416	1	322	V	0	.Not applicable
		What was the relationship of the dependent (referred to in TM9414) to the respondent: First dependent	V	1	.Yes
U Persons 15 or older who filed a 1990 Federal tax return and claimed exemptions for persons who lived outside the household. Tax information has not been collected elsewhere			V	2	.No
V	0	.Not applicable	D TM9430	1	331
V	1	.Parent			Check item T15
V	2	.Child			Is "Form 1040" marked in TM9420
V	3	.Brother/sister	U Persons 15 or older who filed a 1990 Form 1040 tax return. Tax information has not been obtained elsewhere.		
V	4	.Other	V	0	.Not applicable
D TM9418	1	323	V	1	.Yes
		What was the relationship of the dependent (referred to in TM9414) to the respondent: Second dependent	V	2	.No - skip to TM9462
U Persons 15 or older who filed a 1990 Federal tax return and claimed exemptions for persons who lived outside the household. Tax information has not been collected elsewhere			D TM9432	1	332
V	0	.Not applicable			Check item T16
V	1	.Parent			Is "Schedule A, itemized deductions" marked "yes" in TM9422?
V	2	.Child	U Persons 15 or older who filed a 1990 Form 1040. Tax information has not been collected elsewhere.		
V	3	.Brother/sister	V	0	.Not applicable
V	4	.Other	V	1	.Yes
D TM9420	2	324	V	2	.No - skip to TM9446
		Did ... file Form 1040 (long form) or one of the short forms, 1040A or 1040EZ?	D TM9434	6	333
U Persons 15 or older who filed a 1990 Federal tax return. Tax information has not been collected elsewhere.					How much were ...'s (and ...'s husband's/wife's) itemized deductions for 1990? (Schedule A, line 27)
V	-1	.Don't know - skip to TM9428	U Persons 15 or older who filed a 1990 Form 1040 Schedule A. Tax information has not been collected elsewhere.		
V	00	.Not applicable	V	-00001	.Don't know
V	01	.Form 1040	V	-00002	.Refused - skip to TM9458
V	02	.Form 1040A - skip to TM9428	V	00000	.Not applicable
V	03	.Form 1040EZ - skip to TM9428	V	000001	.1 - 2999
D TM9422	2	326	V	000002	.3000 - 3999
		Did the respondent file in 1990 a Schedule A - itemized deductions	V	000003	.4000 - 4999
U Persons 15 or older who filed a 1990 Form 1040. Tax information has not been obtained elsewhere.			V	000004	.5000 - 5999
V	-1	.Don't know	V	000005	.6000 - 6999
V	00	.Not applicable	V	000006	.7000 - 7999
V	01	.Yes	V	000007	.8000 - 8999
V	02	.No	V	000008	.9000 - 9999
D TM9424	2	328	V	000009	.10000 - 10999
		Did the respondent file in 1990 a Schedule D - capital gains and losses	V	000010	.11000 - 11999
U Persons 15 or older who filed a 1990 Form 1040. Tax information has not been obtained elsewhere.			V	000011	.12000 - 12999
V	-1	.Don't know	V	000012	.13000 - 13999
V	00	.Not applicable	V	000013	.14000 - 16999
D TM9426	2	328	V	000014	.17000 - 21999
		Did the respondent file in 1990 a Schedule D - capital gains and losses	V	000015	.22000+
U Persons 15 or older who filed a 1990 Form 1040. Tax information has not been obtained elsewhere.			D TM9446	1	339
V	-1	.Don't know			On ...'s form 1040, did ... (and ...'s husband/wife) claim a child and dependent care expense credit (Form 1040, line 41)
V	00	.Not applicable	U Persons 15 or older who filed a 1990 Form 1040. Tax information has not been collected elsewhere.		
			V	0	.Not applicable
			V	1	.Yes
			V	2	.No

DATA	SIZE	BEGIN	DATA	SIZE	BEGIN
D TM9448	6	340	V	000001	.1-99
What was the amount of the child and dependent care expense credit claimed?			V	000002	.100-199
U Persons 15 or older who claimed a child and dependent care expense credit on their 1990 Form 1040. Tax information has not been collected elsewhere.			V	000003	.200-299
V	-00001	.Don't know	V	000004	.300-499
V	-00002	.Refused	V	000005	.500-699
V	00000	.Not applicable	V	000006	.700-999
V	000001	.1-49	V	000007	.1000-1299
V	000002	.50-99	V	000008	.1300-1999
V	000003	.100-149	V	000009	.2000-2999
V	000004	.150-199	V	000010	.3000-3999
V	000005	.200-249	V	000011	.4000-5999
V	000006	.250-299	V	000012	.6000-9999
V	000007	.300-349	V	000013	.10000-14999
V	000008	.350-399	V	000014	.15000+
V	000009	.400-449	V	000015	-.4 or less (losses)
V	000010	.450-499	D TM9462	6	359
V	000011	.500-599	What was ...'s (and ...'s husband's/wife's) adjusted gross income in 1990? (Adjusted gross income is total income less certain types of adjustments and exclusions.) (Form 1040, line 31; Form 1040A, line 16; Form 1040EZ, line 3)		
V	000012	.600-699	U Persons 15 or older who filed a 1990 tax return. Tax information has not been obtained elsewhere.		
V	000013	.700-799	V	-00003	.None - skip to TM9472
V	000014	.800+	V	-00002	.Refused - skip to TM9472
D TM9450	1	346	V	-00001	.Don't know - skip to TM9472
On ...'s Form 1040, did ... (and ...'s husband/wife) claim a credit for the elderly or the disabled			V	000000	.Not applicable
U Persons 15 or older who filed a 1990 Form 1040. Tax information has not been collected elsewhere.			V	000001	.[1-999]
V	0	.Not applicable	V	000002	.[1000-1199]
V	1	.Yes	V	000003	.[1200-1399]
V	2	.No	V	000004	.[1400-1599]
D TM9452	5	347	V	000005	.[1600-1799]
What was the amount of the elderly or disabled credit claimed.			V	000006	.[1800-1999]
U Persons 15 or older who claimed an elderly or disabled credit on their 1990 Form 1040. Tax information has not been collected elsewhere			V	000007	.[2000-2199]
V	-0001	.Don't know	V	000008	.[2200-2399]
V	-0002	.Refused	V	000009	.[2400-2599]
V	00000	.Not applicable	V	000010	.[2600-2799]
V	00001	.1-99	V	000011	.[2800-2999]
V	00002	.100-499	V	000012	.[3000-3499]
V	00003	.500+	V	000013	.[3500-3999]
D TM9458	1	352	V	000014	.[4000-4499]
Check item T17			V	000015	.[4500-4999]
Is "Schedule D, capital gains and losses" marked "yes" in item TM9424			V	000016	.[5000-5499]
U Persons 15 or older who filed a 1990 Form 1040. Tax information has not been collected elsewhere.			V	000017	.[5500-5999]
V	0	.Not applicable	V	000018	.[6000-6499]
V	1	.Yes	V	000019	.[6500-6999]
V	2	.No - skip to TM9462	V	000020	.[7000-7499]
D TM9460	6	353	V	000021	.[7500-7999]
How much were ...'s (and ...'s husband/wife's) capital gains or losses from the sale or exchange of personal assets for 1990? (Form 1040, line 13)			V	000022	.[8000-9999]
U Persons 15 or older who filed a 1990 Form 1040 Schedule D and have a copy. Tax information has not been collected elsewhere.			V	000023	.[10000-14999]
V	-00001	.Don't know	V	000024	.[15000-19999]
V	-00002	.Refused	V	000025	.[20000-24999]
V	-00003	.None	V	000026	.[25000-29999]
V	000000	.Not applicable	V	000027	.[30000-34999]
			V	000028	.[35000-39999]
			V	000029	.[40000-49999]
			V	000030	.[50000-59999]
			V	000031	.[60000-69999]
			V	000032	.[70000-74999]
			V	000033	.[75000+]
			V	000034	-.4 or less (losses)

**SIPP 1990 WAVE 5 TOPICAL MODULE
RESEARCH FILE (RERELEASE)**

DATA SIZE BEGIN

D TM9464 6 365
 What was ...'s (and ...'s husband's/wife's) net tax liability in 1990? (Federal income tax liability is the total tax as determined by the tax table or schedule plus or minus certain adjustments.) (Form 1040, line 54; Form 1040A, line 27; Form 1040EZ, line 7)
 U Persons 15 or older who filed a 1990 tax return. Tax information has not been obtained elsewhere.
 V -00003 .None
 V -00002 .Refused
 V -00001 .Don't know
 V 000000 .Not applicable
 V 000001 .[1-49]
 V 000002 .[50-99]
 V 000003 .[100-149]
 V 000004 .[150-199]
 V 000005 .[200-299]
 V 000006 .[300-399]
 V 000007 .[400-499]
 V 000008 .[500-599]
 V 000009 .[600-699]
 V 000010 .[700-799]
 V 000011 .[800-899]
 V 000012 .[900-999]
 V 000013 .[1000-1199]
 V 000014 .[1200-1399]
 V 000015 .[1400-1599]
 V 000016 .[1600-1799]
 V 000017 .[1800-1999]
 V 000018 .[2000-2199]
 V 000019 .[2200-2399]
 V 000020 .[2400-2599]
 V 000021 .[2600-2799]
 V 000022 .[2800-2999]
 V 000023 .[3000-3499]
 V 000024 .[3500-3999]
 V 000025 .[4000-4499]
 V 000026 .[4500-4999]
 V 000027 .[5000-5499]
 V 000028 .[5500-5999]
 V 000029 .[6000-6499]
 V 000030 .[6500-6999]
 V 000031 .[7000-7499]
 V 000032 .[7500-7999]
 V 000033 .[8000-9999]
 V 000034 .[10000-13999]
 V 000035 .[14000 +]

D TM9466 1 371
 Check item T18
 Amount of adjusted gross income reported on 1990 tax return
 U Persons 15 or older who filed a 1990 Federal tax return. Tax information has not been collected elsewhere.
 V 0 .Not applicable
 V 1 .20,264 or more - skip to TM9486
 V 2 .Less than \$20,264

D TM9472 2 372
 Did ... claim an earned income credit on ...'s 1990 Federal income tax return?
 U Persons 15 or older who filed a 1990 Federal tax return with adjusted gross income less than \$20,264. Tax information has not been collected elsewhere.
 V -1 .Don't know - skip to TM9486
 V 00 .Not applicable
 V 01 .Yes
 V 02 .No - skip to TM9486

DATA SIZE BEGIN

D TM9474 6 374
 What was the amount of earned income credit claimed? (Form 1040, line 57; Form 1040A, line 28c)
 U Persons 15 or older who claimed an earned income credit on their 1990 Federal tax return. Tax information has not been collected elsewhere.
 V -00001 .Don't know
 V -00002 .Refused
 V 000000 .Not applicable
 V 000001 . \$1-\$49
 V 000002 . \$50-\$99
 V 000003 . \$100-\$149
 V 000004 . \$150-\$199
 V 000005 . \$200-\$249
 V 000006 . \$250-\$299
 V 000007 . \$300-\$349
 V 000008 . \$350-\$399
 V 000009 . \$400-\$449
 V 000010 . \$450-\$499
 V 000011 . \$500-\$549
 V 000012 . \$550-\$599
 V 000013 . \$600-\$649
 V 000014 . \$650-\$699
 V 000015 . \$700-\$749
 V 000016 . \$750-\$799
 V 000017 . \$800-\$849
 V 000018 . \$850-\$899
 V 000019 . \$900-\$949
 V 000020 . \$950-\$999
 V 000021 . \$1000 or more

D TM9486 1 380
 Check item T19
 Housing tenure: Respondent's living quarters
 U Persons 15 years of age or older
 V 0 .Not applicable
 V 1 .Owned or being bought
 V 2 .Rented for cash - end of section
 V 3 .Occupied without cash payment - end of section

D TM9488 1 381
 Check item T20
 Interview status of ...'s spouse
 U Persons 15 or older with living quarters owned or being bought
 V 0 .Not applicable
 V 1 .No spouse in household
 V 2 .Interview for spouse not yet conducted
 V 3 .Interview for spouse already conducted - end of section

D TM9490 1 382
 Did ... pay any property taxes on ...'s residence(s) in 1990?
 U Persons 15 or older with living quarters owned or being bought. If married, property tax information has not been collected elsewhere.
 V 0 .Not applicable
 V 1 .Yes
 V 2 .No - end of section

DATA SIZE BEGIN

D TM9492 1 383

Did ... pay the 1990 property taxes jointly with someone else living here?

U Persons 15 or older with living quarters owned or being bought who paid property taxes in 1990. If married, property tax information has not been collected elsewhere.

V 0 .Not applicable

V 1 .Yes

V 2 .No - skip to TM9498

D TM9494 3 384

Respondent made joint property taxes with: Person number of Person one

U Persons 15 or older with living quarters owned or being bought who paid 1990 property taxes jointly with someone in the household. If married, property tax information has not been collected elsewhere.

V 000 .Not applicable

V 101-999 .Person number

D TM9496 3 387

Respondent made joint property taxes with: Person number of person two

U Persons 15 or older with living quarters owned or being bought who paid 1990 property taxes jointly with someone in the household. If married, property tax information has not been collected elsewhere.

V 000 .Not applicable

V 101-999 .Person number

DATA SIZE BEGIN

D TM9498 6 390

What was the property tax bill for ...'s residence(s) in 1990? (Schedule A, line 6)

U Persons 15 or older with living quarters owned or being bought who paid property taxes in 1990. If married, property tax information has not been collected elsewhere.

V -00001 .Don't know

V -00002 .Refused

V 000000 .Not applicable

V 000001 .Amount under \$100

V 000002 .Amount from \$100-\$199

V 000003 .Amount from \$200-\$299

V 000004 .Amount from \$300-\$399

V 000005 .Amount from \$400-\$499

V 000006 .Amount from \$500-\$599

V 000007 .Amount from \$600-\$699

V 000008 .Amount from \$700-\$799

V 000009 .Amount from \$800-\$899

V 000010 .Amount from \$900-\$999

V 000011 .Amount from \$1000-\$1099

V 000012 .Amount from \$1100-\$1199

V 000013 .Amount from \$1200-\$1299

V 000014 .Amount from \$1300-\$1499

V 000015 .Amount from \$1500-\$1799

V 000016 .Amount from \$1800-\$2099

V 000017 .Amount from \$2100 or more

D TMPICNT 2 396

Number of items with data on the taxes topical module

U Persons 15 or older

D FILLER3 3 398

Blank or zero filler

APPENDIX A-1

Income Source Code List

Code Income Sources

- 1 - Social Security
- 2 - U.S. Government Railroad Retirement pay
- 3 - Federal Supplemental Security Income (SSI)
- 5 - State unemployment compensation
- 6 - Supplemental Unemployment Benefits
- 7 - Other unemployment compensation (Trade Adjustment Act benefits, strike pay, other)
- 8 - Veterans compensation or pensions
- 10 - Worker's compensation
- 12 - Employer or union temporary sickness policy
- 13 - Payments from a sickness, accident or disability insurance policy purchased on your own
- 20 - Aid to Families with Dependent Children (AFDC, ADC)
- 21 - General assistance or General relief
- 23 - Foster child care payments
- 24 - Other welfare
- 25 - WIC (Women, Infants and Children) Nutrition Program
- 27 - Food stamps
- 28 - Child support payments
- 29 - Alimony payments
- 30 - Pension from company or union
- 31 - Federal Civil Service or other Federal civilian employee pensions
- 32 - U.S. Military retirement pay
- 34 - State government pensions
- 35 - Local government pensions
- 36 - Income from paid-up life insurance policies or annuities
- 37 - Estates and trusts
- 38 - Other payments for retirement, disability or survivor
- 40 - G.I. Bill/VEAP education benefits
- 41 - Other VA educational assistance
- 50 - Income assistance from a charitable group
- 51 - Money from relatives or friends
- 52 - Lump sum payments
- 53 - Income from roomers or boarders
- 54 - National Guard or Reserve pay
- 55 - Incidental or casual earnings
- 56 - Other cash income not included elsewhere
- 75 - Categories combined and recoded for confidentiality reasons
 - State Administered Supplemental Security Income (old code 4)
 - Black lung payments (old code 9)
 - State temporary sickness or disability benefits (old code 11)
 - Indian, Cuban, or Refugee Assistance (old code 22)
 - National Guard or Reserve Force retirement (old code 33)

SIPP FILES

Code Asset List

- 100 - Regular/passbook savings accounts in a bank, savings and loan or credit union
- 101 - Money market deposit accounts
- 102 - Certificates of Deposit or other savings certificates
- 103 - NOW, Super NOW or other interest earning checking accounts
- 104 - Money market funds
- 105 - U.S. Government securities
- 106 - Municipal or corporate bonds
- 107 - Other interest-earning assets
- 110 - Stocks or mutual fund shares
- 120 - Rental property
- 130 - Mortgages
- 140 - Royalties
- 150 - Other financial investments

Code Special Indicators

- 170 - Worked
- 171 - Disabled
- 172 - Medicare
- 173 - Medicaid
- 174 - U.S. Saving Bonds (E, EE)
- 175 - College Work Study
- 176 - PELL Grant
- 177 - Supplemental Educational Opportunity Grant (SEOG)
- 178 - National Direct Student Loan (NSL)
- 179 - Guaranteed Student Loan
- 180 - JTPA Training
- 181 - Employer assistance
- 182 - Fellowship/Scholarship
- 183 - Other financial aid
- 200 - VA disability rating of 100%
- 201 - VA disability of less than 100%

APPENDIX A-2

Income Sources Included in Monthly Cash Income

Earnings from Employment

Wages and salaries
Nonfarm self-employment income
Farm self-employment income

Income from Assets (Property Income)

Regular/passbook savings accounts in a bank, savings and loan or credit union
Money market deposit accounts
Certificates of Deposit or other savings certificates
NOW, Super NOW or other interest-earning checking accounts
Money market funds
U.S. Government securities
Municipal or corporate bonds
Other interest-earning assets
Stocks or mutual fund shares
Rental property
Mortgages
Royalties
Other financial investments

Other Income Sources

Social Security
U.S. Government Railroad Retirement pay
Federal Supplemental Security Income (SSI)
State Administered Supplemental Security Income
State unemployment compensation
Supplemental Unemployment Benefits
Other unemployment compensation (Trade Adjustment Act benefits, strike pay, other)
Veterans compensation or pensions
Black lung payments
Worker's compensation
State temporary sickness or disability benefits
Payments from a sickness, accident or disability insurance policy purchased on your own
Aid to Families with Dependent Children (AFDC, ADC)
General Assistance or General Relief
Indian, Cuban, or Refugee Assistance
Foster child care payments
Other welfare
Child support payments
Alimony payments
Pension from company or union
Federal Civil Service or other Federal civilian employee pensions
U.S. Military retirement pay
National Guard or Reserve Forces retirement
State government pensions
Local government pensions
Income from paid-up life insurance policies or annuities
Estates and trusts

SIPP FILES

Other payments for retirement, disability or survivor benefits
G.I. Bill/VEAP education benefits
Income assistance from a charitable group
Money from relatives or friends
Lump sum payments
Income from roomers or boarders
National Guard or Reserve pay
Incidental or casual earnings
Other cash income not included elsewhere

APPENDIX A-3

Sources of Means-Tested Benefits Covered in SIPP

Cash Benefits

Federal Supplemental Security Income (SSI)
State Administered Supplemental Security Income
Veterans' pensions
Aid to Families with Dependent Children (AFDC, ADC)
General Assistance or General Relief
Indian, Cuban, or Refugee Assistance
Other welfare
Foster child care payments

Noncash Benefits

Food Stamps
Special Supplemental Food Program for Women, Infants, and Children (WIC)
Low-Income Home Energy Assistance
Medicaid
Free or reduced price school lunches
Free or reduced price school breakfasts
Public or subsidized rental housing

APPENDIX A-4

1980 Census of Population Occupation Classification System

(The numbers in parentheses refer to the 1980 Standard Occupational Classification code equivalents. Pt means part. N.e.c. means not elsewhere classified.)

MANAGERIAL AND PROFESSIONAL SPECIALTY OCCUPATIONS

1980 Code	Executive, Administrative, and Managerial Occupations
003	Legislators (111)
004	Chief executives and general administrators, public administration (112)
005	Administrators and officials, public administration (1132-1139)
006	Administrators, protective services (1131)
007	Financial managers (122)
008	Personnel and labor relations managers (123)
009	Purchasing managers (124)
013	Managers, marketing, advertising, and public relations (125)
014	Administrators, education and related fields (128)
015	Managers, medicine and health (131)
016	Managers, properties and real estate (1353)
017	Postmasters and mail superintendents (1344)
018	Funeral directors (pt 1359)
019	Managers and administrators, n.e.c. (121, 126, 127, 132-139, exc. 1344, 1353, pt 1359)
	Management related occupations
023	Accountants and auditors (1412)
024	Underwriters (1414)
025	Other financial officers (1415, 1419)
026	Management analysts (142)
027	Personnel, training, and labor relations specialists (143)
028	Purchasing agents and buyers, farm products (1443)
029	Buyers, wholesale and retail trade except farm products (1442)
033	Purchasing agents and buyers, n.e.c. (1449)
034	Business and promotion agents (145)
035	Construction inspectors (1472)
036	Inspectors and compliance officers, exc. construction (1473)
037	Management related occupations, n.e.c. (149)

Professional Specialty Occupations

Engineers, Architects, and Surveyors

043	Architects (161)
	Engineers
044	Aerospace (1622)
045	Metallurgical and materials (1623)
046	Mining (1624)
047	Petroleum (1625)
048	Chemical (1626)
049	Nuclear (1627)
053	Civil (1628)
054	Agricultural (1632)
055	Electrical and electronic (1633, 1636)
056	Industrial (1634)
057	Mechanical (1635)

SIPP FILES

058	Marine and naval architects (1637)
059	Engineers, n.e.c. (1639)
063	Surveyors and mapping scientists (164)
	Mathematical and Computer Scientists
064	Computer systems analysts and scientists (171)
065	Operations and systems researchers and analysts (172)
066	Actuaries (1732)
067	Statisticians (1733)
068	Mathematical scientists, n.e.c. (1739)
	Natural Scientists
069	Physicists and astronomers (1842, 1843)
073	Chemists, except biochemists (1845)
074	Atmospheric and space scientists (1846)
075	Geologists and geodesists (1847)
076	Physical scientists, n.e.c. (1849)
077	Agricultural and food scientists (1853)
078	Biological and life scientists (1854)
079	Forestry and conservation scientists (1852)
083	Medical scientists (1855)
	Health Diagnosing Occupations
084	Physicians (261)
085	Dentists (262)
086	Veterinarians (27)
087	Optometrists (281)
088	Podiatrists (283)
089	Health diagnosing practitioners, n.e.c. (289)
	Health Assessment and Treating Occupations
095	Registered nurses (29)
096	Pharmacists (301)
097	Dietitians (302)
	Therapists
098	Inhalation therapists (3031)
099	Occupational therapists (3032)
103	Physical therapists (3033)
104	Speech therapists (3034)
105	Therapists, n.e.c. (3039)
106	Physicians' assistants (304)
	Teachers, Postsecondary
113	Earth, environmental, and marine science teachers (2212)
114	Biological science teachers (2213)
115	Chemistry teachers (2214)
116	Physics teachers (2215)
117	Natural science teachers, n.e.c. (2216)
118	Psychology teachers (2217)
119	Economics teachers (2218)
123	History teachers (2222)
124	Political science teachers (2223)
125	Sociology teachers (2224)
126	Social science teachers, n.e.c. (2225)
127	Engineering teachers (2226)
128	Mathematical science teachers (2227)
129	Computer science teachers (2228)
133	Medical science teachers (2231)
134	Health specialties teachers (2232)
135	Business, commerce, and marketing teachers (2233)
136	Agriculture and forestry teachers (2234)

137	Art, drama, and music teachers (2235)
138	Physical education teachers (2236)
139	Education teachers (2237)
143	English teachers (2238)
144	Foreign language teachers (2242)
145	Law teachers (2243)
146	Social work teachers (2244)
147	Theology teachers (2245)
148	Trade and industrial teachers (2246)
149	Home economics teachers (2247)
153	Teachers, postsecondary, n.e.c. (2249)
154	Postsecondary teachers, subject not specified
	Teachers, Except Postsecondary
155	Teachers, prekindergarten and kindergarten (231)
N(156)	Teachers, elementary school (232)
P(157)	Teachers, secondary school (233)
158	Teachers, special education (235)
159	Teachers, n.e.c. (236, 239)
163	Counselors, educational and vocational (24)
	Librarians, Archivists, and Curators
164	Librarians (251)
165	Archivists and curators (252)
	Social Scientists and Urban Planners
166	Economists (1912)
167	Psychologists (1915)
168	Sociologists (1916)
169	Social scientists, n.e.c. (1913, 1914, 1919)
173	Urban planners (192)
	Social, Recreation, and Religious Workers
174	Social workers (2032)
175	Recreation workers (2033)
176	Clergy (2042)
177	Religious workers, n.e.c. (2049)
	Lawyers and Judges
178	Lawyers (211)
179	Judges (212)
	Writers, Artists, Entertainers, and Athletes
183	Authors (321)
184	Technical writers (398)
185	Designers (322)
186	Musicians and composers (323)
187	Actors and directors (324)
188	Painters, sculptors, craft-artists, and artist printmakers (325)
189	Photographers (326)
193	Dancers (327)
194	Artists, performers, and related workers, n.e.c. (328, 329)
195	Editors and reporters (331)
197	Public relations specialists (332)
198	Announcers (333)
199	Athletes (34)

TECHNICAL, SALES, AND ADMINISTRATIVE SUPPORT OCCUPATIONS**Technicians and Related Support Occupations****Health Technologists and Technicians**

- 203 Clinical laboratory technologists and technicians (362)
- 204 Dental hygienists (363)
- 205 Health record technologists and technicians (364)
- 206 Radiologic technicians (365)
- 207 Licensed practical nurses (366)
- 208 Health technologists and technicians, n.e.c. (369)

Technologists and Technicians, Except Health**Engineering and Related Technologists and Technicians**

- 213 Electrical and electronic technicians (3711)
- 214 Industrial engineering technicians (3712)
- 215 Mechanical engineering technicians (3713)
- 216 Engineering technicians, n.e.c. (3719)
- 217 Drafting occupations (372)
- 218 Surveying and mapping technicians (373)

Science Technicians

- 223 Biological technicians (382)
- 224 Chemical technicians (3831)
- 225 Science technicians, n.e.c. (3832, 3833, 384, 389)

Technicians; Except Health, Engineering, and Science

- 226 Airplane pilots and navigators (825)
- 227 Air traffic controllers (392)
- 228 Broadcast equipment operators (393)
- 229 Computer programmers (3971, 3972)
- 233 Tool programmers, numerical control (3974)
- 234 Legal assistants (396)
- 235 Technicians, n.e.c. (399)

Sales Occupations

- 243 Supervisors and proprietors, sales occupations (40)
- Sales Representatives, Finance and Business Services
- 253 Insurance sales occupations (4122)
- 254 Real estate sales occupations (4123)
- 255 Securities and financial services sales occupations (4124)
- 256 Advertising and related sales occupations (4153)
- 257 Sales occupations, other business services (4152)
- Sales Representatives, Commodities Except Retail
- 258 Sales engineers (421)
- 259 Sales representatives, mining, manufacturing, and wholesale (423, 424)
- Sales Workers, Retail and Personal Services
- 263 Sales workers, motor vehicles and boats (4342, 4344)
- 264 Sales workers, apparel (4346)
- 265 Sales workers, shoes (4351)
- 266 Sales workers, furniture and home furnishings (4348)
- 267 Sales workers; radio, TV, hi-fi, and appliances (4343, 4352)
- 268 Sales workers, hardware and building supplies (4353)
- 269 Sales workers, parts (4367)
- 274 Sales workers, other commodities (4345, 4347, 4354, 4356, 4359, 4362, 4369)
- 275 Sales counter clerks (4363)
- Q(276) Cashiers (4364)
- 277 Street and door-to-door sales workers (4366)

278	News vendors (4365)
	Sales Related Occupations
283	Demonstrators, promoters and models, sales (445)
284	Auctioneers (447)
285	Sales support occupations, n.e.c. (444, 446, 449)

Administrative Support Occupations, Including Clerical

	Supervisors, Administrative Support Occupations
303	Supervisors, general office (4511, 4513, 4514, 4516, 4519, 4529)
304	Supervisors, computer equipment operators (4512)
305	Supervisors, financial records processing (4521)
306	Chief communications operators (4523)
307	Supervisors; distribution, scheduling, and adjusting clerks (4522, 4524-4528)
	Computer Equipment Operators
308	Computer operators (4612)
309	Peripheral equipment operators (4613)
	Secretaries, Stenographers, and Typists
R(313)	Secretaries (4622)
314	Stenographers (4623)
315	Typists (4624)
	Information Clerks
316	Interviewers (4642)
317	Hotel clerks (4643)
318	Transportation ticket and reservation agents (4644)
319	Receptionists (4645)
323	Information clerks, n.e.c. (4649)
	Records Processing Occupations, Except Financial
325	Classified-ad clerks (4662)
326	Correspondence clerks (4663)
327	Order clerks (4664)
328	Personnel clerks, except payroll and timekeeping (4692)
329	Library clerks (4694)
335	File clerks (4696)
336	Records clerks (4699)
	Financial Records Processing Occupations
S(337)	Bookkeepers, accounting, and auditing clerks (4712)
338	Payroll and timekeeping clerks (4713)
339	Billing clerks (4715)
343	Cost and rate clerks (4716)
344	Billing, posting, and calculating machine operators (4718)
	Duplicating, Mail and Other Office Machine Operators
345	Duplicating machine operators (4722)
346	Mail preparing and paper handling machine operators (4723)
347	Office machine operators, n.e.c. (4729)
	Communications Equipment Operators
348	Telephone operators (4732)
349	Telegraphers (4733)
353	Communications equipment operators, n.e.c. (4739)
	Mail and Message Distributing Occupations
354	Postal clerks, exc. mail carriers (4742)
355	Mail carriers, postal service (4743)
356	Mail clerks, exc. postal service (4744)
357	Messengers (4745)
	Material Recording, Scheduling, and Distributing Clerks
359	Dispatchers (4751)

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- 363 Production coordinators (4752)
- 364 Traffic, shipping, and receiving clerks (4753)
- 365 Stock and inventory clerks (4754)
- 366 Meter readers (4755)
- 368 Weighers, measurers, and checkers (4756)
- 369 Samplers (4757)
- 373 Expeditors (4758)
- 374 Material recording, scheduling, and distributing clerks, n.e.c. (4759)
- Adjusters and Investigators
- 375 Insurance adjusters, examiners, and investigators (4782)
- 376 Investigators and adjusters, except insurance (4783)
- 377 Eligibility clerks, social welfare (4784)
- 378 Bill and account collectors (4786)
- Miscellaneous Administrative Support Occupations
- 379 General office clerks (463)
- 383 Bank tellers (4791)
- 384 Proofreaders (4792)
- 385 Data-entry keyers (4793)
- 386 Statistical clerks (4794)
- 387 Teachers' aides (4795)
- 389 Administrative support occupations, n.e.c. (4787, 4799)

SERVICE OCCUPATIONS

Private Household Occupations

- 403 Launderers and ironers (503)
- 404 Cooks, private household (504)
- 405 Housekeepers and butlers (505)
- 406 Child care workers, private household (506)
- T(407) Private household cleaners and servants (502, 507, 509)

Protective Service Occupations

- Supervisors, Protective Service Occupations
- 413 Supervisors, firefighting and fire prevention occupations (5111)
- 414 Supervisors, police and detectives (5112)
- 415 Supervisors, guards (5113)
- Firefighting and Fire Prevention Occupations
- 416 Fire inspection and fire prevention occupations (5122)
- 417 Firefighting occupations (5123)
- Police and Detectives
- 418 Police and detectives, public service (5132)
- 423 Sheriffs bailiffs, and other law enforcement officers (5134)
- 424 Correctional institution officers (5133)
- Guards
- 425 Crossing guards (5142)
- 426 Guards and police, exc. public service (5144)
- 427 Protective service occupations, n.e.c. (5149)

Service Occupations, Except Protective and Household

- Food Preparation and Service Occupations
- 433 Supervisors, food preparation and service occupations (5211)
- 434 Bartenders (5212)
- U(435) Waiters and waitresses (5213)

436	Cooks, except short order (5214)
437	Short-order cooks (5215)
438	Food counter, fountain and related occupations (5216)
439	Kitchen workers, food preparation (5217)
443	Waiters'/waitresses' assistants (5218)
444	Miscellaneous food preparation occupations (5219)
	Health Service Occupations
445	Dental assistants (5232)
446	Health aides, except nursing (5233)
447	Nursing aides, orderlies, and attendants (5236)
	Cleaning and Building Service Occupations, except Household
448	Supervisors, cleaning and building service workers (5241)
449	Maids and housemen (5242, 5249)
V(453)	Janitors and cleaners (5244)
454	Elevator operators (5245)
455	Pest control occupations (5246)
	Personal Service Occupations
456	Supervisors, personal service occupations (5251)
457	Barbers (5252)
458	Hairdressers and cosmetologists (5253)
459	Attendants, amusement and recreation facilities (5254)
463	Guides (5255)
464	Ushers (5256)
465	Public transportation attendants (5257)
466	Baggage porters and bellhops (5262)
467	Welfare service aides (5263)
468	Child care workers, except private household (5264)
469	Personal service occupations, n.e.c. (5258, 5269)

FARMING, FORESTRY, AND FISHING OCCUPATIONS

Farm Operators and Managers

W(473)	Farmers, except horticultural (5512-5514)
474	Horticultural specialty farmers (5515)
475	Managers, farms, except horticultural (5522-5524)
476	Managers, horticultural specialty farms (5525)

Other Agricultural and Related Occupations

	Farm Occupations, Except Managerial
477	Supervisors, farm workers (5611)
479	Farm workers (5612-5617)
483	Marine life cultivation workers (5618)
484	Nursery workers (5619)
	Related Agricultural Occupations
485	Supervisors, related agricultural occupations (5621)
486	Groundskeepers and gardeners, except farm (5622)
487	Animal caretakers, except farm (5624)
488	Graders and sorters, agricultural products (5625)
489	Inspectors, agricultural products (5627)

Forestry and Logging Occupations

- 494 Supervisors, forestry, and logging workers (571)
- 495 Forestry workers, except logging (572)
- 496 Timber cutting and logging occupations (573, 579)

Fishers, Hunters, and Trappers

- 497 Captains and other officers, fishing vessels (pt 8241)
- 498 Fishers (583)
- 499 Hunters and trappers (584)

PRECISION PRODUCTION, CRAFT, AND REPAIR OCCUPATIONS**Mechanics and Repairers**

- 503 Supervisors, mechanics and repairers (60)
- Mechanics and Repairers, Except Supervisors
 - Vehicle and Mobile Equipment Mechanics and Repairers
 - X(505) Automobile mechanics (pt 6111)
 - 506 Automobile mechanic apprentices (pt 6111)
 - 507 Bus, truck, and stationary engine mechanics (6112)
 - 508 Aircraft engine mechanics (6113)
 - 509 Small engine repairers (6114)
 - 514 Automobile body and related repairers (6115)
 - 515 Aircraft mechanics, exc. engine (6116)
 - 516 Heavy equipment mechanics (6117)
 - 517 Farm equipment mechanics (6118)
 - 518 Industrial machinery repairers (613)
 - 519 Machinery maintenance occupations (614)
 - Electrical and Electronic Equipment Repairers
 - 523 Electronic repairers, communications and industrial equipment (6151, 6153, 6155)
 - 525 Data processing equipment repairers (6154)
 - 526 Household appliance and power tool repairers (6156)
 - 527 Telephone line installers and repairers (6157)
 - 529 Telephone installers and repairers (6158)
 - 533 Miscellaneous electrical and electronic equipment repairers (6152, 6159)
 - 534 Heating, air conditioning, and refrigeration mechanics (6161)
 - Miscellaneous Mechanics and Repairers
 - 535 Camera, watch, and musical instrument repairers (6171, 6172)
 - 536 Locksmiths and safe repairers (6173)
 - 538 Office machine repairers (6174)
 - 539 Mechanical controls and valve repairers (6175)
 - 543 Elevator installers and repairers (6176)
 - 544 Millwrights (6178)
 - 547 Specified mechanics and repairers, n.e.c. (6177, 6179)
 - 549 Not specified mechanics and repairers

Construction Trades**Supervisors, construction occupations**

- 553 Supervisors; brickmasons, stonemasons, and tile setters (6312)
- 554 Supervisors, carpenters and related workers (6313)
- 555 Supervisors, electricians and power transmission installers (6314)
- 556 Supervisors; painters, paperhangers, and plasterers (6315)
- 557 Supervisors; plumbers, pipefitters, and steamfitters (6316)

558	Supervisors, n.e.c. (6311, 6318)
	Construction Trades, Except Supervisors
563	Brickmasons and stonemasons (pt 6412, pt 6413)
564	Brickmason and stonemason apprentices (pt 6412, pt 6413)
565	Tile setters, hard and soft (6414, pt 6462)
566	Carpet installers (pt 6462)
Y(567)	Carpenters (pt 6422)
569	Carpenter apprentices (pt 6422)
573	Drywall installers (6424)
575	Electricians (pt 6432)
576	Electrician apprentices (pt 6432)
577	Electrical power installers and repairers (6433)
579	Painters, construction and maintenance (6442)
583	Paperhangers (6443)
584	Plasterers (6444)
585	Plumbers, pipefitters, and steamfitters (pt 645)
587	Plumber, pipefitter, and steamfitter apprentices (pt 645)
588	Concrete and terrazzo finishers (6463)
589	Glaziers (6464)
593	Insulation workers (6465)
594	Paving, surfacing, and tamping equipment operators (6466)
595	Roofers (6468)
596	Sheetmetal duct installers (6472)
597	Structural metal workers (6473)
598	Drillers, earth (6474)
599	Construction trades, n.e.c. (6467, 6475, 6476, 6479)
	Extractive Occupations
613	Supervisors, extractive occupations (632)
614	Drillers, oil well (652)
615	Explosives workers (653)
616	Mining machine operators (654)
617	Mining occupations, n.e.c. (656)
	Precision Production Occupations
633	Supervisors, production occupations (67, 71)
	Precision Metal Working Occupations
634	Tool and die makers (pt 6811)
635	Tool and die maker apprentices (pt 6811)
636	Precision assemblers, metal (6812)
637	Machinists (pt 6813)
639	Machinist apprentices (pt 6813)
643	Boilermakers (6814)
644	Precision grinders, filers, and tool sharpeners (6816)
645	Patternmakers and model makers, metal (6817)
646	Lay-out workers (6821)
647	Precious stones and metals workers (Jewelers) (6822, 6866)
649	Engravers, metal (6823)
653	Sheet metal workers (pt 6824)
654	Sheet metal worker apprentices (pt 6824)
655	Miscellaneous precision metal workers (6829)
	Precision Woodworking Occupations
656	Patternmakers and model makers, wood (6831)
657	Cabinet makers and bench carpenters (6832)
658	Furniture and wood finishers (6835)
659	Miscellaneous precision woodworkers (6839)
	Precision Textile, Apparel, and Furnishings Machine Workers
666	Dressmakers (pt 6852, pt 7752)

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- 667 Tailors (pt 6852)
- 668 Upholsterers (6853)
- 669 Shoe repairers (6854)
- 673 Apparel and fabric patternmakers (6856)
- 674 Miscellaneous precision apparel and fabric workers (6859, pt 7752)
- Precision Workers, Assorted Materials
- 675 Hand molders and shapers, except jewelers (6861)
- 676 Patternmakers, lay-out workers, and cutters (6862)
- 677 Optical goods workers (6864, pt 7477, pt 7677)
- 678 Dental laboratory and medical appliance technicians (6865)
- 679 Bookbinders (6844)
- 683 Electrical and electronic equipment assemblers (6867)
- 684 Miscellaneous precision workers, n.e.c. (6869)
- Precision Food Production Occupations
- 686 Butchers and meat cutters (6871)
- 687 Bakers (6872)
- 688 Food batchmakers (6873, 6879)
- Precision Inspectors, Testers, and Related Workers
- 689 Inspectors, testers, and graders (6881, 828)
- 693 Adjusters and calibrators (6882)
- Plant and System Operators
- 694 Water and sewage treatment plant operators (691)
- 695 Power plant operators (pt 693)
- 696 Stationary engineers (pt 693, 7668)
- 699 Miscellaneous plant and system operators (692, 694, 695, 696)

OPERATORS, FABRICATORS, AND LABORERS

Machine Operators, Assemblers, and Inspectors

Machine Operators and Tenders, except Precision

Metal working and Plastic Working Machine Operators

- 703 Lathe and turning machine set-up operators (7312)
- 704 Lathe and turning machine operators (7512)
- 705 Milling and planing machine operators (7313, 7513)
- 706 Punching and stamping press machine operators (7314, 7317, 7514, 7517)
- 707 Rolling machine operators (7316, 7516)
- 708 Drilling and boring machine operators (7318, 7518)
- 709 Grinding, abrading, buffing, and polishing machine operators (7322, 7324, 7522)
- 713 Forging machine operators (7319, 7519)
- 714 Numerical control machine operators (7326)
- 715 Miscellaneous metal, plastic, stone, and glass working machine operators (7329, 7529)
- 717 Fabricating machine operators, n.e.c. (7339, 7539)

Metal and Plastic Processing Machine Operators

- 719 Molding and casting machine operators (7315, 7342, 7515, 7542)
- 723 Metal plating machine operators (7343, 7543)
- 724 Heat treating equipment operators (7344, 7544)
- 725 Miscellaneous metal and plastic processing machine operators (7349, 7549)

Woodworking Machine Operators

- 726 Wood lathe, routing, and planing machine operators (7431, 7432, 7631, 7632)
- 727 Sawing machine operators (7433, 7633)
- 728 Shaping and joining machine operators (7435, 7635)
- 729 Nailing and tacking machine operators (7636)
- 733 Miscellaneous woodworking machine operators (7434, 7439, 7634, 7639)

Printing Machine Operators

- 734 Printing machine operators (7443, 7643)
- 735 Photoengravers and lithographers (6842, 7444, 7644)
- 736 Typesetters and compositors (6841, 7642)
- 737 Miscellaneous printing machine operators (6849, 7449, 7649)

Textile, Apparel, and Furnishings Machine Operators

- 738 Winding and twisting machine operators (7451, 7651)
- 739 Knitting, looping, taping, and weaving machine operators (7452, 7652)
- 743 Textile cutting machine operators (7654)
- 744 Textile sewing machine operators (7655)
- 745 Shoe machine operators (7656)
- 747 Pressing machine operators (7657)
- 748 Laundering and dry cleaning machine operators (6855, 7658)
- 749 Miscellaneous textile machine operators (7459, 7659)

Machine Operators, Assorted Materials

- 753 Cementing and gluing machine operators (7661)
- 754 Packaging and filling machine operators (7462, 7662)
- 755 Extruding and forming machine operators (7463, 7663)
- 756 Mixing and blending machine operators (7664)
- 757 Separating, filtering, and clarifying machine operators (7476, 7666, 7676)
- 758 Compressing and compacting machine operators (7467, 7667)
- 759 Painting and paint spraying machine operators (7669)
- 763 Roasting and baking machine operators, food (7472, 7672)
- 764 Washing, cleaning, and pickling machine operators (7673)
- 765 Folding machine operators (7474, 7674)
- 766 Furnace, kiln, and oven operators, exc. food (7675)
- 768 Crushing and grinding machine operators (pt 7477, pt 7677)
- 769 Slicing and cutting machine operators (7478, 7678)
- 773 Motion picture projectionists (pt 7479)
- 774 Photographic process machine operators (6863, 6868, 7671)
- 777 Miscellaneous machine operators, n.e.c. (pt 7479, 7665, 7679)
- 779 Machine operators, not specified

Fabricators, Assemblers, and Hand Working Occupations

- 783 Welders and cutters (7332, 7532, 7714)
- 784 Solderers and brazers (7333, 7533, 7717)
- 785 Assemblers (772, 774)
- 786 Hand cutting and trimming occupations (7753)
- 787 Hand molding, casting, and forming occupations (7754, 7755)
- 789 Hand painting, coating, and decorating occupations (7756)
- 793 Hand engraving and printing occupations (7757)
- 794 Hand grinding and polishing occupations (7758)
- 795 Miscellaneous hand working occupations (7759)

Production Inspectors, Testers, Samplers, and Weighers

- 796 Production inspectors, checkers, and examiners (782, 787)
- 797 Production testers (783)
- 798 Production samplers and weighers (784)
- 799 Graders and sorters, exc. agricultural (785)

Transportation and Material Moving Occupations**Motor Vehicle Operators**

- 803 Supervisors, motor vehicle operators (8111)
- 804 Truck drivers, heavy (8212, 8213)
- 805 Truck drivers, light (8214)
- 806 Driver-sales workers (8218)
- 808 Bus drivers (8215)

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- 809 Taxicab drivers and chauffeurs (8216)
- 813 Parking lot attendants (874)
- 814 Motor transportation occupations, n.e.c. (8219)
- Transportation Occupations, Except Motor Vehicles
- Rail Transportation Occupations
- 823 Railroad conductors and yardmasters (8113)
- 824 Locomotive operating occupations (8232)
- 825 Railroad brake, signal, and switch operators (8233)
- 826 Rail vehicle operators, n.e.c. (8239)
- Water Transportation Occupations
- 828 Ship captains and mates, except fishing boats (pt 8241, 8242)
- 829 Sailors and deckhands (8243)
- 833 Marine engineers (8244)
- 834 Bridge, lock, and lighthouse tenders (8245)
- Material Moving Equipment Operators
- 843 Supervisors, material moving equipment operators (812)
- 844 Operating engineers (8312)
- 845 Longshore equipment operators (8313)
- 848 Hoist and winch operators (8314)
- 849 Crane and tower operators (8315)
- 853 Excavating and loading machine operators (8316)
- 855 Grader, dozer, and scraper operators (8317)
- 856 Industrial truck and tractor equipment operators (8318)
- 859 Miscellaneous material moving equipment operators (8319)

Handlers, Equipment Cleaners, Helpers, and Laborers

- 863 Supervisors, handlers, equipment cleaners, and laborers, n.e.c. (85)
- 864 Helpers, mechanics and repairers (863)
- Helpers, Construction and Extractive Occupations
- 865 Helpers, construction trades (8641-8645, 8648)
- 866 Helpers, surveyor (8646)
- 867 Helpers, extractive occupations (865)
- 869 Construction laborers (871)
- 873 Production helpers (861, 862)
- Freight, Stock, and Material Handlers
- 875 Garbage collectors (8722)
- 876 Stevedores (8723)
- 877 Stock handlers and baggers (8724)
- 878 Machine feeders and offbearers (8725)
- 883 Freight, stock, and material handlers, n.e.c. (8726)
- 885 Garage and service station related occupations (873)
- 887 Vehicle washers and equipment cleaners (875)
- 888 Hand packers and packagers (8761)
- 889 Laborers, except construction (8769)
- 905 Member of the Armed Forces

APPENDIX A-5

1980 Census of Population Industry Classification System

(Alphabets parentheses are the 1972 SIC code equivalents ¹)

Census
Code

AGRICULTURE, FORESTRY, AND FISHERIES

- 010 (A) Agricultural production, crops (01)
- 011 Agricultural production, livestock (02)
- 020 Agricultural services, except horticultural (07, except 078)
- 021 Horticultural services (078)
- 030 Forestry (08)
- 031 Fishing, hunting, and trapping (09)

MINING

- 040 Metal mining (10)
- 041 Coal mining (11, 12)
- 042 Crude petroleum and natural gas extraction (13)
- 050 Nonmetallic mining and quarrying, except fuel (14)

- 060 (B) CONSTRUCTION (15, 16, 17)

MANUFACTURING

Nondurable Goods

Food and kindred products

- 100 Meat products (201)
- 101 Dairy products (202)
- 102 Canned and preserved fruits and vegetables (203)
- 110 Grain mill products (204)
- 111 Bakery products (205)
- 112 Sugar and confectionery products (206)
- 120 Beverage industries (208)
- 121 Miscellaneous food preparations and kindred products (207, 209)
- 122 Not specified food industries
- 130 Tobacco manufactures (21)

Textile mill products

- 132 Knitting mills (225)
- 140 Dyeing and finishing textiles, except wool and knit goods (226)
- 141 Floor coverings, except hard surface (227)
- 142 Yarn, thread, and fabric mills (221-224, 228)
- 150 Miscellaneous textile mill products (229)

¹ See Executive Office of the President, Office of Management and Budget, Standard Industrial Classification Manual, 1972 and the 1977 Supplement.

SIPP FILES

- Apparel and other finished textile products
- 151 Apparel and accessories, except knit (231-238)
- 152 Miscellaneous fabricated textile products (239)
- Paper and allied products
- 160 Pulp, paper, and paperboard mills (261-263, 266)
- 161 Miscellaneous paper and pulp products (264)
- 162 Paperboard containers and boxes (265)
- Printing, publishing, and allied industries
- 171 (C) Newspaper publishing and printing (271)
- 172 Printing, publishing, and allied industries, except newspapers (272-279)
- Chemicals and allied products
- 180 Plastics, synthetics, and resins (282)
- 181 Drugs (283)
- 182 Soaps and cosmetics (284)
- 190 Paints, varnishes, and related products (287)
- 191 Agricultural chemicals (287)
- 192 Industrial and miscellaneous chemicals (281, 286, 289)
- Petroleum and coal products
- 200 Petroleum refining (291)
- 201 Miscellaneous petroleum and coal products (295, 299)
- Rubber and miscellaneous plastics products
- 210 Tires and inner tubes (301)
- 211 Other rubber products, and plastics footwear and belting (302-304, 306)
- 212 Miscellaneous plastics products (307)
- Leather and leather products
- 220 Leather tanning and finishing (311)
- 221 Footwear, except rubber and plastic (313, 314)
- 222 Leather products, except footwear (315-317, 319)

- Durable Goods**

- Lumber and wood products, except furniture
- 230 Logging (241)
- 231 Sawmills, planing mills, and millwork (242, 243)
- 232 Wood buildings and mobile homes (245)
- 241 Miscellaneous wood products (244, 249)
- 242 Furniture and fixtures (25)
- Stone, clay, glass, and concrete products
- 250 Glass and glass products (321-323)
- 251 Cement, concrete, gypsum, and plaster products (324, 327)
- 252 Structural clay products (325)
- 261 Pottery and related products (326)
- 262 Miscellaneous nonmetallic mineral and stone products (328, 329).
- Metal industries
- 270 Blast furnaces, steelworks, rolling and finishing mills (331)
- 271 Iron and steel foundries (332)
- 272 Primary aluminum industries (3334, part 334, 3353-3355, 3361)
- 280 Other primary metal industries (3331-3333, 3339, part 334, 3351, 3356, 3357, 3362, 3369, 339)
- 281 Cutlery, handtools, and other hardware (342)
- 282 Fabricated structural metal products (344)
- 290 Screw machine products (345)
- 291 Metal forgings and stampings (346)
- 292 Ordnance (348)

300	Miscellaneous fabricated metal products (341, 343, 347, 349)
301	Not specified metal industries
	Machinery, except electrical
310	Engines and turbines (351)
311	Farm machinery and equipment (352)
312	Construction and material handling machines (353)
320	Metalworking machinery (354)
321	Office and accounting machines (357, except 3573)
322	Electronic computing equipment (3573)
331	Machinery, except electrical, n.e.c. (355, 356, 358, 359)
332	Not specified machinery
	Electrical machinery, equipment, and supplies
340	Household appliances (363)
341	Radio, T.V., and communication equipment (365, 366)
342	Electrical machinery, equipment, and supplies, n.e.c. (361, 362, 364, 367, 369)
350	Not specified electrical machinery, equipment, and supplies
	Transportation equipment
351	Motor vehicles and motor vehicle equipment (371)
352	Aircraft and parts (372)
360	Ship and boat building and repairing (373)
361	Railroad locomotives and equipment (374)
362	Guided missiles, space vehicles, and parts (376)
370	Cycles and miscellaneous transportation equipment (375, 379)
	Professional and photographic equipment, and watches
371	Scientific and controlling instruments (381, 382)
372	Optical and health services supplies (383, 384, 385)
380	Photographic equipment and supplies (386)
381	Watches, clocks, and clockwork operated devices (387)
382	Not specified professional equipment
390	Toys, amusement, and sporting goods (394)
391	Miscellaneous manufacturing industries (39 exc. 394)
392	Not specified manufacturing industries

TRANSPORTATION, COMMUNICATIONS, AND OTHER PUBLIC UTILITIES

	Transportation
400	Railroads (40)
401	Bus service and urban transit (41, except 412)
402	Taxicab service (412)
410	Trucking service (421, 423)
411	Warehousing and storage (422)
412	U.S. Postal Service (43)
420	Water transportation (44)
421	Air transportation (45)
422	Pipe lines, except natural gas (46)
432	Services incidental to transportation (47)
	Communications
440	Radio and television broadcasting (483)
441	Telephone (wire and radio) (481)
442	Telegraph and miscellaneous communication services (482, 489)
	Utilities and sanitary services
460	Electric light and power (491)

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- 461 Gas and steam supply systems (492, 496)
- 462 Electric and gas, and other combinations (493)
- 470 Water supply and irrigation (494, 497)
- 471 Sanitary services (495)
- 472 Not specified utilities

WHOLESALE TRADE

Durable Goods

- 500 Motor vehicles and equipment (501)
- 501 Furniture and home furnishings (502)
- 502 Lumber and construction materials (503)
- 510 Sporting goods, toys, and hobby goods (504)
- 511 Metals and minerals, except petroleum (505)
- 512 Electrical goods (506)
- 521 Hardware, plumbing and heating supplies (507)
- 522 Not specified electrical and hardware products
- 530 Machinery, equipment, and supplies (508)
- 531 Scrap and waste materials (5093)
- 532 Miscellaneous wholesale, durable goods (5094, 5099)

Nondurable Goods

- 540 Paper and paper products (511)
- 541 Drugs, chemicals and allied products (512, 516)
- 542 Apparel, fabrics, and notions (513)
- 550 Groceries and related products (514)
- 551 Farm products - raw materials (515)
- 552 Petroleum products (517)
- 560 Alcoholic beverages (518)
- 561 Farm supplies (5191)
- 562 Miscellaneous wholesale, nondurable goods (5194, 5198, 5199)
- 571 Not specified wholesale trade

RETAIL TRADE

- 580 Lumber and building material retailing (521, 523)
- 581 Hardware stores (525)
- 582 Retail nurseries and garden stores (526)
- 590 Mobile home dealers (527)
- 591 (D) Department stores (531)
- 592 Variety stores (533)
- 600 Miscellaneous general merchandise stores (539)
- 601 (E) Grocery stores (541)
- 602 Dairy products stores (545)
- 610 Retail bakeries (546)
- 611 Food stores, n.e.c. (542, 543, 544, 549)
- 612 Motor vehicle dealers (551, 552)
- 620 Auto and home supply stores (553)
- 621 Gasoline service stations (554)
- 622 Miscellaneous vehicle dealers (555, 556, 557, 559)
- 630 Apparel and accessory stores, except shoe (56, except 566)
- 631 Shoe stores (566)

- 632 Furniture and home furnishings stores (571)
- 640 Household appliances, TV, and radio stores (572, 573)
- 641 (F) Eating and drinking places (58)
- 642 Drug stores (591)
- 650 Liquor stores (592)
- 651 Sporting goods, bicycles, and hobby stores (5941, 5945, 5946)
- 652 Book and stationery stores (5942, 5943)
- 660 Jewelry stores (5944)
- 661 Sewing, needlework and piece goods stores (5949)
- 662 Mail order houses (5961)
- 670 Vending machine operators (5962)
- 671 Direct selling establishments¹ establishments (5963)
- 672 Fuel and ice dealers (598)
- 681 Retail florists (5992)
- 682 Miscellaneous retail stores (593, 5947, 5948, 5993, 5994, 5999)
- 691 Not specified retail trade

FINANCE, INSURANCE, AND REAL ESTATE

- 700 (G) Banking (60)
- 701 Savings and loan associations (612)
- 702 Credit agencies, n.e.c. (61, except 612)
- 710 Security, commodity brokerage, and investment companies (62, 67)
- 711 (H) Insurance (63, 64)
- 712 Real estate, including real estate-insurance-law offices (65, 66)

BUSINESS AND REPAIR SERVICES

- 721 Advertising (731)
- 722 Services to dwellings and other buildings (734)
- 730 Commercial research, development, and testing labs (7391, 7397)
- 731 Personnel supply services (736)
- 732 Business management and consulting services (7392)
- 740 Computer and data processing services (737)
- 741 Detective and protective services (7393)
- 742 Business services, n.e.c. (732, 733, 735, 7394, 7395, 7396, 7399)
- 750 Automotive services, except repair (751, 752, 754)
- 751 Automotive repair shops (753)
- 752 Electrical repair shops (762, 7694)
- 760 Miscellaneous repair services (763, 764, 7692, 7699)

PERSONAL SERVICES

- 761 (J) Private households (88)
- 762 Hotels and motels (701)
- 770 Lodging places, except hotels and motels (702, 703, 704)
- 771 Laundry, cleaning, and garment services (721)
- 772 Beauty shops (723)
- 780 Barber shops (724)
- 781 Funeral service and crematories (726)
- 782 Shoe repair shops (725)
- 790 Dressmaking shops (part 729)

SIPP FILES

791 Miscellaneous personal services (722, part 729)

ENTERTAINMENT AND RECREATION SERVICES

800 Theaters and motion pictures (78, 792)
801 Bowling alleys, billiard and pool parlors (793)
802 Miscellaneous entertainment and recreation services (791, 794, 799)

PROFESSIONAL AND RELATED SERVICES

812 Offices of physicians (801, 803)
820 Offices of dentists (802)
821 Offices of chiropractors (8041)
822 Offices of optometrists (8042)
830 Offices of health practitioners, n.e.c. (8049)
831 (K) Hospitals (806)
832 Nursing and personal care facilities (805)
840 Health services, n.e.c. (807, 808, 809)
841 Legal services (81)
842 (L) Elementary and secondary schools (821)
850 (M) Colleges and universities (822)
851 Business, trade, and vocational schools (824)
852 Libraries (823)
860 Educational services, n.e.c. (829)
861 Job training and vocational rehabilitation services (833)
862 Child day care services (835)
870 Residential care facilities, without nursing (836)
871 Social services, n.e.c. (832, 839)
872 Museums, art galleries, and zoos (84)
880 Religious organizations (866)
881 Membership organizations (861-865, 869)
882 Engineering, architectural, and surveying services (891)
890 Accounting, auditing, and bookkeeping services (893)
891 Noncommercial educational and scientific research (892)
892 Miscellaneous professional and related services (899)

PUBLIC ADMINISTRATION

900 Executive and legislative offices (911-913)
901 General government, n.e.c. (919)
910 Justice, public order, and safety (92)
921 Public finance, taxation, and monetary policy (93)
922 Administration of human resources programs (94)
930 Administration of environmental quality and housing programs (95)
931 Administration of economic programs (96)
932 National security and international affairs (97)
991 Member of the Armed Forces

1 CONTROL NUMBER
R.O. CODE
PSU Segment
Segment
Serial
Sample
CHECK DIGIT
ADDRESS DIGIT 1,0
ADDRESS
Unit
Area
Special place
Field flag code
Letter sent
W1
W2
W3
W4
W5
W6
W7
W8
OFFICE USE ONLY
EXTRA UNIT Original unit serial number
WAVE for which Control Card first prepared

FILL ITEMS 17-20 FOR ALL PERSONS LIVING OR STAYING HERE

FILL OR UPDATE AS APPROPRIATE (ITEMS 23-33 FOR HOUSEHOLD MEMBERS ONLY - Ask each item for entire household before asking next item)

17 ENTRY ADDRESS 1,0	18 PERSON NUMBER Assign 101, 102, etc. for waves 1, 201, 202, wave 2	19a HOUSEHOLD ROSTER		20 DATE ENTERED OR LEFT								21 RELATIONSHIP TO REFERENCE PERSON (RP)				22 BIRTH DATE/AGE				23 MARRITAL STATUS		24 DESIGNATED PERSON		25 SEX		26 RACE		27 ORIGIN	
		Household member	Household member (RP)	Code	Mo.	Day	Year	Code	Mo.	Day	Year	Age	Update	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1001	1001			0010																									
				0012																									
				0014																									
				0018																									
				0020																									

21 HOUSEHOLD ROSTER COVERAGE

WAVE 1 INTERVIEW

211 I have listed... (Read names from item 19a). Are all of these persons still living or staying here?

212 Any babies or small children? ...

213 Any babies, boarders, or persons you employ who live here? ...

214 Anyone who usually lives here but is away now - traveling, at school, or in a hospital? ...

215 Anyone else staying here? ...

216 FIRST INTERVIEW AT MOVER'S NEW ADDRESS

217 I have listed... (Read names from item 19a), as now living at this address. Is this correct? ...

218 When did... move in here? ...

219 Is there anyone else living or staying here now? ...

220 When did... begin living here? ...

221 Which of these persons (name/rents) this home? ...

222 HOUSEHOLD UNIT COVERAGE - WAVE 1 INTERVIEW

223 I have listed... (Read names from item 19a). Are all of these persons still living or staying here? ...

224 Does any other household on the property live OR set with this household?

225 Does all persons in this household live OR set together? ...

226 Which of these persons (name/rents) this home?

EDUCATION

311 What is the highest grade or did... ever attend? ...

312 When did... graduate? ...

313 Did... ever serve in the U.S. Armed Forces? ...

314 If "yes" to 313, what was the service? ...

EDUCATION

315 What is the highest grade or did... ever attend? ...

316 When did... graduate? ...

317 Did... ever serve in the U.S. Armed Forces? ...

318 If "yes" to 317, what was the service? ...

ARMED FORCES

321 If "yes" to 317, in what branch of service? ...

322 If "yes" to 317, what was the service? ...

323 If "yes" to 317, how long? ...

324 If "yes" to 317, were you ever in the U.S. Armed Forces? ...

325 If "yes" to 317, was the service active duty? ...

326 If "yes" to 317, were you ever in the U.S. Armed Forces? ...

327 If "yes" to 317, were you ever in the U.S. Armed Forces? ...

328 If "yes" to 317, were you ever in the U.S. Armed Forces? ...

329 If "yes" to 317, were you ever in the U.S. Armed Forces? ...

330 If "yes" to 317, were you ever in the U.S. Armed Forces? ...

331 If "yes" to 317, were you ever in the U.S. Armed Forces? ...

332 If "yes" to 317, were you ever in the U.S. Armed Forces? ...

333 SOCIAL SECURITY

334 What is... Social Security for Railroad Retirement number? ...

335 If don't know ask: ...

336 If I call back, would... be able to provide the information? ...

337 If "yes," mark Remainder Card.

338 Nonresponse

339 Mark the appropriate box

340 1-Don't know

341 2-Refusal

342 3-None

8 ADDRESS (Sheet 1 of 2) Ure **8C** Special place name

8B What is your exact address?
House number, street, apt. number, or other identification

8D Type code

9 YEAR BUILT
 Ask first visit
 DO NOT ASK
 DO NOT ASK

10 COVERAGE QUESTIONS
 Ask items marked
 DO NOT ASK

11 GEOGRAPHIC LOCATION - FILL ON MOVER'S NEW CONTROL CARD
 Is (this) address within the limits of a city, town, or village?
 Yes - What is the name?
 No - Not within the limits of a city, town, or village

12 LAND USE
 12a Follow instructions for box that is marked:
 URBAN - SUPP to item 13
 RURAL - RUS, units coded 85-88 in 88 - ASK item 12b
 UNCLASSIFIED - ASK 12b, or mark by observation

13 CLASSIFICATION OF LIVING QUARTERS - Mark by observation
13a HOUSING UNIT
 1 House, apartment, flat
 2 HU, in nontransient hotel, motel, etc.
 3 HU, permanent in transient hotel, motel, etc.
 4 HU, in rooming house
 5 Mobile home or trailer with NO permanent room added
 6 Mobile home or trailer with one permanent room added
 7 HU not specified above - Describe in notes

13b FIELD REPRESENTATIVE CHECK ITEM
 Unit is:
 1 In a Special Place - Refer to Table A in Part C of manual and mark appropriate box in either 13c or 13d
 2 NOT in a Special Place

13c ACCESS
 1 Direct - Go to item 13c
 2 Through another unit - Not a separate HU; combine with unit through which access is gained. Apply merged unit procedures if appropriate.

14 UNITS IN STRUCTURE
 ASK IF NOT APPLICABLE - How many living units both occupied and vacant, are there in this structure?
 1 Only OTHER units
 2 Mobile home or trailer
 3 One, detached
 4 One, attached
 5 Two
 6 50 or more

15 TENURE
 Are you living quarters -
 1 Owned or being bought by you or household?
 2 Rented for cash?
 3 Occupied without payment of cash rent?

16 CHARACTERISTICS OF UNIT - UPDATE/VERIFY EACH WAVE
 ASK ONLY IF UNIT IS RENTED (otherwise go to item 15a on page 2, or 21b if first interview at mover's new address)
 16a Is this residence in a public housing housing authority?
 Yes - Go to item 15a, page 2 OR 21b if first interview at mover's new address
 No
 DK

16b Is the Federal, State or local government paying part of the rent for this residence?
 Yes
 No
 DK

17 RECORD OF VISITS, CONTROL CARD RESPONDENT PERSON NUMBER AND APPOINTMENTS
 Personal visits Telephone calls
 Tally Total Tally Total
 (d) (e) (f) (g)

18 RECORD OF VISITS, CONTROL CARD RESPONDENT PERSON NUMBER AND APPOINTMENTS
 Wave Month Day
 (a) (b) (c)

19 CHARACTERISTICS OF TYPE A OR D HOUSEHOLD
 Verify for each wave assigned.
 19a Race of reference person
 Enter code from flashback
 1 Male
 2 Female
 3 Sex of reference person
 4 Male
 5 Female
 6 Size of household - Count all children and adults

20 HOUSEHOLD FINAL INTERVIEW STATUS - Complete after interview
 If codes 06, 16, or 22, specify (c)

21 FUTURE CONTACTS - Read Flashcard J and K 3B-5. Verify and update for waves 2-6.
 21a What is your telephone number?
 Refused
 None
 What is the best telephone number of a close relative or friend who would know how to reach you if we are unable to contact you?
 Relationship to person no.
 Telephone number (include area code)

22 OFFICE USE ONLY

23 INTRODUCTION
 INITIAL VISIT - Hello, I am (field representative's name) from the United States Bureau of Economic Analysis. We are conducting a survey on the economic situation of people who live in the United States. I have some questions to ask you. Did you receive our letter?
 RETURN VISIT - Hello, I am (field representative's name) from the United States Bureau of Economic Analysis. Here is my identification card. Some time ago, your household was contacted concerning a survey on the economic situation of people who live in the United States. I have some further questions to ask on this subject. Did you receive our letter? GO TO ITEM 21 on page 2.

24 Packing the past 12 months did either of you or your spouse, household, and other family members move?
 Yes
 No

25 SP, PL units not coded 85-88
 25a SP, PL units not coded 85-88
 25b SP, PL units not coded 85-88
 25c SP, PL units not coded 85-88
 25d SP, PL units not coded 85-88

26 CODES FOR HOUSEHOLD INTERVIEW STATUS
 Wave 1 interview status
 01 - Interviewed
 02 - Noninterviewed
 03 - Occupied by persons with LURE
 04 - Vacated by persons with LURE
 05 - Unit or to be demolished
 06 - Unit to be demolished
 07 - Unoccupied site for mobile home, trailer, or tent
 08 - Other - Specify
 09 - Construction not started
 10 - Other - Specify

27 CODES FOR HOUSEHOLD INTERVIEW STATUS
 Wave 2-8 interview status
 01 - Interviewed
 02 - Noninterviewed
 03 - No one home
 04 - Temporarily absent
 05 - Unable to locate
 06 - Other - Specify
 07 - Moved, address unknown
 08 - Moved within country beyond limits of interview
 09 - Moved to another country
 10 - Other - Specify (On odd so enter "20" in item 38)

28 NOTES

TRANSCRIPTION ITEMS (Card) of _____

FIELD REPRESENTATIVE INSTRUCTIONS These columns are to be filled after the interview. Fill a column for each household member listed in Household Roster who is age 15 or older.

P C G M S	C 40 Person number		C 41 Name		C 42 Name of Employer		C 43 Name of Business/Farm		C 44 Person Interview Status		C 45 Income Sources		C 46 Assets (100-150)		C 47 Special Indicators						
	L	1	2	3	W1	W2	W3	W4	W5	W6	W7	W8	W1	W2	W3	W4	W5	W6	W7	W8	
1																					
2																					
3																					
4																					
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19																					

3.4.b MOVERS		3.5 MERGED HOUSEHOLD MATCH TABLE																	
FORM 4, Cont'd.		OFFICE USE ONLY 0054		New person number		PSU (b)		Segment (c)		Serial (d)		Sample designation (e)		Entry address ID (f)		Person number (g)			
1	Person number(s) New address - Number and street City State ZIP Code Other identification	Entire HH moved <input type="checkbox"/> - // box is marked FR 24b	0056	0070	0084	0058	0072	0086	0090	0092	0084	0086	0088	0090	0088	0088	0088		
2	Person number(s) New address - Number and street City State ZIP Code Other identification		0098	0112	0126	0100	0114	0128	0142	0102	0104	0108	0110	0112	0116	0120	0124		
3	Person number(s) New address - Number and street City State ZIP Code Other identification		0140	0154	0168	0130	0144	0158	0162	0132	0134	0136	0138	0140	0142	0144	0146		
4	Person number(s) New address - Number and street City State ZIP Code Other identification		0180	0184	0188	0180	0184	0188	0192	0180	0182	0184	0186	0188	0190	0192	0194		
5	Person number(s) New address - Number and street City State ZIP Code Other identification		0196	0200	0204	0196	0200	0204	0208	0196	0198	0200	0202	0204	0206	0208	0210		
39	FUTURE CONTACTS (Continued) - Read Flashcard T and FR 39c. Verify and update for Waves 2-6.																		
39c	Please give me the name, address, and telephone number of a close relative or friend who would know how to reach you if we are unable to contact you.																		
Name		Relationship to person no. _____		Address (No., St., Apt. No., City, State, ZIP Code)		Telephone number (include area code)		Name		Relationship to person no. _____		Address (No., St., Apt. No., City, State, ZIP Code)		Telephone number (include area code)		Name		Relationship to person no. _____	

- ENTERED CODES FOR 23**
Entered - This Wave
- 01 - Birth
 - 02 - Marriage
 - 03 - Other
 - 04 - (Use only with item 21d) missing one or more waves
 - 05 - From institution
 - 06 - From Armed Forces barracks
 - 07 - From outside the country
 - 08 - Due to separation or divorce
 - 09 - Should have been added in a previous wave
 - 10 - Birth
 - 11 - Marriage
 - 12 - Other
 - 13 - Sample person added during second interview
 - 14 - From institution
 - 15 - From Armed Forces barracks
 - 16 - From outside the country
 - 17 - Due to separation or divorce
- LEFT CODES FOR 23**
Left - This Wave
- 05 - Deceased
 - 06 - Institutionalized
 - 07 - Living in Armed Forces barracks
 - 08 - Moved outside of country
 - 09 - Separation or divorce
 - 10 - Reason number 201 + no longer living with sample person
 - 11 - Other
 - 12 - Use this code if instructed by your office
 - 99 - Listed in error
 - Left - Should have been added in a previous wave
 - 25 - Deceased
 - 26 - Institutionalized
 - 27 - Living in Armed Forces barracks
 - 28 - Moved outside of country
 - 29 - Separation or divorce
 - 30 - 201 + person no longer living with sample person
 - 31 - Other
- CODES FOR 18b**
- 01 - Reference Person WITH relatives in household
 - 02 - Reference Person with NO relatives in household
 - 03 - Husband/Wife
 - 04 - Natural/adopted child
 - 05 - Stepchild
 - 06 - Foster child
 - 07 - Grandchild
 - 08 - Parent
 - 09 - Brother/Sister
 - 10 - Other relative of Reference Person
 - 11 - Non-relative of Reference Person WITH OWN lives in household
 - 12 - Partner/roommate
 - 13 - Non-relative of Reference Person (other than partner/roommate) with NO OWN relatives in household
- CODES FOR 30**
- 01 - German
 - 02 - English
 - 03 - Irish
 - 04 - French
 - 05 - Italian
 - 06 - Scottish
 - 07 - Polish
 - 08 - Dutch
 - 09 - Swedish
 - 10 - Norwegian
 - 11 - Russian
 - 12 - Ukrainian
 - 13 - Welsh
 - 14 - Mexican-American
 - 15 - Chicano
 - 16 - Puerto Rican
 - 17 - Cuban
 - 18 - Other (Spanish speaking)
 - 19 - Central or South American (Spanish speaking)
 - 20 - Other Spanish or Negro
 - 21 - Afro-Amer. (Black or Negro)
 - 30 - Another group
 - 38 - Don't know
- CODES FOR 29**
- 1 - White
 - 2 - Black
 - 3 - American Indian, Eskimo or Aleut
 - 4 - Asian or Pacific Islander
 - 5 - Other - Specify below
- Person No. _____ Specify race _____
- If more than one code applies, enter with lowest number and enter codes in ascending order. Thus, if person served in "21" and in Korea enter "21" and "21".
- 1 - Vietnam Era (Aug. '64 - April '70)
 - 2 - Korean Conflict (June '50 - Jan. '53)
 - 3 - World War II (Sept. '40 - July '47)
 - 4 - World War I (Apr. '17 - Nov. '18)
 - 5 - May 1975 to August 1980
 - 6 - Other (Specify)
 - 7 - Other Service (All other periods)

39 FUTURE CONTACTS (Continued) - Read Flashcard T and FR 39c. Verify and update for Waves 2-6.

39c Please give me the name, address, and telephone number of a close relative or friend who would know how to reach you if we are unable to contact you.

Name _____ Relationship to person no. _____

Address (No., St., Apt. No., City, State, ZIP Code) _____

Telephone number (include area code) _____

Name _____ Relationship to person no. _____

Address (No., St., Apt. No., City, State, ZIP Code) _____

Telephone number (include area code) _____

Name _____ Relationship to person no. _____

Address (No., St., Apt. No., City, State, ZIP Code) _____

Telephone number (include area code) _____

FORM **SIPP-10500**
(1-16-91)

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.

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS

**SURVEY OF INCOME
AND PROGRAM
PARTICIPATION**

1990 PANEL

WAVE 5 QUESTIONNAIRE

P G M	1. Book	2. (cc 1) R.O. code	3a. (cc 2) PSU Segment Serial Sample				Check digit	b. (cc 3) Add. ID
	of _____	_____	_____	_____	_____	_____	1 0	_____
4. (cc 17) a. Entry Add. ID		c. Name (cc 19a)						
_____		First _____						
b. PERSON Number (cc 18)		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
 Self
 Proxy (Enter person number) _____ } **SKIP to 8**

b. Noninterview
 Type Z refusal Type Z other

CHECK ITEM N1 Does . . . 's person number begin with a "5"?

PGM 7 Yes
0900 No — **SKIP to section 1, item 1, page 2**

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

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

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

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

13a. On March 31, 1990, was . . . living in any of the kinds of places listed on this card? (Show Flashcard P)

0914 Yes DK } **SKIP to section 1, item 1, page 2**
 No — **SKIP to section 1, item 1, page 2** Ref.

b. Which code on this card represents the kind of place . . . was living in on March 31, 1990?

0916 Armed Forces barracks Nonhousehold setting
 Outside the United States

10a. Field representative edit time

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

b. Total edit time _____ Minutes

NOTES

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. Phone interview — *Specify reason* → _____

INTRODUCTION

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

(As I described during my last visit,) This survey is about the economic situation of people living in the United States. Most of the questions will be about . . . 's activities during _____, and _____.

Here is a calendar that shows the 4 months we will be talking about. (Hand respondent Flashcard J.) This time period is very important, so if you have any questions about what period is being referred to during the interview, please ask me.

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

Section 1 – LABOR FORCE AND RECIPIENCY

(SHOW FLASHCARD J)

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

PGM 7

1000

- 1 Yes – Mark "Worked" (code 170) on ISS and SKIP to 4
 2 No

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

1002

- 1 Yes
 2 No – SKIP to 3a

b. Please look at the calendar. In which weeks was ... looking for work or on layoff from a job? Please answer by giving the week number that appears to the right of each week on the calendar.

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

Mark (X) all that apply.

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?

1044

- 1 Already had a job
 2 Temporary illness
 3 School
 4 Other – Specify ↴

Mark (X) only one.

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?

1048

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

Mark (X) all that apply.

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?

1056

- 1 Yes
 2 No – SKIP to 6a

Note that the person did not have to work each week.

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.

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

Mark (X) all that apply.

c. What was the main reason ... was absent without pay from ...'s job or business during those weeks?

1098

- 1 On layoff
 2 Own illness
 3 On vacation
 4 Bad weather
 5 Labor dispute
 6 New job to begin within 30 days
 7 Other – Specify ↴

} SKIP to 8a, page 4

NOTES

Section 1 – LABOR FORCE AND RECIPIENCY (Continued)

LABOR FORCE AND RECIPIENCY

(SHOW FLASHCARD J)

6a. Please look at the calendar. In which weeks did ... have a job or business? Please answer by giving the week number that appears to the right of each week on the calendar.

Mark (X) all that apply.

<input type="checkbox"/> 1100	<input type="checkbox"/> 1	<input type="checkbox"/> 1112	<input type="checkbox"/> 7	<input type="checkbox"/> 1124	<input type="checkbox"/> 13
<input type="checkbox"/> 1102	<input type="checkbox"/> 2	<input type="checkbox"/> 1114	<input type="checkbox"/> 8	<input type="checkbox"/> 1126	<input type="checkbox"/> 14
<input type="checkbox"/> 1104	<input type="checkbox"/> 3	<input type="checkbox"/> 1116	<input type="checkbox"/> 9	<input type="checkbox"/> 1128	<input type="checkbox"/> 15
<input type="checkbox"/> 1106	<input type="checkbox"/> 4	<input type="checkbox"/> 1118	<input type="checkbox"/> 10	<input type="checkbox"/> 1130	<input type="checkbox"/> 16
<input type="checkbox"/> 1108	<input type="checkbox"/> 5	<input type="checkbox"/> 1120	<input type="checkbox"/> 11	<input type="checkbox"/> 1132	<input type="checkbox"/> 17
<input type="checkbox"/> 1110	<input type="checkbox"/> 6	<input type="checkbox"/> 1122	<input type="checkbox"/> 12	<input type="checkbox"/> 1134	<input type="checkbox"/> 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.

<input type="checkbox"/> 1138	<input type="checkbox"/> 1	<input type="checkbox"/> 1150	<input type="checkbox"/> 7	<input type="checkbox"/> 1162	<input type="checkbox"/> 13
<input type="checkbox"/> 1140	<input type="checkbox"/> 2	<input type="checkbox"/> 1152	<input type="checkbox"/> 8	<input type="checkbox"/> 1164	<input type="checkbox"/> 14
<input type="checkbox"/> 1142	<input type="checkbox"/> 3	<input type="checkbox"/> 1154	<input type="checkbox"/> 9	<input type="checkbox"/> 1166	<input type="checkbox"/> 15
<input type="checkbox"/> 1144	<input type="checkbox"/> 4	<input type="checkbox"/> 1156	<input type="checkbox"/> 10	<input type="checkbox"/> 1168	<input type="checkbox"/> 16
<input type="checkbox"/> 1146	<input type="checkbox"/> 5	<input type="checkbox"/> 1158	<input type="checkbox"/> 11	<input type="checkbox"/> 1170	<input type="checkbox"/> 17
<input type="checkbox"/> 1148	<input type="checkbox"/> 6	<input type="checkbox"/> 1160	<input type="checkbox"/> 12	<input type="checkbox"/> 1172	<input type="checkbox"/> 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

<input type="checkbox"/> 1180	<input type="checkbox"/> 1	<input type="checkbox"/> 1192	<input type="checkbox"/> 7	<input type="checkbox"/> 1204	<input type="checkbox"/> 13
<input type="checkbox"/> 1182	<input type="checkbox"/> 2	<input type="checkbox"/> 1194	<input type="checkbox"/> 8	<input type="checkbox"/> 1206	<input type="checkbox"/> 14
<input type="checkbox"/> 1184	<input type="checkbox"/> 3	<input type="checkbox"/> 1196	<input type="checkbox"/> 9	<input type="checkbox"/> 1208	<input type="checkbox"/> 15
<input type="checkbox"/> 1186	<input type="checkbox"/> 4	<input type="checkbox"/> 1198	<input type="checkbox"/> 10	<input type="checkbox"/> 1210	<input type="checkbox"/> 16
<input type="checkbox"/> 1188	<input type="checkbox"/> 5	<input type="checkbox"/> 1200	<input type="checkbox"/> 11	<input type="checkbox"/> 1212	<input type="checkbox"/> 17
<input type="checkbox"/> 1190	<input type="checkbox"/> 6	<input type="checkbox"/> 1202	<input type="checkbox"/> 12	<input type="checkbox"/> 1214	<input type="checkbox"/> 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 1 Last month
 1224 2 2 months ago
 1226 3 3 months ago
 1228 4 4 months ago

NOTES

Section 1 – LABOR FORCE AND RECIPIENCY (Continued)

<p>8a. In the weeks that . . . worked during the 4-month period, how many hours did . . . usually work per week?</p>	<p>1230 <input type="text"/> <input type="text"/> Hours per week x3 <input type="checkbox"/> None } SKIP to Check Item R4 x1 <input type="checkbox"/> DK }</p>
<p>CHECK ITEM R3 Refer to item 8a. Did . . . usually work 35 or more hours per week?</p>	<p>1231 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 8c</p>
<p>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.</p>	<p>1232 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item R4</p>
<p>c. How many weeks did . . . work fewer than 35 hours in the months of (Read each month)?</p>	<p>1233 x5 <input type="checkbox"/> All weeks 1234 <input type="checkbox"/> Weeks Last month 1235 <input type="checkbox"/> Weeks 2 months ago 1236 <input type="checkbox"/> Weeks 3 months ago 1237 <input type="checkbox"/> Weeks 4 months ago</p>
<p>d. What was the main reason . . . worked fewer than 35 hours in those weeks? Mark (X) only one.</p>	<p>1238 1 <input type="checkbox"/> Could not find a full-time job 2 <input type="checkbox"/> Wanted to work part time 3 <input type="checkbox"/> Health condition or disability 4 <input type="checkbox"/> Normal working hours are fewer than 35 hours 5 <input type="checkbox"/> Slack work or material shortage 6 <input type="checkbox"/> Other – Specify _____</p>
<p>CHECK ITEM R4 Refer to item 5a, page 2. (Absent without pay any full weeks.) The response to item 5a is:</p>	<p>1239 1 <input type="checkbox"/> Yes (or blank) 2 <input type="checkbox"/> No – SKIP to Check Item R5</p>
<p>9a. During this 4-month period, did . . . receive any State unemployment compensation payments?</p>	<p>1240 1 <input type="checkbox"/> Yes – Mark "5" on ISS 2 <input type="checkbox"/> No – SKIP to Check Item R5</p>
<p>b. During this period, did . . . also receive any Supplemental Unemployment Benefits (SUB)?</p>	<p>1242 1 <input type="checkbox"/> Yes – Mark "6" on ISS 2 <input type="checkbox"/> No</p>
<p>CHECK ITEM R5 Is "Worked" (code 170) marked on the ISS?</p>	<p>1244 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item R6</p>
<p>10. During this 4-month period, did . . . receive any money from workers' compensation for any kind of job-related illness or injury?</p>	<p>1246 1 <input type="checkbox"/> Yes – Mark "10" on ISS 2 <input type="checkbox"/> No</p>
<p>CHECK ITEM R6 Refer to cc items 44–47. Was an interview obtained for . . . last reference period?</p>	<p>1248 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item R11, page 6</p>
<p>CHECK ITEM R7 Refer to item 11b, page 5. Are any income types listed in the Income Roster?</p>	<p>1250 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 12a</p>

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.

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.

b. INCOME ROSTER (ISS CODES 1 – 56)

Line No. (1)	Income type (2)	Income code (3)	This reference period (4)	(5)
1		1252 <input type="checkbox"/>	1254 <input type="checkbox"/> 1 <input type="checkbox"/> Yes – Mark ISS 2 <input type="checkbox"/> No – Fill col. (5).	1255 <input type="checkbox"/> Month last rec'd x3 <input type="checkbox"/> Never received
2		1256 <input type="checkbox"/>	1258 <input type="checkbox"/> 1 <input type="checkbox"/> Yes – Mark ISS 2 <input type="checkbox"/> No – Fill col. (5).	1259 <input type="checkbox"/> Month last rec'd x3 <input type="checkbox"/> Never received
3		1260 <input type="checkbox"/>	1262 <input type="checkbox"/> 1 <input type="checkbox"/> Yes – Mark ISS 2 <input type="checkbox"/> No – Fill col. (5).	1263 <input type="checkbox"/> Month last rec'd x3 <input type="checkbox"/> Never received
4		1264 <input type="checkbox"/>	1266 <input type="checkbox"/> 1 <input type="checkbox"/> Yes – Mark ISS 2 <input type="checkbox"/> No – Fill col. (5).	1267 <input type="checkbox"/> Month last rec'd x3 <input type="checkbox"/> Never received
5		1268 <input type="checkbox"/>	1270 <input type="checkbox"/> 1 <input type="checkbox"/> Yes – Mark ISS 2 <input type="checkbox"/> No – Fill col. (5).	1271 <input type="checkbox"/> Month last rec'd x3 <input type="checkbox"/> Never received
6		1272 <input type="checkbox"/>	1274 <input type="checkbox"/> 1 <input type="checkbox"/> Yes – Mark ISS 2 <input type="checkbox"/> No – Fill col. (5).	1275 <input type="checkbox"/> Month last rec'd x3 <input type="checkbox"/> Never received
7		1276 <input type="checkbox"/>	1278 <input type="checkbox"/> 1 <input type="checkbox"/> Yes – Mark ISS 2 <input type="checkbox"/> No – Fill col. (5).	1279 <input type="checkbox"/> Month last rec'd x3 <input type="checkbox"/> Never received
8		1280 <input type="checkbox"/>	1282 <input type="checkbox"/> 1 <input type="checkbox"/> Yes – Mark ISS 2 <input type="checkbox"/> No – Fill col. (5).	1283 <input type="checkbox"/> Month last rec'd x3 <input type="checkbox"/> 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 Veterans' Administration (VA) – Mark "8" on ISS
1292 4 Anything else – Mark appropriate code on ISS and specify

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 Veterans' Administration) – Mark "32" on ISS
1312 8 National Guard or Reserve Forces retirement – Mark "33" on ISS
1314 9 State government pension – Mark "34" on ISS
1316 10 Local government pension – Mark "35" on ISS
1318 11 Income from paid-up life insurance policies or annuities – Mark "36" on ISS
1320 12 Other or DK – Specify and enter code from income source list. If income type is not listed or DK, enter code "38" – Mark ISS

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 <input type="checkbox"/> Yes — Mark "171" on ISS and SKIP to 23a, page 8 2 <input type="checkbox"/> No
CHECK ITEM R10	Refer to cc item 24. Is ... 65 years of age or older?	1328	1 <input type="checkbox"/> Yes — SKIP to 23a, page 8 2 <input type="checkbox"/> 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 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item R12
14a.	How long did ... serve on active duty in the Armed Forces?	1332	1 <input type="checkbox"/> Less than 6 months 2 <input type="checkbox"/> 6 to 23 months 3 <input type="checkbox"/> 2 to 19 years 4 <input type="checkbox"/> 20 or more years x1 <input type="checkbox"/> DK
b.	Does ... have a service connected disability; that is, a health condition or impairment caused or made worse by military service?	1334	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> 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	<input type="text"/> <input type="text"/> <input type="text"/> Percent } Mark "200" on ISS if rating is 100%; otherwise, mark "201" x3 <input type="checkbox"/> 0% x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. 101 <input type="checkbox"/> No rating
d.	During this 4-month period, did ... receive any payments from the Veterans' Administration? (Exclude regular military retirement pay, insurance proceeds, and GI Bill benefits.)	1338	1 <input type="checkbox"/> Yes — Mark "8" on ISS 2 <input type="checkbox"/> No
CHECK ITEM R12	Refer to cc item 24. Is ... 18 years of age or older?	1340	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 18a
15a.	During this 4-month period, did ... receive any Social Security payments?	1342	1 <input type="checkbox"/> Yes — Mark "1" on ISS 2 <input type="checkbox"/> 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 <input type="checkbox"/> Retired? 2 <input type="checkbox"/> Disabled? 3 <input type="checkbox"/> Widowed or surviving child? 4 <input type="checkbox"/> Spouse or dependent child? 5 <input type="checkbox"/> Some other reason } SKIP to 16a x1 <input type="checkbox"/> DK
c.	Sometimes people get Social Security for more than one reason. Is there another reason ... receives Social Security?	1346	1 <input type="checkbox"/> Retired 2 <input type="checkbox"/> Disabled 3 <input type="checkbox"/> Widowed or surviving child 4 <input type="checkbox"/> Spouse or dependent child 5 <input type="checkbox"/> No other reason x1 <input type="checkbox"/> DK
CHECK ITEM R13	Refer to item 15b and 15c above. Is "Disabled" (box 2) marked in either item?	1348	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 16a
15d.	At what age did ... begin receiving Social Security because of (his/her) disability?	1349	<input type="text"/> <input type="text"/> Age in years } SKIP to 16a x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
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 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 16a
15e.	During the 4-month period did ... receive any Social Security payments especially for ...'s children (under 18)?	1352	1 <input type="checkbox"/> Yes — Mark "1" on ISS 2 <input type="checkbox"/> No
16a.	During this 4-month period did ... receive any SSI (Supplemental Security Income) payments from the U.S. Government?	1354	1 <input type="checkbox"/> Yes — Mark "3" on ISS 2 <input type="checkbox"/> 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 <input type="checkbox"/> Yes — Mark "4" on ISS 2 <input type="checkbox"/> No
CHECK ITEM R15	Refer to cc item 24. Is ... 40 years of age or older?	1358	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 18a

Section 1 — LABOR FORCE AND RECIPIENCY (Continued)

<p>17a. Has . . . ever retired from a job or business? (Include retirement from the military.)</p>	1360	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item R16</p>
<p>b. During the 4-month period did . . . receive any retirement income other than Social Security?</p>	1362	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 17d</p>
<p>c. What kind of retirement income? Anything else? Mark (X) all that apply.</p>	1364	<p>1 <input type="checkbox"/> U.S. Government Railroad Retirement — Mark "2" on ISS</p>
	1366	<p>2 <input type="checkbox"/> Pension from company or union — Mark "30" on ISS</p>
	1368	<p>3 <input type="checkbox"/> Federal Civil Service or other Federal civilian employee pension — Mark "31" on ISS</p>
	1370	<p>4 <input type="checkbox"/> U.S. Military retirement pay (exclude payments from the Veterans' Administration) — Mark "32" on ISS</p>
	1372	<p>5 <input type="checkbox"/> National Guard or Reserve Forces retirement — Mark "33" on ISS</p>
	1374	<p>6 <input type="checkbox"/> State government pension — Mark "34" on ISS</p>
	1376	<p>7 <input type="checkbox"/> Local government pension — Mark "35" on ISS</p>
	1378	<p>8 <input type="checkbox"/> Other or DK — Specify and enter code from income source list. If income type not listed or "DK," enter code "38" — Mark ISS</p>
	1380	<p><input type="checkbox"/> <input type="checkbox"/></p>
<p>d. During this 4-month period, did . . . receive any regular income from a paid-up life insurance policy or any other annuities?</p>	1382	<p>1 <input type="checkbox"/> Yes — Mark "36" on ISS 2 <input type="checkbox"/> No</p>
<p>CHECK ITEM R16 Refer to cc item 24. Is . . . 70 years of age or older?</p>	1384	<p>1 <input type="checkbox"/> Yes — SKIP to Check Item R17 2 <input type="checkbox"/> No</p>
<p>18a. Does . . . have a physical, mental, or other health condition which limits the kind or amount of work . . . can do?</p>	1386	<p>1 <input type="checkbox"/> Yes — Mark "171" on ISS 2 <input type="checkbox"/> No — SKIP to Check Item R17</p>
<p>b. During this 4-month period, did . . . receive any income because of . . . 's health condition or disability? (Other than Social Security, SSI, or VA?)</p>	1388	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK } SKIP to Check Item R17</p>
<p>c. What kind of income? Anything else? Mark (X) all that apply.</p>	1390	<p>1 <input type="checkbox"/> U.S. Government Railroad Retirement — Mark "2" on ISS</p>
	1392	<p>2 <input type="checkbox"/> Black Lung payments — Mark "9" on ISS</p>
	1394	<p>3 <input type="checkbox"/> Workers' Compensation — Mark "10" on ISS</p>
	1396	<p>4 <input type="checkbox"/> Payments from a sickness, accident or disability insurance policy purchased on your own — Mark "13" on ISS</p>
	1398	<p>5 <input type="checkbox"/> Pension from company or union — Mark "30" on ISS</p>
	1400	<p>6 <input type="checkbox"/> Federal Civil Service or other Federal civilian employee pension — Mark "31" on ISS</p>
	1402	<p>7 <input type="checkbox"/> U.S. Military retirement pay (exclude payments from the Veterans' Administration) — Mark "32" on ISS</p>
	1406	<p>8 <input type="checkbox"/> State government pension — Mark "34" on ISS</p>
	1408	<p>9 <input type="checkbox"/> Local government pension — Mark "35" on ISS</p>
	1410	<p>10 <input type="checkbox"/> Other or DK — Specify and enter code from income source list. If income type not listed or "DK," enter code "38" — Mark ISS</p>
	1412	<p><input type="checkbox"/> <input type="checkbox"/></p>
<p>CHECK ITEM R17 Refer to cc item 26a. What is . . . 's marital status?</p>	1414	<p>1 <input type="checkbox"/> Married — SKIP to 20 2 <input type="checkbox"/> Widowed — SKIP to 22a 3 <input type="checkbox"/> Divorced 4 <input type="checkbox"/> Separated 5 <input type="checkbox"/> Never married — SKIP to Check Item R18</p>
<p>19. Did . . . receive any alimony (or support payments other than child support) during the 4-month period?</p>	1416	<p>1 <input type="checkbox"/> Yes — Mark "29" on ISS and SKIP to Check Item R18 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK } SKIP to Check Item R18 x2 <input type="checkbox"/> Ref. }</p>
<p>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.</p>	1418	<p>1 <input type="checkbox"/> Widowed — SKIP to 22a 2 <input type="checkbox"/> Divorced 3 <input type="checkbox"/> Both widowed and divorced 4 <input type="checkbox"/> No — SKIP to Check Item R21</p>

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.

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

- 1426
1 Yes
2 No
x1 DK } SKIP to Check Item R21

b. What kind of income was this?

Was there anything else?
(SHOW FLASHCARD K)
Mark (X) all that apply.

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

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 or older. People covered by Medicare have a card that looks like this (SHOW FLASHCARD L).
Was . . . covered by Medicare?

- 1462
1 Yes — Mark "172" on ISS
2 No
x1 DK } SKIP to Check Item R23

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

1464 [] [] [] - [] [] - 1466 [] [] [] [] - 1467 [] []



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

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	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to 27a
CHECK ITEM R25	Interview status of ...'s spouse.	1480	<input type="checkbox"/> No spouse in household <input type="checkbox"/> Interview for spouse not yet conducted <input type="checkbox"/> 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	<input type="checkbox"/> Yes – SKIP to 25a <input type="checkbox"/> 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	<input type="checkbox"/> Yes – Mark "27" on ISS <input type="checkbox"/> 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	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to Check Item R27
b.	What kind of welfare did ... receive? Anything else? Mark (X) all that apply.	1486	<input type="checkbox"/> AFDC – Mark "2D" on ISS
		1488	<input type="checkbox"/> General Assistance or General Relief – Mark "21" on ISS
		1490	<input type="checkbox"/> Indian, Cuban or Refugee Assistance – Mark "22" on ISS
		1492	<input type="checkbox"/> Foster Child Care – Mark "23" on ISS
		1494	<input type="checkbox"/> WIC – Mark "25" on ISS
		1496	<input type="checkbox"/> Other or DK – Specify and enter code from income source list. If income type not listed or "DK," enter code "24" – Mark ISS
		1498	<input type="checkbox"/> <input type="checkbox"/>
CHECK ITEM R27	Refer to cc item 47. Is "Medicaid" (code 173) marked for ...?	1500	<input type="checkbox"/> Yes – SKIP to 26b <input type="checkbox"/> No
26a.	(Refer to FLASHCARD M for Medicaid name.) During the 4-month period, was ... covered by (Use local name for Medicaid) or another public assistance program that pays for medical care?	1502	<input type="checkbox"/> Yes – Mark "173" on ISS <input type="checkbox"/> No
b.	(Refer to FLASHCARD M for Medicaid name.) 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	<input type="checkbox"/> Yes – Mark "173" on ISS <input type="checkbox"/> 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	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to Check Item R29
26c.	Were any of ...'s children (under 18) covered by (Use local name for Medicaid)?	1508	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to Check Item R29
d.	Which children were covered?	1510	<input type="checkbox"/> All children OR Person No. Name
		1512	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		1514	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		1516	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		1518	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		1520	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
CHECK ITEM R29	Refer to items 26a–26d above. Was ... or any of ...'s children under 18 years old covered by Medicaid?	1524	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to 27a
26e.	Was (.../and) ...'s children covered during the entire 4-month period?	1526	<input type="checkbox"/> Yes – SKIP to 27a <input type="checkbox"/> No
f.	In which months was (.../and) ...'s children covered? Mark (X) all that apply.	1528	<input type="checkbox"/> Last month
		1530	<input type="checkbox"/> 2 months ago
		1532	<input type="checkbox"/> 3 months ago
		1534	<input type="checkbox"/> 4 months ago

Section 1 – LABOR FORCE AND RECEIPIENCY (Continued)

<p>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.)</p>	1536	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item R30</p>												
<p><i>ASK OR VERIFY –</i> b. Was ... covered by a health insurance plan during the entire 4-month period?</p>	1538	<p>1 <input type="checkbox"/> Yes – SKIP to 27d 2 <input type="checkbox"/> No</p>												
<p>c. In which months was ... covered? <i>Mark (X) all that apply.</i></p>	1540 1542 1544 1546	<p>1 <input type="checkbox"/> Last month 2 <input type="checkbox"/> 2 months ago 3 <input type="checkbox"/> 3 months ago 4 <input type="checkbox"/> 4 months ago</p>												
<p>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?</p>	1547	<p>1 <input type="checkbox"/> Plan in own name – SKIP to 27f 2 <input type="checkbox"/> Someone else's plan 3 <input type="checkbox"/> Both – SKIP to 27f</p>												
<p>e. Whose plan covered ...?</p>	1548	<p>Household member</p> <table style="width:100%;"> <tr> <td style="width:40%;">Person No.</td> <td style="width:20%;">Name</td> <td rowspan="2" style="font-size: 2em; vertical-align: middle;">} SKIP to Check Item R30</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table> <p>x4 <input type="checkbox"/> Not a Household member</p>	Person No.	Name	} SKIP to Check Item R30	<input type="text"/>	<input type="text"/>							
Person No.	Name	} SKIP to Check Item R30												
<input type="text"/>	<input type="text"/>													
<p>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?</p>	1549	<p>1 <input type="checkbox"/> Current employer or union 2 <input type="checkbox"/> Former employer 3 <input type="checkbox"/> CHAMPUS 4 <input type="checkbox"/> CHAMPVA 5 <input type="checkbox"/> Military 6 <input type="checkbox"/> Other x1 <input type="checkbox"/> DK</p> <p style="margin-left: 150px;">} SKIP to 27h</p>												
<p>g. Did ...'s employer or union (former employer) pay all, part, or none of the cost of this plan?</p>	1550	<p>1 <input type="checkbox"/> All 2 <input type="checkbox"/> Part 3 <input type="checkbox"/> None</p>												
<p>h. Was ...'s plan an individual plan or a family plan?</p>	1552	<p>1 <input type="checkbox"/> Individual – SKIP to Check Item R30 2 <input type="checkbox"/> Family</p>												
<p>i. Other than ..., which persons in this household were covered by ...'s plan? (Include children as well as adults.)</p>	1554 1556 1558 1560 1562 1564 1566	<p>x5 <input type="checkbox"/> All persons</p> <table style="width:100%;"> <tr> <td style="width:40%;">Person No.</td> <td style="width:20%;">Name</td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> <tr> <td><input type="text"/></td> <td><input type="text"/></td> </tr> </table> <p>x3 <input type="checkbox"/> None</p>	Person No.	Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Person No.	Name													
<input type="text"/>	<input type="text"/>													
<input type="text"/>	<input type="text"/>													
<input type="text"/>	<input type="text"/>													
<input type="text"/>	<input type="text"/>													
<input type="text"/>	<input type="text"/>													
<p>j. Did ...'s plan cover anyone who did not live in this household during the past 4 months? <i>Mark (X) all that apply.</i> <i>If "Yes," "Who did the plan cover?"</i></p>	1567 1568 1569 1570	<p>1 <input type="checkbox"/> Yes, spouse 2 <input type="checkbox"/> Yes, child(ren) 3 <input type="checkbox"/> Yes, someone else 4 <input type="checkbox"/> No</p>												

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

27k. ASK OR VERIFY —
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

**i. Which children were covered by a health
insurance plan?**

Person No. Name

1575

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1576

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1577

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1578

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1579

--	--	--	--

OR

1580

- x3 None — SKIP to Check Item R31, page 12

**iii. 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

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1583

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1584

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1585

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1586

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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 <input type="checkbox"/>	1592 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No
2		1594 <input type="checkbox"/>	1596 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No
3		1598 <input type="checkbox"/>	1600 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No
4		1602 <input type="checkbox"/>	1604 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No
5		1606 <input type="checkbox"/>	1608 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No
6		1610 <input type="checkbox"/>	1612 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No
7		1614 <input type="checkbox"/>	1616 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No
8		1618 <input type="checkbox"/>	1620 1 <input type="checkbox"/> Yes — Mark ISS 2 <input type="checkbox"/> No

29a. (In addition to the assets we have already mentioned) At any time during the 4-month period did . . . have any (other) kinds of assets which earn interest or bring in money, such as the ones shown on this card? (Exclude assets held in IRA, Keogh, and 401K accounts.) (SHOW FLASHCARD N.)

1622

- 1 Yes
2 No
x1 DK
x2 Ref. } SKIP to 30a

b. Which kinds of these assets did . . . own?

Any others?

(Exclude IRA, 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)

<p>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.)</p>	1656	<p>1 <input type="checkbox"/> Yes, full time 2 <input type="checkbox"/> Yes, part time 3 <input type="checkbox"/> No – SKIP to Check Item R32</p>
<p>b. During which months was . . . enrolled? Mark (X) all that apply.</p>	1658 1660 1662 1664 1666	<p>1 <input type="checkbox"/> All months 2 <input type="checkbox"/> Last month 3 <input type="checkbox"/> 2 months ago 4 <input type="checkbox"/> 3 months ago 5 <input type="checkbox"/> 4 months ago</p>
<p>c. At what level or grade was . . . enrolled? (If enrolled at more than one level during this period, check most recent level.)</p>	1668	<p>1 <input type="checkbox"/> Elementary grades 1–8 } SKIP to Check 2 <input type="checkbox"/> High school grades 9–12 } item R32 3 <input type="checkbox"/> College year 1 4 <input type="checkbox"/> College year 2 5 <input type="checkbox"/> College year 3 6 <input type="checkbox"/> College year 4 7 <input type="checkbox"/> College year 5 8 <input type="checkbox"/> College year 6 9 <input type="checkbox"/> Vocational school 10 <input type="checkbox"/> Technical school 11 <input type="checkbox"/> Business school</p>
<p>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?</p>	1670	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item R32</p>
<p>b. What kind of educational assistance did . . . receive? Anything else? Mark (X) all that apply.</p>	1672 1674 1676 1678 1680 1682 1684 1686 1688 1690 1692	<p>1 <input type="checkbox"/> GI Bill – Mark "40" on ISS 2 <input type="checkbox"/> Other Veterans' Administration Educational Assistance Programs (Survivors and Dependents; Vocational Rehabilitation; Post-Vietnam Veterans) – Mark "41" on ISS 3 <input type="checkbox"/> College Work Study – Mark "175" on ISS 4 <input type="checkbox"/> PELL Grant – Mark "176" on ISS 5 <input type="checkbox"/> Supplemental Educational Opportunity Grant (SEOG) – Mark "177" on ISS 6 <input type="checkbox"/> National Direct Student Loan (NDSL) – Mark "178" on ISS 7 <input type="checkbox"/> Guaranteed Student Loan – Mark "179" on ISS 8 <input type="checkbox"/> JTPA Training – Mark "180" on ISS 9 <input type="checkbox"/> Employer Assistance – Mark "181" on ISS 10 <input type="checkbox"/> Fellowship/Scholarship – Mark "182" on ISS 11 <input type="checkbox"/> Other financial aid – Mark "183" on ISS</p>
<p>CHECK ITEM R32 Refer to cc item 26a. Is code 2 (married, spouse absent) the current entry?</p>	1694	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item R33</p>
<p>ASK OR VERIFY – 32. Is . . . 's spouse in the Armed Forces?</p>	1696	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p>
<p>CHECK ITEM R33 Are any codes (excluding codes 171–173, 200–201) marked on the ISS?</p>	1698	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 34a</p>
<p>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?</p>	1700	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – Probe and resolve (Make corrections to ISS if necessary)</p>
<p>b. Did . . . receive income from any other source such as financial help from someone outside the household, payments from the government, or anything else?</p>	1702	<p>1 <input type="checkbox"/> Yes – SKIP to 34b 2 <input type="checkbox"/> No – SKIP to Check Item E1, page 15</p>
<p>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?</p>	1704	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item P1, page 53</p>
<p>b. What kind of income did . . . receive? Anything else?</p>	1706 1708 1710	<p>Enter codes from income source list and mark ISS.</p> <p>1706 <input type="text"/> <input type="text"/> <input type="text"/></p> <p>1708 <input type="text"/> <input type="text"/> <input type="text"/></p> <p>1710 <input type="text"/> <input type="text"/> <input type="text"/></p>

NOTES

EARNINGS AND EMPLOYMENT

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
Check Item P1, page 53*

1 a. 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

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? <i>(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.)</i>	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 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 2c
2b. Have ...'s main activities or duties for this employer changed during the past 8 months?	PGM 8 2004	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 3a
C. What kind of business or industry was (Name of company or business)? <i>For example: TV and radio manufacturing, retail shoe store, State Labor Department, farm.</i>	PGM 8 2005	_____
d. Is it mainly –	PGM 8 2006	1 <input type="checkbox"/> Manufacturing? 2 <input type="checkbox"/> Wholesale Trade? 3 <input type="checkbox"/> Retail Trade? 4 <input type="checkbox"/> Some other kind of business?
e. What kind of work was ... doing on this job? <i>For example: Electrical engineer, stock clerk, typist, farmer.</i>	PGM 8 2008	_____
f. What were ...'s main activities or duties on this job? <i>For example: Types, keeps account books, files, sells cars, operates printing press, finishes concrete.</i>	PGM 8 2010	_____
g. Was ... an employee of –	PGM 8 2012	1 <input type="checkbox"/> A private for-profit company or individual? 2 <input type="checkbox"/> A private not-for-profit, tax exempt, or charitable organization? 3 <input type="checkbox"/> Federal government (exclude Armed Forces)? 4 <input type="checkbox"/> State government? 5 <input type="checkbox"/> Local government? 6 <input type="checkbox"/> Armed Forces? 7 <input type="checkbox"/> Unpaid in family business or farm?
3a. Was ... employed by (Name of employer) during the entire 4-month period?	PGM 7 2014	1 <input type="checkbox"/> Yes – SKIP to 4 2 <input type="checkbox"/> No
b. When was ... employed by (Name of employer) during this 4-month period?	2016 2020	FROM _____ Month _____ Day TO _____ Month _____ Day
CHECK ITEM E3.2 Did ... stop working for this employer during the reference period?	2023	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 4
3c. What is the main reason ... stopped working for (Name of employer)? <i>Mark (X) only one.</i>	2024	1 <input type="checkbox"/> Laid off 4 <input type="checkbox"/> Job was temporary and ended 2 <input type="checkbox"/> Retired 5 <input type="checkbox"/> Quit to take another job 3 <input type="checkbox"/> Discharged 6 <input type="checkbox"/> Quit for some other reason
4. How many hours per week did ... usually work at this job?	2025	_____ Hours x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK
5. Was ... paid by the hour on this job?	2026	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> 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 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. – SKIP to Check Item E5
7a. During the 4-month period, how often was ... paid on this job?	2028	1 <input type="checkbox"/> Once a week 6 <input type="checkbox"/> Some other way – 2 <input type="checkbox"/> Once each 2 weeks Specify ↘ 3 <input type="checkbox"/> Once a month 4 <input type="checkbox"/> Twice a month 5 <input type="checkbox"/> Unpaid in family business or farm – SKIP to Check Item E5
b. On what date was ... last paid during this 4-month period?	2030	_____ Month _____ Day x1 <input type="checkbox"/> DK x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. x2 <input type="checkbox"/> 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.)



		FIELD REPRESENTATIVE USE ONLY
LAST MONTH		
2032	\$ <input type="text"/> . <input type="text"/> 00	\$ _____ .00
	x3 <input type="checkbox"/> None	\$ _____ .00
	x1 <input type="checkbox"/> DK	\$ _____ .00
	x2 <input type="checkbox"/> Ref.	\$ _____ .00
		Total \$ _____ .00
2 MONTHS AGO		
2034	\$ <input type="text"/> . <input type="text"/> 00	\$ _____ .00
	x3 <input type="checkbox"/> None	\$ _____ .00
	x1 <input type="checkbox"/> DK	\$ _____ .00
	x2 <input type="checkbox"/> Ref.	\$ _____ .00
		Total \$ _____ .00
3 MONTHS AGO		
2036	\$ <input type="text"/> . <input type="text"/> 00	\$ _____ .00
	x3 <input type="checkbox"/> None	\$ _____ .00
	x1 <input type="checkbox"/> DK	\$ _____ .00
	x2 <input type="checkbox"/> Ref.	\$ _____ .00
		Total \$ _____ .00
4 MONTHS AGO		
2038	\$ <input type="text"/> . <input type="text"/> 00	\$ _____ .00
	x3 <input type="checkbox"/> None	\$ _____ .00
	x1 <input type="checkbox"/> DK	\$ _____ .00
	x2 <input type="checkbox"/> Ref.	\$ _____ .00
		Total \$ _____ .00

CHECK ITEM E4 Is "DK" marked in all parts of item 8a? 2040 1 Yes
2 No — SKIP to 9a

8b. If 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

<p>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.)</p>	<p>PGM 8 Employer name 2100 _____</p>
<p>CHECK ITEM E6: Enter employer ID number from cc item 42, or if a new employer, enter the next available ID number. →</p>	<p>PGM 8 Employer I.D. No. 2102 <input type="checkbox"/></p>
<p>CHECK ITEM E6.1 Is the previous wave box marked for this employer in cc item 42?</p>	<p>PGM 8 1 <input type="checkbox"/> Yes 2103 2 <input type="checkbox"/> No — SKIP to 10c</p>
<p>10b. Have . . . 's main activities or duties for this employer changed during the past 8 months?</p>	<p>PGM 8 1 <input type="checkbox"/> Yes 2104 2 <input type="checkbox"/> No — SKIP to 11a</p>
<p>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.</p>	<p>PGM 8 _____ 2105 _____</p>
<p>ASK OR VERIFY — d. Is it mainly —</p>	<p>PGM 8 1 <input type="checkbox"/> Manufacturing? 2106 2 <input type="checkbox"/> Wholesale Trade? 3 <input type="checkbox"/> Retail Trade? 4 <input type="checkbox"/> Some other kind of business?</p>
<p>e. What kind of work was . . . doing on this job? For example: Electrical engineer, stock clerk, typist, farmer.</p>	<p>PGM 8 _____ 2108 _____</p>
<p>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.</p>	<p>PGM 8 _____ 2110 _____</p>
<p>ASK OR VERIFY — g. Was . . . an employee of —</p>	<p>PGM 8 1 <input type="checkbox"/> A private for-profit company or individual? 2112 2 <input type="checkbox"/> A private not-for-profit, tax exempt, or charitable organization? 3 <input type="checkbox"/> Federal government (exclude Armed Forces)? 4 <input type="checkbox"/> State government? 5 <input type="checkbox"/> Local government? 6 <input type="checkbox"/> Armed Forces? 7 <input type="checkbox"/> Unpaid in family business or farm?</p>
<p>ASK OR VERIFY — 11a. Was . . . employed by (Name of employer) during the entire 4-month period?</p>	<p>PGM 7 1 <input type="checkbox"/> Yes — SKIP to 12 2114 2 <input type="checkbox"/> No</p>
<p>b. When was . . . employed by (Name of employer) during this 4-month period?</p>	<p>2116 FROM <input type="text"/> Month 2118 <input type="text"/> Day 2120 TO <input type="text"/> Month 2122 <input type="text"/> Day</p>
<p>CHECK ITEM E6.2 Did . . . stop working for this employer during the reference period?</p>	<p>2123 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 12</p>
<p>11c. What is the main reason . . . stopped working for (Name of employer)? Mark (X) only one.</p>	<p>2124 1 <input type="checkbox"/> Laid off 4 <input type="checkbox"/> Job was temporary and ended 2 <input type="checkbox"/> Retired 5 <input type="checkbox"/> Quit to take another job 3 <input type="checkbox"/> Discharged 6 <input type="checkbox"/> Quit for some other reason</p>
<p>ASK OR VERIFY — 12. How many hours per week did . . . usually work at this job?</p>	<p>2125 <input type="text"/> Hours x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK</p>
<p>13. Was . . . paid by the hour on this job?</p>	<p>2126 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 15a</p>
<p>14. What was . . . 's regular hourly pay rate at the end of (Read last month or "to" date in item 11b)?</p>	<p>2128 \$ <input type="text"/> . <input type="text"/> x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. — SKIP to Check Item E8</p>
<p>15a. During the 4-month period, how often was . . . paid on this job?</p>	<p>2129 1 <input type="checkbox"/> Once a week 6 <input type="checkbox"/> Some other way — 2 <input type="checkbox"/> Once each 2 weeks Specify <input type="text"/> 3 <input type="checkbox"/> Once a month 4 <input type="checkbox"/> Twice a month 5 <input type="checkbox"/> Unpaid in family business or farm — SKIP to Check Item E8</p>
<p>b. On what date was . . . last paid during this 4-month period?</p>	<p>2130 <input type="text"/> Month 2131 <input type="text"/> Day x1 <input type="checkbox"/> DK x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. x2 <input type="checkbox"/> Ref.</p>

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		\$	.00
2132	\$ <input type="text"/> . <input type="text"/> 00	\$	.00
x3 <input type="checkbox"/> None		\$	.00
x1 <input type="checkbox"/> DK		\$	.00
x2 <input type="checkbox"/> Ref.		\$	.00
		Total \$	.00
2 MONTHS AGO		\$	.00
2134	\$ <input type="text"/> . <input type="text"/> 00	\$	.00
x3 <input type="checkbox"/> None		\$	.00
x1 <input type="checkbox"/> DK		\$	.00
x2 <input type="checkbox"/> Ref.		\$	.00
		Total \$	.00
3 MONTHS AGO		\$	.00
2136	\$ <input type="text"/> . <input type="text"/> 00	\$	.00
x3 <input type="checkbox"/> None		\$	.00
x1 <input type="checkbox"/> DK		\$	.00
x2 <input type="checkbox"/> Ref.		\$	.00
		Total \$	.00
4 MONTHS AGO		\$	.00
2138	\$ <input type="text"/> . <input type="text"/> 00	\$	.00
x3 <input type="checkbox"/> None		\$	.00
x1 <input type="checkbox"/> DK		\$	.00
x2 <input type="checkbox"/> Ref.		\$	.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
2 No – SKIP to first ISS Code or Check Item P1, page 53

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.

<p>1 a. What was the name of . . . 's business/professional practice/farm? <i>(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.)</i></p>	<p>PGM 8 2200</p>	<p>Business name _____</p>												
<p>CHECK ITEM S1 Enter business ID number from cc item 43, or if a new business, enter the next available ID number. →</p>	<p>PGM 8 2201</p>	<p>Business I.D. No. _____</p>												
<p>CHECK ITEM S1.1 Is the previous wave box marked for this business in cc item 43?</p>	<p>PGM 8 2202</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 1c</p>												
<p>1 b. Have . . . 's main activities or duties for this business changed during the past 8 months?</p>	<p>PGM 8 2203</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 1g</p>												
<p>c. What kind of business was this?</p>	<p>PGM 8 2204</p>	<p>_____</p>												
<p><i>ASK OR VERIFY —</i> d. Is it mainly —</p>	<p>PGM 8 2208</p>	<p>1 <input type="checkbox"/> Manufacturing? 2 <input type="checkbox"/> Wholesale Trade? 3 <input type="checkbox"/> Retail Trade? 4 <input type="checkbox"/> Some other kind of business?</p>												
<p>e. What kind of work was . . . doing at this business?</p>	<p>PGM 8 2208</p>	<p>_____</p>												
<p>f. What were . . . 's most important activities or duties at this business?</p>	<p>PGM 8 2210</p>	<p>_____</p>												
<p><i>ASK OR VERIFY —</i> g. How many hours per week did . . . usually work at this business?</p>	<p>PGM 7 2212</p>	<p>____ Hours x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK</p>												
<p>2. Do you think that the gross earnings of this business will be \$ 1,000 or more during the next 12 months? <i>Gross earnings include sales and receipts before expenses.</i></p>	<p>2214</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 10. x1 <input type="checkbox"/> DK</p>												
<p>CHECK ITEM S2 Have questions 3—5b already been answered for this business by another household member?</p>	<p>2216</p>	<p>1 <input type="checkbox"/> Yes — SKIP to 6a 2 <input type="checkbox"/> No</p>												
<p>3. What was the total number of employees working for this business? Be sure to include . . . <i>Enter 999 if 1,000 or more employees.</i></p>	<p>2218</p>	<p>____ Employees x1 <input type="checkbox"/> DK</p>												
<p>4 a. Was . . . 's business incorporated?</p>	<p>2220</p>	<p>1 <input type="checkbox"/> Yes — SKIP to 5a 2 <input type="checkbox"/> No</p>												
<p>b. Was . . . 's business a sole proprietorship or a partnership?</p>	<p>2222</p>	<p>1 <input type="checkbox"/> Sole proprietorship — SKIP to 6a 2 <input type="checkbox"/> Partnership</p>												
<p>5 a. Aside from . . . were any other members of this household owners or partners in this business?</p>	<p>2224</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 6a</p>												
<p>b. Which members?</p>	<p>2226 2228 2230</p>	<table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;"></th> <th style="width:40%;">Person No.</th> <th style="width:50%;">Name</th> </tr> </thead> <tbody> <tr> <td style="border: none;"></td> <td style="border: 1px solid black; text-align: center;">____</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;"></td> <td style="border: 1px solid black; text-align: center;">____</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;"></td> <td style="border: 1px solid black; text-align: center;">____</td> <td style="border: none;"></td> </tr> </tbody> </table>		Person No.	Name		____			____			____	
	Person No.	Name												

<p>6 a. Was . . . paid a regular salary from this business during the 4-month period?</p>	<p>2232</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p>												
<p>b. Did . . . receive any (other) income from the business during this 4-month period?</p>	<p>2234</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p>												
<p>CHECK ITEM S3 Is "Yes" marked in either item 6a or 6b?</p>	<p>2236</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item S5</p>												

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		\$	_____	.00	\$	_____	.00
2238							
	x3 <input type="checkbox"/> None						
	x1 <input type="checkbox"/> DK						
	x2 <input type="checkbox"/> Ref.						
		Total	\$	_____			.00
2 MONTHS AGO		\$	_____	.00	\$	_____	.00
2240							
	x3 <input type="checkbox"/> None						
	x1 <input type="checkbox"/> DK						
	x2 <input type="checkbox"/> Ref.						
		Total	\$	_____			.00
3 MONTHS AGO		\$	_____	.00	\$	_____	.00
2242							
	x3 <input type="checkbox"/> None						
	x1 <input type="checkbox"/> DK						
	x2 <input type="checkbox"/> Ref.						
		Total	\$	_____			.00
4 MONTHS AGO		\$	_____	.00	\$	_____	.00
2244							
	x3 <input type="checkbox"/> None						
	x1 <input type="checkbox"/> DK						
	x2 <input type="checkbox"/> Ref.						
		Total	\$	_____			.00

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

2248 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 Check Item P1, page 53

Section 2 — EARNINGS AND EMPLOYMENT (Continued)

Part B2 — SELF-EMPLOYMENT IDENTIFICATION NUMBER 2

<p>12a. What was the name of . . . 's other business/ professional practice/farm? <i>(If . . . was self-employed in 3 or more businesses, enter in B1 and B2 the 2 businesses producing the highest gross earnings.)</i></p>	<p align="center">PGM 8</p> <p>Business name</p> <p>2300 _____</p>												
<p>CHECK ITEM S7 Enter business ID number from cc item 43, or if a new business, enter the next available ID number.</p>	<p align="center">PGM 8</p> <p>Business I.D. No.</p> <p>2301 <input type="text"/></p>												
<p>CHECK ITEM S7.1 Is the previous wave box marked for this business in cc item 43?</p>	<p align="center">PGM 8</p> <p>2302 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 12c</p>												
<p>12b. Have . . . 's main activities or duties for this business changed during the past 8 months?</p>	<p align="center">PGM 8</p> <p>2303 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 12g</p>												
<p>C. What kind of business was this?</p>	<p align="center">PGM 8</p> <p>2304 _____</p>												
<p><i>ASK OR VERIFY —</i> d. Is it mainly —</p>	<p align="center">PGM 8</p> <p>2308 1 <input type="checkbox"/> Manufacturing? 2 <input type="checkbox"/> Wholesale Trade? 3 <input type="checkbox"/> Retail Trade? 4 <input type="checkbox"/> Some other kind of business?</p>												
<p>e. What kind of work was . . . doing at this business?</p>	<p align="center">PGM 8</p> <p>2308 _____</p>												
<p>f. What were . . . 's most important activities or duties at this business?</p>	<p align="center">PGM 8</p> <p>2310 _____</p>												
<p><i>ASK OR VERIFY —</i> g. How many hours per week did . . . usually work at this business?</p>	<p align="center">PGM 7</p> <p>2312 <input type="text"/> <input type="text"/> Hours</p> <p>x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK</p>												
<p>13. Do you think that the gross earnings of this business will be \$1,000 or more during the next 12 months? <i>Gross earnings include sales and receipts before expenses.</i></p>	<p align="center">2314</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 21 x1 <input type="checkbox"/> DK</p>												
<p>CHECK ITEM S8 Have questions 14–16b already been answered for this business by another household member?</p>	<p align="center">2316</p> <p>1 <input type="checkbox"/> Yes — SKIP to 17a 2 <input type="checkbox"/> No</p>												
<p>14. What was the total number of employees working for this business? Be sure to include <i>Enter 999 if 1,000 or more employees.</i></p>	<p align="center">2318 <input type="text"/> <input type="text"/> <input type="text"/> Employees</p> <p>x1 <input type="checkbox"/> DK</p>												
<p>15a. Was . . . 's business incorporated?</p>	<p align="center">2320</p> <p>1 <input type="checkbox"/> Yes — SKIP to 16a 2 <input type="checkbox"/> No</p>												
<p>b. Was . . . 's business a sole proprietorship or a partnership?</p>	<p align="center">2322</p> <p>1 <input type="checkbox"/> Sole proprietorship — SKIP to 17a 2 <input type="checkbox"/> Partnership</p>												
<p>16a. Aside from . . . were any other members of this household owners or partners in this business?</p>	<p align="center">2324</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 17a</p>												
<p>b. Which members?</p>	<table border="0" style="width:100%;"> <tr> <td style="width:10%;"></td> <td style="width:40%; text-align: center;">Person No.</td> <td style="width:50%; text-align: center;">Name</td> </tr> <tr> <td align="center">2326</td> <td><input type="text"/> <input type="text"/> <input type="text"/></td> <td>_____</td> </tr> <tr> <td align="center">2328</td> <td><input type="text"/> <input type="text"/> <input type="text"/></td> <td>_____</td> </tr> <tr> <td align="center">2330</td> <td><input type="text"/> <input type="text"/> <input type="text"/></td> <td>_____</td> </tr> </table>		Person No.	Name	2326	<input type="text"/> <input type="text"/> <input type="text"/>	_____	2328	<input type="text"/> <input type="text"/> <input type="text"/>	_____	2330	<input type="text"/> <input type="text"/> <input type="text"/>	_____
	Person No.	Name											
2326	<input type="text"/> <input type="text"/> <input type="text"/>	_____											
2328	<input type="text"/> <input type="text"/> <input type="text"/>	_____											
2330	<input type="text"/> <input type="text"/> <input type="text"/>	_____											
<p>17a. Was . . . paid a regular salary from this business during the 4-month period?</p>	<p align="center">2332</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p>												
<p>b. Did . . . receive any (other) income from the business during this 4-month period?</p>	<p align="center">2334</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No</p>												
<p>CHECK ITEM S9 Is "Yes" marked in either item 17a or 17b?</p>	<p align="center">2336</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item S11</p>												

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		\$	.00
2338	\$ <input type="text"/> . <input type="text"/> 00	\$	.00
x3 <input type="checkbox"/> None		\$	.00
x1 <input type="checkbox"/> DK		\$	.00
x2 <input type="checkbox"/> Ref.		Total	\$.00
2 MONTHS AGO		\$	.00
2340	\$ <input type="text"/> . <input type="text"/> 00	\$	.00
x3 <input type="checkbox"/> None		\$	.00
x1 <input type="checkbox"/> DK		\$	.00
x2 <input type="checkbox"/> Ref.		Total	\$.00
3 MONTHS AGO		\$	.00
2342	\$ <input type="text"/> . <input type="text"/> 00	\$	.00
x3 <input type="checkbox"/> None		\$	.00
x1 <input type="checkbox"/> DK		\$	.00
x2 <input type="checkbox"/> Ref.		Total	\$.00
4 MONTHS AGO		\$	.00
2344	\$ <input type="text"/> . <input type="text"/> 00	\$	.00
x3 <input type="checkbox"/> None		\$	.00
x1 <input type="checkbox"/> DK		\$	.00
x2 <input type="checkbox"/> Ref.		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 Check Item P1, page 53
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 Check Item P1, page 53
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 Check Item P1, page 53

b. What was the net profit or loss?
If "broke even," enter \$ 1 in box.

2358 \$. 00
2358 x4 Loss in amount box } SKIP to first ISS Code or Check Item P1, page 53

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

2360 \$. 00
x3 None
x1 DK
x2 Ref. } SKIP to first ISS Code or Check Item P1, page 53

Section 3 – AMOUNTS

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

<p>1. You said . . . received (was authorized to receive) (Read name of income type) during the 4-month period. <i>(Read "was authorized to receive" if asking about food stamps – code 27.)</i></p>	<p>Income code Name of income type</p> <p>3000 <input type="text"/></p>
<p>CHECK ITEM A1 <i>Mark (X) income type code.</i></p>	<p>3002</p> <p>1 <input type="checkbox"/> ISS code 1 or 2 (SS or RR)</p> <p>2 <input type="checkbox"/> ISS code 25 (WIC) – <i>SKIP to 13a, page 27</i></p> <p>3 <input type="checkbox"/> ISS code 27 (Food Stamps) – <i>SKIP to 11a, page 26</i></p> <p>4 <input type="checkbox"/> ISS codes 37, 50, 51, 52, 53, or 56 – <i>SKIP to Check Item A4</i></p> <p>5 <input type="checkbox"/> Other ISS codes – <i>SKIP to Check Item A4.1</i></p>
<p>CHECK ITEM A2 <i>Refer to cc item 27.</i> Is . . . a designated parent, or guardian of children under age 18?</p>	<p>3004</p> <p>1 <input type="checkbox"/> Yes</p> <p>2 <input type="checkbox"/> No – <i>SKIP to Check Item A3</i></p>
<p>2. During this 4-month period, were any separate payments from (Social Security/Railroad Retirement) received especially for . . . 's children?</p>	<p>3006</p> <p>1 <input type="checkbox"/> Yes</p> <p>2 <input type="checkbox"/> No – <i>SKIP to Check Item A3</i></p>
<p>3. Did . . . also receive a separate payment for (himself/herself) during any of these months?</p>	<p>3008</p> <p>1 <input type="checkbox"/> Yes</p> <p>2 <input type="checkbox"/> No – <i>SKIP to 9a</i></p>
<p>CHECK ITEM A3 <i>Refer to cc item 26a.</i> Is . . . married?</p>	<p>3010</p> <p>1 <input type="checkbox"/> Yes</p> <p>2 <input type="checkbox"/> No – <i>SKIP to Check Item A4.1</i></p>
<p>4. Did . . . receive (Social Security/Railroad Retirement) jointly with . . . 's spouse?</p>	<p>3012</p> <p>1 <input type="checkbox"/> Yes</p> <p>2 <input type="checkbox"/> No – <i>SKIP to Check Item A4.1</i></p>
<p>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?</p>	<p>3014</p> <p>1 <input type="checkbox"/> Yes – <i>SKIP to next ISS Code or Check Item P1, page 53</i></p> <p>2 <input type="checkbox"/> No</p>
<p>CHECK ITEM A4.1 <i>Refer to item 11b, page 5.</i> Is this income source listed on the income roster?</p>	<p>3015</p> <p>1 <input type="checkbox"/> Yes – <i>ASK 5b</i></p> <p>2 <input type="checkbox"/> No – <i>ASK 5a</i></p>
<p>5a. In which month, during the 4-month reference period, did . . . begin to receive (Read name of income type)? <i>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.</i></p> <p>b. Did . . . receive any (Read name of income type) in (Read each month)? NDTE – Social Security and SSI payments may be adjusted for inflation each January.</p>	<p>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).</p>
<p>(Last month)</p>	<p>3016 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p> <p>3018 \$ <input type="text"/> . <input type="text"/> <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(2 months ago)</p>	<p>3020 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p> <p>3022 \$ <input type="text"/> . <input type="text"/> <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(3 months ago)</p>	<p>3024 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p> <p>3026 \$ <input type="text"/> . <input type="text"/> <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(4 months ago)</p>	<p>3028 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p> <p>3030 \$ <input type="text"/> . <input type="text"/> <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>

AMOUNTS – PART A

Section 3 – AMOUNTS (Continued)

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

CHECK ITEM A5	Mark (X) income type code.	3032	<input type="checkbox"/> ISS code 1 or 2 – SKIP to Check Item A6.1 <input type="checkbox"/> ISS code 8 or 20 through 24 <input type="checkbox"/> All other income codes – SKIP to next ISS Code or Check Item P1, page 53
6a. Were all the people living here covered by ...'s payments?		3034	<input type="checkbox"/> Yes – SKIP to Check Item A6 <input type="checkbox"/> No
b. Which persons were covered?			
		Person No. Name	
		3036	<input type="text"/>
		3038	<input type="text"/>
		3040	<input type="text"/>
		3042	<input type="text"/>
		3044	<input type="text"/>
		3046	<input type="text"/>
		3048	<input type="text"/>
		3050	<input type="text"/>
		3052	<input type="text"/>
		3054	<input type="text"/>
CHECK ITEM A6	Is this ISS code "8"?	3056	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to next ISS Code or Check Item P1, page 53
7a. What type of Veterans' payments did ... receive?		3058	<input type="checkbox"/> Service-connected disability compensation <input type="checkbox"/> Survivor benefits <input type="checkbox"/> Veterans' pension <input type="checkbox"/> Other Veterans' payments
b. Is ... required to fill out an annual income questionnaire in order to receive a VA pension?		3060	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK } SKIP to next ISS Code or Check Item P1, page 53
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	<input type="checkbox"/> Yes – SKIP to Check Item A7 <input type="checkbox"/> No
<i>(SHOW FLASHCARD O)</i> 8a. (Social Security/Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope ...'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)		3064	<input type="checkbox"/> Blue <input type="checkbox"/> Buff <input type="checkbox"/> Direct Deposit <input type="checkbox"/> Other <input type="checkbox"/> DK
b. Do ...'s payments usually come on the first of the month or the third?		3066	<input type="checkbox"/> First <input type="checkbox"/> Third <input type="checkbox"/> Other <input type="checkbox"/> DK
CHECK ITEM A7	Refer to item 2, page 24. Were (Social Security/Railroad Retirement) payments received especially for ...'s children?	3068	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to next ISS Code or Check Item P1, page 53

AMOUNTS – PART A

NOTES

Section 3 – AMOUNTS (Continued)

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

<p>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. (Last month)</p>	<p>3070</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>			
<p>(2 months ago)</p>	<p>3074</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>			
<p>(3 months ago)</p>	<p>3078</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>			
<p>(4 months ago)</p>	<p>3082</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>			

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

<p>3072</p>	<p>\$ <input style="width:80%;" type="text"/></p>	<p>00</p>	
	<p>x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>		
<p>3076</p>	<p>\$ <input style="width:80%;" type="text"/></p>	<p>00</p>	
	<p>x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>		
<p>3080</p>	<p>\$ <input style="width:80%;" type="text"/></p>	<p>00</p>	
	<p>x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>		
<p>3084</p>	<p>\$ <input style="width:80%;" type="text"/></p>	<p>00</p>	
	<p>x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>		

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 Check Item P1, page 53*
 2 No

b. Which children were covered?

	Person No.	Name
3088	<input style="width:20px;" type="text"/>	
3090	<input style="width:20px;" type="text"/>	
3092	<input style="width:20px;" type="text"/>	
3094	<input style="width:20px;" type="text"/>	
3096	<input style="width:20px;" type="text"/>	
3098	<input style="width:20px;" type="text"/>	

SKIP to next ISS Code or Check Item P1, page 53

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	<input style="width:20px;" type="text"/>	
3104	<input style="width:20px;" type="text"/>	
3106	<input style="width:20px;" type="text"/>	
3108	<input style="width:20px;" type="text"/>	
3110	<input style="width:20px;" type="text"/>	
3112	<input style="width:20px;" type="text"/>	
3114	<input style="width:20px;" type="text"/>	
3116	<input style="width:20px;" type="text"/>	

Section 3 – AMOUNTS (Continued)

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?**

(Last month)

3122

- 1 Yes
2 No
x1 DK

3124

\$. **00**
x1 DK
x2 Ref.

(2 months ago)

3126

- 1 Yes
2 No
x1 DK

3128

\$. **00**
x1 DK
x2 Ref.

(3 months ago)

3130

- 1 Yes
2 No
x1 DK

3132

\$. **00**
x1 DK
x2 Ref.

(4 months ago)

3134

- 1 Yes
2 No
x1 DK

3136

\$. **00**
x1 DK
x2 Ref.

SKIP to next ISS Code or Check Item P1, page 53

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

Mark (X) all that apply.

3138

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

3140

3142

3144

b. Which persons were covered?

Person No. Name

3146

3148

3150

3152

3154

SKIP to next ISS Code or Check Item P1, page 53

NOTES

Section 3 – AMOUNTS

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

<p>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.)</p>	<p>Income code Name of income type</p> <p style="text-align: center;">3200 <input type="text"/></p>
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<p>CHECK ITEM A1 Mark (X) income type code.</p>	<p style="text-align: center;">3202</p> <p>1 <input type="checkbox"/> ISS code 1 or 2 (SS or RR) 2 <input type="checkbox"/> ISS code 25 (WIC) – SKIP to 13a, page 31 3 <input type="checkbox"/> ISS code 27 (Food Stamps) – SKIP to 11a, page 30 4 <input type="checkbox"/> ISS codes 37, 50, 51, 52, 53, or 56 – SKIP to Check Item A4 5 <input type="checkbox"/> Other ISS codes – SKIP to Check Item A4.1</p>
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<p>CHECK ITEM A2 Refer to cc item 27. Is . . . a designated parent, or guardian of children under age 18?</p>	<p style="text-align: center;">3204</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item A3</p>
---	--

<p>2. During this 4-month period, were any separate payments from (Social Security/Railroad Retirement) received especially for . . . 's children?</p>	<p style="text-align: center;">3206</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item A3</p>
---	--

<p>3. Did . . . also receive a separate payment for (himself/herself) during any of these months?</p>	<p style="text-align: center;">3208</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 9a</p>
--	---

<p>CHECK ITEM A3 Refer to cc item 26a. Is . . . married?</p>	<p style="text-align: center;">3210</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item A4.1</p>
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<p>4. Did . . . receive (Social Security/Railroad Retirement) jointly with . . . 's spouse?</p>	<p style="text-align: center;">3212</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item A4.1</p>
--	--

<p>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?</p>	<p style="text-align: center;">3214</p> <p>1 <input type="checkbox"/> Yes – SKIP to next ISS Code or Check Item P1, page 53 2 <input type="checkbox"/> No</p>
---	--

<p>CHECK ITEM A4.1 Refer to item 11b, page 5. Is this income source listed on the income roster?</p>	<p style="text-align: center;">3215</p> <p>1 <input type="checkbox"/> Yes – ASK 5b 2 <input type="checkbox"/> No – ASK 5a</p>
--	--

<p>5a. In which month, during the 4-month reference period, did . . . begin to receive (Read name of income type)? <i>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.</i></p> <p>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.</p>	<p>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).</p>
<p>(Last month)</p>	<p style="text-align: center;">3216</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>
<p>(2 months ago)</p>	<p style="text-align: center;">3220</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>
<p>(3 months ago)</p>	<p style="text-align: center;">3224</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>
<p>(4 months ago)</p>	<p style="text-align: center;">3228</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>
	<p style="text-align: center;">3218</p> <p>\$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
	<p style="text-align: center;">3222</p> <p>\$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
	<p style="text-align: center;">3226</p> <p>\$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
	<p style="text-align: center;">3230</p> <p>\$ <input type="text"/> . <input type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>

Section 3 – AMOUNTS (Continued)

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

CHECK ITEM A5	Mark (X) income type code.	3232	<input type="checkbox"/> ISS code 1 or 2 – SKIP to Check Item A6.1 <input type="checkbox"/> ISS code 8 or 20 through 24 <input type="checkbox"/> All other income codes – SKIP to next ISS Code or Check Item P1, page 53
6a. Were all the people living here covered by ...'s payments?		3234	<input type="checkbox"/> Yes – SKIP to Check Item A6 <input type="checkbox"/> No
b. Which persons were covered?			
		Person No. Name	
		3236	<input type="text"/>
		3238	<input type="text"/>
		3240	<input type="text"/>
		3242	<input type="text"/>
		3244	<input type="text"/>
		3246	<input type="text"/>
		3248	<input type="text"/>
		3250	<input type="text"/>
		3252	<input type="text"/>
		3254	<input type="text"/>
CHECK ITEM A6	Is this ISS code "B"?	3256	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to next ISS Code or Check Item P1, page 53
7a. What type of Veterans' payments did ... receive?		3258	<input type="checkbox"/> Service-connected disability compensation <input type="checkbox"/> Survivor benefits <input type="checkbox"/> Veterans' pension <input type="checkbox"/> Other Veterans' payments
b. Is ... required to fill out an annual income questionnaire in order to receive a VA pension?		3260	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK
			}
			SKIP to next ISS Code or Check Item P1, page 53
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	<input type="checkbox"/> Yes – SKIP to Check Item A7 <input type="checkbox"/> No
<i>(SHOW FLASHCARD O)</i> 8a. (Social Security/Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope ...'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)		3264	<input type="checkbox"/> Blue <input type="checkbox"/> Buff <input type="checkbox"/> Direct Deposit <input type="checkbox"/> Other <input type="checkbox"/> DK
b. Do ...'s payments usually come on the first of the month or the third?		3266	<input type="checkbox"/> First <input type="checkbox"/> Third <input type="checkbox"/> Other <input type="checkbox"/> DK
CHECK ITEM A7	Refer to item 2, page 28. Were (Social Security/Railroad Retirement) payments received especially for ...'s children?	3268	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to next ISS Code or Check Item P1, page 53

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.
 (Last month)

3270 1 Yes
 2 No
 x1 DK

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

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.

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

3286 1 Yes – SKIP to next ISS Code or Check Item P1, page 53
 2 No

b. Which children were covered?

Person No.	Name
3288 <input type="text"/>	
3290 <input type="text"/>	
3292 <input type="text"/>	
3294 <input type="text"/>	
3296 <input type="text"/>	
3298 <input type="text"/>	

SKIP to next ISS Code or Check Item P1, page 53

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 <input type="text"/>	
3304 <input type="text"/>	
3308 <input type="text"/>	
3308 <input type="text"/>	
3310 <input type="text"/>	
3312 <input type="text"/>	
3314 <input type="text"/>	
3316 <input type="text"/>	

Section 3 – AMOUNTS (Continued)

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.

(Last month)

3322

- 1 Yes
2 No
x1 DK

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

3324

\$. 00
x1 DK
x2 Ref.

(2 months ago)

3326

- 1 Yes
2 No
x1 DK

3328

\$. 00
x1 DK
x2 Ref.

(3 months ago)

3330

- 1 Yes
2 No
x1 DK

3332

\$. 00
x1 DK
x2 Ref.

(4 months ago)

3334

- 1 Yes
2 No
x1 DK

3336

\$. 00
x1 DK
x2 Ref.

SKIP to next ISS Code or Check Item P1, page 53

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

Mark (X) all that apply.

3338

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

3340

3342

3344

b. Which persons were covered?

Person No. Name

3346

3348

3350

3352

3354

SKIP to next ISS Code or Check Item P1, page 53

NOTES

Section 3 — AMOUNTS

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

<p>1. You said . . . received (was authorized to receive) (Read name of income type) during the 4-month period. <i>(Read "was authorized to receive" if asking about food stamps — code 27.)</i></p>	<p>Income code Name of income type</p> <p>3400 <input type="text"/></p>
<p>CHECK ITEM A1 <i>Mark (X) income type code.</i></p>	<p>3402</p> <p>1 <input type="checkbox"/> ISS code 1 or 2 (SS or RR) 2 <input type="checkbox"/> ISS code 25 (WIC) — SKIP to 13a, page 35 3 <input type="checkbox"/> ISS code 27 (Food Stamps) — SKIP to 11a, page 34 4 <input type="checkbox"/> ISS codes 37, 50, 51, 52, 53, or 56 — SKIP to Check Item A4 5 <input type="checkbox"/> Other ISS codes — SKIP to Check Item A4.1</p>
<p>CHECK ITEM A2 <i>Refer to cc item 27.</i> Is . . . a designated parent, or guardian of children under age 18?</p>	<p>3404</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item A3</p>
<p>2. During this 4-month period, were any separate payments from (Social Security/Railroad Retirement) received especially for . . . 's children?</p>	<p>3406</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item A3</p>
<p>3. Did . . . also receive a separate payment for (himself/herself) during any of these months?</p>	<p>3408</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to 9a</p>
<p>CHECK ITEM A3 <i>Refer to cc item 26a.</i> Is . . . married?</p>	<p>3410</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item A4.1</p>
<p>4. Did . . . receive (Social Security/Railroad Retirement) jointly with . . . 's spouse?</p>	<p>3412</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No — SKIP to Check Item A4.1</p>
<p>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?</p>	<p>3414</p> <p>1 <input type="checkbox"/> Yes — SKIP to next ISS Code or Check Item P1, page 53 2 <input type="checkbox"/> No</p>
<p>CHECK ITEM A4.1 <i>Refer to item 11b, page 5.</i> Is this income source listed on the income roster?</p>	<p>3415</p> <p>1 <input type="checkbox"/> Yes — ASK 5b 2 <input type="checkbox"/> No — ASK 5a</p>
<p>5a. In which month, during the 4-month reference period, did . . . begin to receive (Read name of income type)? <i>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.</i></p> <p>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.</p>	<p>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).</p>
<p>(Last month)</p>	<p>3416 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>
<p>(2 months ago)</p>	<p>3420 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>
<p>(3 months ago)</p>	<p>3424 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>
<p>(4 months ago)</p>	<p>3428 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>
	<p>3418 \$ <input type="text"/> . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
	<p>3422 \$ <input type="text"/> . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
	<p>3426 \$ <input type="text"/> . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
	<p>3430 \$ <input type="text"/> . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>

Section 3 – AMOUNTS (Continued)

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

CHECK ITEM A5	Mark (X) income type code.	3432	1 <input type="checkbox"/> ISS code 1 or 2 – SKIP to Check Item A6.1 2 <input type="checkbox"/> ISS code 8 or 20 through 24 3 <input type="checkbox"/> All other income codes – SKIP to next ISS Code or Check Item P1, page 53																																	
	6a. Were all the people living here covered by ...'s payments?	3434	1 <input type="checkbox"/> Yes – SKIP to Check Item A6 2 <input type="checkbox"/> No																																	
	b. Which persons were covered?		<table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;"></th> <th style="width:15%;">Person No.</th> <th style="width:75%;">Name</th> </tr> </thead> <tbody> <tr><td style="text-align:center;">3436</td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td style="text-align:center;">3438</td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td style="text-align:center;">3440</td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td style="text-align:center;">3442</td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td style="text-align:center;">3444</td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td style="text-align:center;">3446</td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td style="text-align:center;">3448</td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td style="text-align:center;">3450</td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td style="text-align:center;">3452</td><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td style="text-align:center;">3454</td><td><input type="text"/></td><td><input type="text"/></td></tr> </tbody> </table>		Person No.	Name	3436	<input type="text"/>	<input type="text"/>	3438	<input type="text"/>	<input type="text"/>	3440	<input type="text"/>	<input type="text"/>	3442	<input type="text"/>	<input type="text"/>	3444	<input type="text"/>	<input type="text"/>	3446	<input type="text"/>	<input type="text"/>	3448	<input type="text"/>	<input type="text"/>	3450	<input type="text"/>	<input type="text"/>	3452	<input type="text"/>	<input type="text"/>	3454	<input type="text"/>	<input type="text"/>
	Person No.	Name																																		
3436	<input type="text"/>	<input type="text"/>																																		
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3452	<input type="text"/>	<input type="text"/>																																		
3454	<input type="text"/>	<input type="text"/>																																		
CHECK ITEM A6	Is this ISS code "B"?	3456	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to next ISS Code or Check Item P1, page 53																																	
	7a. What type of Veterans' payments did ... receive?	3458	1 <input type="checkbox"/> Service-connected disability compensation 2 <input type="checkbox"/> Survivor benefits 3 <input type="checkbox"/> Veterans' pension 4 <input type="checkbox"/> Other Veterans' payments																																	
	b. Is ... required to fill out an annual income questionnaire in order to receive a VA pension?	3460	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK } SKIP to next ISS Code or Check Item P1, page 53																																	
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 <input type="checkbox"/> Yes – SKIP to Check Item A7 2 <input type="checkbox"/> No																																	
	8a. (SHOW FLASHCARD O) (Social Security/Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope ...'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)	3464	1 <input type="checkbox"/> Blue 2 <input type="checkbox"/> Buff 3 <input type="checkbox"/> Direct Deposit 4 <input type="checkbox"/> Other x1 <input type="checkbox"/> DK																																	
	b. Do ...'s payments usually come on the first of the month or the third?	3466	1 <input type="checkbox"/> First 2 <input type="checkbox"/> Third 3 <input type="checkbox"/> Other x1 <input type="checkbox"/> DK																																	
CHECK ITEM A7	Refer to item 2, page 32. Were (Social Security/Railroad Retirement) payments received especially for ...'s children?	3468	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to next ISS Code or Check Item P1, page 53																																	

NOTES

Section 3 – AMOUNTS (Continued)

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

<p>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. (Last month)</p>	<p>3470</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>	<p>3472</p>	<p>9b. If "Yes" in item 9a – How much was received?</p> <p>\$ <input style="width: 100px;" type="text"/> . <input style="width: 30px;" type="text"/> 00</p> <p>x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(2 months ago)</p>	<p>3474</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>	<p>3476</p>	<p>\$ <input style="width: 100px;" type="text"/> . <input style="width: 30px;" type="text"/> 00</p> <p>x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(3 months ago)</p>	<p>3478</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>	<p>3480</p>	<p>\$ <input style="width: 100px;" type="text"/> . <input style="width: 30px;" type="text"/> 00</p> <p>x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(4 months ago)</p>	<p>3482</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>	<p>3484</p>	<p>\$ <input style="width: 100px;" type="text"/> . <input style="width: 30px;" type="text"/> 00</p> <p>x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>

<p><i>VERIFY IF ONLY ONE CHILD OR ASK –</i> 10a. Were all children living here covered by these payments?</p>	<p>3486</p>	<p>1 <input type="checkbox"/> Yes – <i>SKIP to next ISS Code or Check Item P1, page 53</i> 2 <input type="checkbox"/> No</p>
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<p>b. Which children were covered?</p>	<p>3488</p>	<p>Person No.</p>	<p>Name</p>	
	3490	[] [] []		
	3492	[] [] []		
	3494	[] [] []		
	3496	[] [] []		
	3498	[] [] []		

SKIP to next ISS Code or Check Item P1, page 53

<p>11a. Were all the people living here covered under ...'s food stamp allotment?</p>	<p>3500</p>	<p>1 <input type="checkbox"/> Yes – <i>SKIP to Check Item A7.1</i> 2 <input type="checkbox"/> No</p>
--	--------------------	---

<p>b. Which persons were covered?</p>	<p>3502</p>	<p>Person No.</p>	<p>Name</p>	
	3504	[] [] []		
	3506	[] [] []		
	3508	[] [] []		
	3510	[] [] []		
	3512	[] [] []		
	3514	[] [] []		
	3516	[] [] []		

Section 3 — AMOUNTS (Continued)

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?

(Last month)

3522

- 1 Yes
2 No
x1 DK

3524

\$. 00
x1 DK
x2 Ref.

(2 months ago)

3526

- 1 Yes
2 No
x1 DK

3528

\$. 00
x1 DK
x2 Ref.

(3 months ago)

3530

- 1 Yes
2 No
x1 DK

3532

\$. 00
x1 DK
x2 Ref.

(4 months ago)

3534

- 1 Yes
2 No
x1 DK

3536

\$. 00
x1 DK
x2 Ref.

SKIP to next ISS Code or Check Item P1, page 53

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

Mark (X) all that apply.

3538

- 1 Last month

3540

- 2 2 months ago

3542

- 3 3 months ago

3544

- 4 4 months ago

b. Which persons were covered?

Person No. Name

3546

3548

3550

3552

3554

SKIP to next ISS Code or Check Item P1, page 53

NOTES

Section 3 – AMOUNTS

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

<p>1. You said . . . received (was authorized to receive) (Read name of income type) during the 4-month period. <i>(Read "was authorized to receive" if asking about food stamps – code 27.)</i></p>	<p style="text-align: center;">Income code Name of income type</p> <p style="text-align: center;">3600 <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/> <input style="width: 40px; height: 20px; border: 1px solid black;" type="text"/></p>
<p>CHECK ITEM A1 <i>Mark (X) income type code.</i></p>	<p style="text-align: center;">3602</p> <p>1 <input type="checkbox"/> ISS code 1 or 2 (SS or RR) 2 <input type="checkbox"/> ISS code 25 (WIC) – <i>SKIP to 13a, page 39</i> 3 <input type="checkbox"/> ISS code 27 (Food Stamps) – <i>SKIP to 11a, page 38</i> 4 <input type="checkbox"/> ISS codes 37, 50, 51, 52, 53, or 56 – <i>SKIP to Check Item A4</i> 5 <input type="checkbox"/> Other ISS codes – <i>SKIP to Check Item A4.1</i></p>
<p>CHECK ITEM A2 <i>Refer to cc item 27.</i> Is . . . a designated parent, or guardian of children under age 18?</p>	<p style="text-align: center;">3604</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – <i>SKIP to Check Item A3</i></p>
<p>2. During this 4-month period, were any separate payments from (Social Security/Railroad Retirement) received especially for . . . 's children?</p>	<p style="text-align: center;">3606</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – <i>SKIP to Check Item A3</i></p>
<p>3. Did . . . also receive a separate payment for (himself/herself) during any of these months?</p>	<p style="text-align: center;">3608</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – <i>SKIP to 9a</i></p>
<p>CHECK ITEM A3 <i>Refer to cc item 26a.</i> Is . . . married?</p>	<p style="text-align: center;">3610</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – <i>SKIP to Check Item A4.1</i></p>
<p>4. Did . . . receive (Social Security/Railroad Retirement) jointly with . . . 's spouse?</p>	<p style="text-align: center;">3612</p> <p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – <i>SKIP to Check Item A4.1</i></p>
<p>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?</p>	<p style="text-align: center;">3614</p> <p>1 <input type="checkbox"/> Yes – <i>SKIP to next ISS Code or Check Item P1, page 53</i> 2 <input type="checkbox"/> No</p>
<p>CHECK ITEM A4.1 <i>Refer to item 11b, page 5.</i> Is this income source listed on the income roster?</p>	<p style="text-align: center;">3615</p> <p>1 <input type="checkbox"/> Yes – <i>ASK 5b</i> 2 <input type="checkbox"/> No – <i>ASK 5a</i></p>
<p>5a. In which month, during the 4-month reference period, did . . . begin to receive (Read name of income type)? <i>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.</i></p> <p>b. Did . . . receive any (Read name of income type) in (Read each month)? <i>NOTE – Social Security and SSI payments may be adjusted for inflation each January.</i></p>	<p style="text-align: center;">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).</p>
<p>(Last month)</p>	<p style="text-align: center;">3616 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>
<p>(2 months ago)</p>	<p style="text-align: center;">3618 \$ <input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/> . <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(3 months ago)</p>	<p style="text-align: center;">3620 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>
<p>(4 months ago)</p>	<p style="text-align: center;">3622 \$ <input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/> . <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(Last month)</p>	<p style="text-align: center;">3624 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>
<p>(2 months ago)</p>	<p style="text-align: center;">3626 \$ <input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/> . <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(3 months ago)</p>	<p style="text-align: center;">3628 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>
<p>(4 months ago)</p>	<p style="text-align: center;">3630 \$ <input style="width: 100px; height: 20px; border: 1px solid black;" type="text"/> . <input style="width: 30px; height: 20px; border: 1px solid black;" type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>

Section 3 – AMOUNTS (Continued)

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

CHECK ITEM A5	Mark (X) income type code.	3632	1 <input type="checkbox"/> ISS code 1 or 2 – SKIP to Check Item A6. 1 2 <input type="checkbox"/> ISS code 8 or 20 through 24 3 <input type="checkbox"/> All other income codes – SKIP to next ISS Code or Check Item P1, page 53																																	
6a. Were all the people living here covered by ...'s payments?		3634	1 <input type="checkbox"/> Yes – SKIP to Check Item A6 2 <input type="checkbox"/> No																																	
b. Which persons were covered?			<table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;"></th> <th style="width:15%;">Person No.</th> <th style="width:75%;">Name</th> </tr> </thead> <tbody> <tr><td style="text-align:center;">3636</td><td style="border: 1px solid black; width: 15px;"> </td><td style="border: 1px solid black;"> </td></tr> <tr><td style="text-align:center;">3638</td><td style="border: 1px solid black;"> </td><td style="border: 1px solid black;"> </td></tr> <tr><td style="text-align:center;">3640</td><td style="border: 1px solid black;"> </td><td style="border: 1px solid black;"> </td></tr> <tr><td style="text-align:center;">3642</td><td style="border: 1px solid black;"> </td><td style="border: 1px solid black;"> </td></tr> <tr><td style="text-align:center;">3644</td><td style="border: 1px solid black;"> </td><td style="border: 1px solid black;"> </td></tr> <tr><td style="text-align:center;">3646</td><td style="border: 1px solid black;"> </td><td style="border: 1px solid black;"> </td></tr> <tr><td style="text-align:center;">3648</td><td style="border: 1px solid black;"> </td><td style="border: 1px solid black;"> </td></tr> <tr><td style="text-align:center;">3650</td><td style="border: 1px solid black;"> </td><td style="border: 1px solid black;"> </td></tr> <tr><td style="text-align:center;">3652</td><td style="border: 1px solid black;"> </td><td style="border: 1px solid black;"> </td></tr> <tr><td style="text-align:center;">3654</td><td style="border: 1px solid black;"> </td><td style="border: 1px solid black;"> </td></tr> </tbody> </table>		Person No.	Name	3636			3638			3640			3642			3644			3646			3648			3650			3652			3654		
	Person No.	Name																																		
3636																																				
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3646																																				
3648																																				
3650																																				
3652																																				
3654																																				
CHECK ITEM A6	Is this ISS code "B"?	3656	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to next ISS Code or Check Item P1, page 53																																	
7a. What type of Veterans' payments did ... receive?		3658	1 <input type="checkbox"/> Service-connected disability compensation 2 <input type="checkbox"/> Survivor benefits 3 <input type="checkbox"/> Veterans' pension 4 <input type="checkbox"/> Other Veterans' payments																																	
b. Is ... required to fill out an annual income questionnaire in order to receive a VA pension?		3660	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK } SKIP to next ISS Code or Check Item P1, page 53																																	
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 <input type="checkbox"/> Yes – SKIP to Check Item A7 2 <input type="checkbox"/> No																																	
8a. (Social Security/Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope ...'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)		3664	1 <input type="checkbox"/> Blue 2 <input type="checkbox"/> Buff 3 <input type="checkbox"/> Direct Deposit 4 <input type="checkbox"/> Other x1 <input type="checkbox"/> DK																																	
b. Do ...'s payments usually come on the first of the month or the third?		3666	1 <input type="checkbox"/> First 2 <input type="checkbox"/> Third 3 <input type="checkbox"/> Other x1 <input type="checkbox"/> DK																																	
CHECK ITEM A7	Refer to item 2, page 36. Were (Social Security/Railroad Retirement) payments received especially for ...'s children?	3668	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to next ISS Code or Check Item P1, page 53																																	

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.
(Last month)

3670 1 Yes
2 No
x1 DK

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

3672 \$ 00
x1 DK
x2 Ref.

(2 months ago)

3674 1 Yes
2 No
x1 DK

3676 \$ 00
x1 DK
x2 Ref.

(3 months ago)

3678 1 Yes
2 No
x1 DK

3680 \$ 00
x1 DK
x2 Ref.

(4 months ago)

3682 1 Yes
2 No
x1 DK

3684 \$ 00
x1 DK
x2 Ref.

VERIFY IF ONLY ONE CHILD OR ASK –

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

3686 1 Yes – *SKIP to next ISS Code or Check Item P1, page 53*
2 No

b. Which children were covered?

Person No. Name

3688	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3690	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3692	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3694	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3696	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3698	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

SKIP to next ISS Code or Check Item P1, page 53

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	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3704	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3706	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3708	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3710	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3712	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3714	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
3716	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	

Section 3 – AMOUNTS (Continued)

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?

(Last month)

3722

- 1 Yes
- 2 No
- x1 DK

3724

\$ [] [] [] [] . [] [] [] []

x1 DK
x2 Ref.

(2 months ago)

3726

- 1 Yes
- 2 No
- x1 DK

3728

\$ [] [] [] [] . [] [] [] []

x1 DK
x2 Ref.

(3 months ago)

3730

- 1 Yes
- 2 No
- x1 DK

3732

\$ [] [] [] [] . [] [] [] []

x1 DK
x2 Ref.

(4 months ago)

3734

- 1 Yes
- 2 No
- x1 DK

3736

\$ [] [] [] [] . [] [] [] []

x1 DK
x2 Ref.

SKIP to next ISS Code or Check Item P1, page 53

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

Mark (X) all that apply.

3738

1 Last month

3740

2 2 months ago

3742

3 3 months ago

3744

4 4 months ago

b. Which persons were covered?

Person No. Name

3746

[] [] [] []

3748

[] [] [] []

3750

[] [] [] []

3752

[] [] [] []

3754

[] [] [] []

SKIP to next ISS Code or Check Item P1, page 53

NOTES

Section 3 – AMOUNTS

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

		Income code	Name of income type
1. You said . . . received (was authorized to receive) (Read name of income type) during the 4-month period. <i>(Read "was authorized to receive" if asking about food stamps – code 27.)</i>	3800	[] []	
CHECK ITEM A1 <i>Mark (X) income type code.</i>	3802		1 <input type="checkbox"/> ISS code 1 or 2 (ISS or RR) 2 <input type="checkbox"/> ISS code 25 (WIC) – SKIP to 13a, page 43 3 <input type="checkbox"/> ISS code 27 (Food Stamps) – SKIP to 11a, page 42 4 <input type="checkbox"/> ISS codes 37, 50, 51, 52, 53, or 56 – SKIP to Check Item A4 5 <input type="checkbox"/> Other ISS codes – SKIP to Check Item A4.1
CHECK ITEM A2 <i>Refer to cc item 27.</i> <i>Is . . . a designated parent, or guardian of children under age 18?</i>	3804		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> 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 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item A3
3. Did . . . also receive a separate payment for (himself/herself) during any of these months?	3808		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 9a
CHECK ITEM A3 <i>Refer to cc item 26a.</i> <i>Is . . . married?</i>	3810		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item A4.1
4. Did . . . receive (Social Security/Railroad Retirement) jointly with . . . 's spouse?	3812		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item A4.1
CHECK ITEM A4 <i>Has information about the amount received by . . . from the income source entered in item 1 already been recorded during an interview for . . . 's spouse?</i>	3814		1 <input type="checkbox"/> Yes – SKIP to next ISS Code or Check Item P1, page 53 2 <input type="checkbox"/> No
CHECK ITEM A4.1 <i>Refer to item 11b, page 5.</i> <i>Is this income source listed on the income roster?</i>	3815		1 <input type="checkbox"/> Yes – ASK 5b. 2 <input type="checkbox"/> No – ASK 5a
5a. In which month, during the 4-month reference period, did . . . begin to receive (Read name of income type)? <i>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.</i> 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 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	3818 \$ [] [] . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
(2 months ago)	3820	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	3822 \$ [] [] . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
(3 months ago)	3824	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	3826 \$ [] [] . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
(4 months ago)	3828	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	3830 \$ [] [] . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.

Section 3 – AMOUNTS (Continued)

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

CHECK ITEM A5	Mark (X) income type code.	3832	<input type="checkbox"/> ISS code 1 or 2 – SKIP to Check Item A6. 1 <input type="checkbox"/> ISS code 8 or 20 through 24 <input type="checkbox"/> All other income codes – SKIP to next ISS Code or Check Item P1, page 53
6a. Were all the people living here covered by ...'s payments?		3834	<input type="checkbox"/> Yes – SKIP to Check Item A6 <input type="checkbox"/> No
b. Which persons were covered?			
		3836	Person No. Name
		3838	
		3840	
		3842	
		3844	
		3846	
		3848	
		3850	
		3852	
		3854	
CHECK ITEM A6	Is this ISS code "B"?	3856	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to next ISS Code or Check Item P1, page 53
7a. What type of Veterans' payments did ... receive?		3858	<input type="checkbox"/> Service-connected disability compensation <input type="checkbox"/> Survivor benefits <input type="checkbox"/> Veterans' pension <input type="checkbox"/> Other Veterans' payments
b. Is ... required to fill out an annual income questionnaire in order to receive a VA pension?		3860	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK
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	<input type="checkbox"/> Yes – SKIP to Check Item A7 <input type="checkbox"/> No
8a. (SHOW FLASHCARD O) (Social Security/Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope ...'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)		3864	<input type="checkbox"/> Blue <input type="checkbox"/> Buff <input type="checkbox"/> Direct Deposit <input type="checkbox"/> Other <input type="checkbox"/> DK
b. Do ...'s payments usually come on the first of the month or the third?		3866	<input type="checkbox"/> First <input type="checkbox"/> Third <input type="checkbox"/> Other <input type="checkbox"/> DK
CHECK ITEM A7	Refer to item 2, page 40. Were (Social Security/Railroad Retirement) payments received especially for ...'s children?	3868	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to next ISS Code or Check Item P1, page 53

NOTES

Section 3 – AMOUNTS (Continued)

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

<p>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. (Last month)</p>	<p>3870</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>	<p>3872</p>	<p>9b. If "Yes" in item 9a – How much was received? \$ <input style="width: 80px;" type="text"/> . <input style="width: 20px;" type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(2 months ago)</p>	<p>3874</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>	<p>3876</p>	<p>\$ <input style="width: 80px;" type="text"/> . <input style="width: 20px;" type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(3 months ago)</p>	<p>3878</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>	<p>3880</p>	<p>\$ <input style="width: 80px;" type="text"/> . <input style="width: 20px;" type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(4 months ago)</p>	<p>3882</p>	<p>1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK</p>	<p>3884</p>	<p>\$ <input style="width: 80px;" type="text"/> . <input style="width: 20px;" type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>

<p><i>VERIFY IF ONLY ONE CHILD OR ASK –</i> 10a. Were all children living here covered by these payments?</p>	<p>3886</p>	<p>1 <input type="checkbox"/> Yes – <i>SKIP to next ISS Code or Check Item P1, page 53</i> 2 <input type="checkbox"/> No</p>
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<p>b. Which children were covered?</p>		<p>Person No.</p>	<p>Name</p>	
	3888	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	
	3890	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	
	3892	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	
	3894	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	
	3896	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	
	3898	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	

SKIP to next ISS Code or Check Item P1, page 53

<p>11a. Were all the people living here covered under ...'s food stamp allotment?</p>	<p>3900</p>	<p>1 <input type="checkbox"/> Yes – <i>SKIP to Check Item A7.1</i> 2 <input type="checkbox"/> No</p>
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<p>b. Which persons were covered?</p>		<p>Person No.</p>	<p>Name</p>	
	3902	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	
	3904	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	
	3906	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	
	3908	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	
	3910	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	
	3912	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	
	3914	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	
	3916	<input style="width: 30px;" type="text"/>	<input style="width: 30px;" type="text"/>	

Section 3 – AMOUNTS (Continued)

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?

(Last month)

3922

- 1 Yes
- 2 No
- x1 DK

3924

\$. 00
x1 DK
x2 Ref.

(2 months ago)

3926

- 1 Yes
- 2 No
- x1 DK

3928

\$. 00
x1 DK
x2 Ref.

(3 months ago)

3930

- 1 Yes
- 2 No
- x1 DK

3932

\$. 00
x1 DK
x2 Ref.

(4 months ago)

3934

- 1 Yes
- 2 No
- x1 DK

3936

\$. 00
x1 DK
x2 Ref.

SKIP to next ISS Code or Check Item P1, page 53

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

Mark (X) all that apply.

3938

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

3940

3942

3944

b. Which persons were covered?

Person No. Name

3946

3948

3950

3952

3954

SKIP to next ISS Code or Check Item P1, page 53

NOTES

Section 3 – AMOUNTS

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

		Income code	Name of income type
1. You said . . . received (was authorized to receive) (Read name of income type) during the 4-month period. <i>(Read "was authorized to receive" if asking about Food Stamps – code 27.)</i>	4000	[] []	
CHECK ITEM A1 <i>Mark (X) income type code.</i>	4002	1 <input type="checkbox"/> ISS code 1 or 2 (SS or RR) 2 <input type="checkbox"/> ISS code 25 (WIC) – SKIP to 13a. page 47 3 <input type="checkbox"/> ISS code 27 (Food Stamps) – SKIP to 11a. page 46 4 <input type="checkbox"/> ISS codes 37, 50, 51, 52, 53, or 56 – SKIP to Check Item A4 5 <input type="checkbox"/> Other ISS codes – SKIP to Check Item A4.1	
CHECK ITEM A2 <i>Refer to cc item 27.</i> <i>Is . . . a designated parent, or guardian of children under age 18?</i>	4004	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> 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 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item A3	
3. Did . . . also receive a separate payment for (himself/herself) during any of these months?	4008	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 9a	
CHECK ITEM A3 <i>Refer to cc item 26a.</i> <i>Is . . . married?</i>	4010	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item A4.1	
4. Did . . . receive (Social Security/Railroad Retirement) jointly with . . .'s spouse?	4012	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item A4.1	
CHECK ITEM A4 <i>Has information about the amount received by . . . from the income source entered in item 1 already been recorded during an interview for . . .'s spouse?</i>	4014	1 <input type="checkbox"/> Yes – SKIP to next ISS Code or Check Item P1. page 53 2 <input type="checkbox"/> No	
CHECK ITEM A4.1 <i>Refer to item 11b. page 5.</i> <i>Is this income source listed on the income roster?</i>	4015	1 <input type="checkbox"/> Yes – ASK 5b 2 <input type="checkbox"/> No – ASK 5a	
5a. In which month, during the 4-month reference period, did . . . begin to receive (Read name of income type)? <i>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.</i> 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)	4016	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	4018 \$ [] [] [] [] . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
(2 months ago)	4020	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	4022 \$ [] [] [] [] . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
(3 months ago)	4024	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	4026 \$ [] [] [] [] . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
(4 months ago)	4028	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK	4030 \$ [] [] [] [] . 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.

Section 3 – AMOUNTS (Continued)

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

CHECK ITEM A5	Mark (X) income type code.	4032	<input type="checkbox"/> ISS code 1 or 2 – SKIP to Check Item A6.1 <input type="checkbox"/> ISS code 8 or 20 through 24 <input type="checkbox"/> All other income codes – SKIP to next ISS Code or Check Item P1, page 53
6a. Were all the people living here covered by ...'s payments?		4034	<input type="checkbox"/> Yes – SKIP to Check Item A6 <input type="checkbox"/> 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	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to next ISS Code or Check Item P1, page 53
7a. What type of Veterans' payments did ... receive?		4058	<input type="checkbox"/> Service-connected disability compensation <input type="checkbox"/> Survivor benefits <input type="checkbox"/> Veterans' pension <input type="checkbox"/> Other Veterans' payments
b. Is ... required to fill out an annual income questionnaire in order to receive a VA pension?		4060	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK } SKIP to next ISS Code or Check Item P1, page 53
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	<input type="checkbox"/> Yes – SKIP to Check Item A7 <input type="checkbox"/> No
8a. (SHOW FLASHCARD O) (Social Security/Railroad Retirement) sends out checks in two different colored envelopes. Please look at this flashcard and tell me which color envelope ...'s check comes in. (Remember, we are interested in the color of the envelope, not the color of the check.)		4064	<input type="checkbox"/> Blue <input type="checkbox"/> Buff <input type="checkbox"/> Direct Deposit <input type="checkbox"/> Other <input type="checkbox"/> DK
b. Do ...'s payments usually come on the first of the month or the third?		4066	<input type="checkbox"/> First <input type="checkbox"/> Third <input type="checkbox"/> Other <input type="checkbox"/> DK
CHECK ITEM A7	Refer to item 2, page 44. Were (Social Security/Railroad Retirement) payments received especially for ...'s children?	4068	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to next ISS Code or Check Item P1, page 53

NOTES

Section 3 – AMOUNTS (Continued)

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

<p>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. (Last month)</p>	4070	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK	<p>9b. If "Yes" in item 9a – How much was received?</p> <p>\$ <input style="width: 100px;" type="text"/> . <input style="width: 30px;" type="text"/> 00</p> <p>x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(2 months ago)</p>	4074	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK	<p>\$ <input style="width: 100px;" type="text"/> . <input style="width: 30px;" type="text"/> 00</p> <p>x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(3 months ago)</p>	4078	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK	<p>\$ <input style="width: 100px;" type="text"/> . <input style="width: 30px;" type="text"/> 00</p> <p>x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>
<p>(4 months ago)</p>	4082	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> DK	<p>\$ <input style="width: 100px;" type="text"/> . <input style="width: 30px;" type="text"/> 00</p> <p>x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.</p>

VERIFY IF ONLY ONE CHILD OR ASK –

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

4086 Yes – *SKIP to next ISS Code or Check Item P1, page 53*
 No

b. Which children were covered?

	Person No.	Name
4088	<input style="width: 30px;" type="text"/>	_____
4090	<input style="width: 30px;" type="text"/>	_____
4092	<input style="width: 30px;" type="text"/>	_____
4094	<input style="width: 30px;" type="text"/>	_____
4096	<input style="width: 30px;" type="text"/>	_____
4098	<input style="width: 30px;" type="text"/>	_____

SKIP to next ISS Code or Check Item P1, page 53

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

4100 Yes – *SKIP to Check Item A7.1*
 No

b. Which persons were covered?

	Person No.	Name
4102	<input style="width: 30px;" type="text"/>	_____
4104	<input style="width: 30px;" type="text"/>	_____
4106	<input style="width: 30px;" type="text"/>	_____
4108	<input style="width: 30px;" type="text"/>	_____
4110	<input style="width: 30px;" type="text"/>	_____
4112	<input style="width: 30px;" type="text"/>	_____
4114	<input style="width: 30px;" type="text"/>	_____
4116	<input style="width: 30px;" type="text"/>	_____

Section 3 – AMOUNTS (Continued)

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?

(Last month)

4122

- 1 Yes
2 No
x1 DK

4124

Form with dollar sign, input box, and 00, plus options x1 DK and x2 Ref.

(2 months ago)

4126

- 1 Yes
2 No
x1 DK

4128

Form with dollar sign, input box, and 00, plus options x1 DK and x2 Ref.

(3 months ago)

4130

- 1 Yes
2 No
x1 DK

4132

Form with dollar sign, input box, and 00, plus options x1 DK and x2 Ref.

(4 months ago)

4134

- 1 Yes
2 No
x1 DK

4136

Form with dollar sign, input box, and 00, plus options x1 DK and x2 Ref.

SKIP to next ISS Code or Check Item P1, page 53

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

Mark (X) all that apply.

4138

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

4140

4142

4144

b. Which persons were covered?

Person No. Name

4146

Person No. input box

4148

Person No. input box

4150

Person No. input box

4152

Person No. input box

4154

Person No. input box

SKIP to next ISS Code or Check Item P1, page 53

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	<input type="checkbox"/> ISS Code 100 – Regular/Passbook Savings Accounts
		4302	<input type="checkbox"/> ISS Code 101 – Money Market Deposit Accounts
		4304	<input type="checkbox"/> ISS Code 102 – Certificates of Deposit or other Savings Certificates
		4306	<input type="checkbox"/> 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	<input type="checkbox"/> No spouse in household – SKIP to 3b
			<input type="checkbox"/> Interview for spouse not yet conducted
			<input type="checkbox"/> Interview for spouse already conducted – SKIP to 3a

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

4310	<input type="checkbox"/> Yes
	<input type="checkbox"/> 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	– SKIP to 3a
	x3	<input type="checkbox"/> None – SKIP to 3a		
	x1	<input type="checkbox"/> DK		
	x2	<input type="checkbox"/> Ref. – SKIP to next ISS Code or Check Item P1, page 53		

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

4314	\$		00	– SKIP to 3a
	x1	<input type="checkbox"/> DK		
	x2	<input type="checkbox"/> Ref. – SKIP to next ISS Code or Check Item P1, page 53		

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

4316	<input type="checkbox"/> Yes – Mark Reminder Card and Callback Summary, Item 5
	<input type="checkbox"/> No

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

4318	<input type="checkbox"/> Yes
	<input type="checkbox"/> No – SKIP to next ISS Code or Check Item P1, page 53

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	– SKIP to next ISS Code or Check Item P1, page 53
	x3	<input type="checkbox"/> None – SKIP to next ISS Code or Check Item P1, page 53		
	x1	<input type="checkbox"/> DK		
	x2	<input type="checkbox"/> Ref. – SKIP to next ISS Code or Check Item P1, page 53		

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

4322	\$		00	– SKIP to next ISS Code or Check Item P1, page 53
	x1	<input type="checkbox"/> DK		
	x2	<input type="checkbox"/> Ref. – SKIP to next ISS Code or Check Item P1, page 53		

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

4324	<input type="checkbox"/> Yes – Mark Reminder Card and Callback Summary, Item 6	} SKIP to next ISS Code or Check Item P1, page 53
	<input type="checkbox"/> 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** ISS code 104 – Money Market funds
4402 ISS code 105 – U.S. Government securities
4404 ISS code 106 – Municipal or corporate bonds
4406 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** No spouse in household – SKIP to 3b
 Interview for spouse not yet conducted
 Interview for spouse already conducted – SKIP to 3a

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

- 4410** Yes
 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 – SKIP to 3a
 x3 None – SKIP to 3a
 x1 DK
 x2 Ref. – SKIP to next ISS Code or Check Item P1, page 53

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

- 4414** \$. 00 – SKIP to 3a
 x1 DK
 x2 Ref. – SKIP to next ISS Code or Check Item P1, page 53

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

- 4416** Yes – Mark Reminder Card and Callback Summary, Item 7
 No

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

- 4418** Yes
 No – SKIP to next ISS Code or Check Item P1, page 53

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 – SKIP to next ISS Code or Check Item P1, page 53
 x3 None – SKIP to next ISS Code or Check Item P1, page 53
 x1 DK
 x2 Ref. – SKIP to next ISS Code or Check Item P1, page 53

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

- 4422** \$. 00 – SKIP to next ISS Code or Check Item P1, page 53
 x1 DK
 x2 Ref. – SKIP to next ISS Code or Check Item P1, page 53

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

- 4424** Yes – Mark Reminder Card and Callback Summary, Item 8 } SKIP to next ISS Code or Check Item P1, page 53
 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 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No } <i>SKIP to 3a</i> x1 <input type="checkbox"/> DK
CHECK-ITEM A12 Interview status of . . .'s spouse.	4502 1 <input type="checkbox"/> No spouse in household — <i>SKIP to 2a</i> 2 <input type="checkbox"/> Interview for spouse not yet conducted 3 <input type="checkbox"/> Interview for spouse already conducted — <i>SKIP to 2a</i>
1b. During the past 4 months, how much was received in dividend checks made out jointly to . . . and . . .'s (husband/wife)?	4504 \$ <input style="width: 60px;" type="text"/> . <input style="width: 30px;" type="text"/> 00 — <i>SKIP to 2a</i> x3 <input type="checkbox"/> None — <i>SKIP to 2a</i> x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. — <i>SKIP to next ISS Code or Check Item P1, page 53</i>
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.)	4508 1 <input type="checkbox"/> Yes — <i>Mark Reminder Card and Callback Summary, Item 9</i> 2 <input type="checkbox"/> No
2a. During this 4-month period, how much did . . . receive in dividend checks (in . . .'s name only)?	4508 \$ <input style="width: 60px;" type="text"/> . <input style="width: 30px;" type="text"/> 00 — <i>SKIP to 3a</i> x3 <input type="checkbox"/> None — <i>SKIP to 3a</i> x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. — <i>SKIP to next ISS Code or Check Item P1, page 53</i>
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 <input type="checkbox"/> Yes — <i>Mark Reminder Card and Callback Summary, Item 10</i> 2 <input type="checkbox"/> 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 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No } <i>SKIP to next ISS Code or</i> x1 <input type="checkbox"/> DK } <i>Check Item P1, page 53</i>
CHECK-ITEM A13 Interview status of . . .'s spouse.	4514 1 <input type="checkbox"/> No spouse in household — <i>SKIP to 3c</i> 2 <input type="checkbox"/> Interview for spouse not yet conducted 3 <input type="checkbox"/> Interview for spouse already conducted — <i>SKIP to 3c</i>
3b. During the 4-month period, how much of these kinds of dividends did . . . earn jointly with . . .'s (husband/wife)?	4516 \$ <input style="width: 60px;" type="text"/> . <input style="width: 30px;" type="text"/> 00 x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. — <i>SKIP to next ISS Code or Check Item P1, page 53</i>
C. During the 4-month period, how much of these kinds of dividends did . . . earn (in . . .'s name only)?	4518 \$ <input style="width: 60px;" type="text"/> . <input style="width: 30px;" type="text"/> 00 } <i>SKIP to next ISS Code or Check Item P1, page 53</i> x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.

NOTES

Section 3 – AMOUNTS (Continued)

Part E – RENTAL INCOME (ISS Code 120)

1. Earlier you told me that . . . owned some rental property.	
CHECK ITEM A14 Interview status of . . . 's spouse.	4600 1 <input type="checkbox"/> No spouse in household – <i>SKIP to 3a</i> 2 <input type="checkbox"/> Interview for spouse not yet conducted 3 <input type="checkbox"/> Interview for spouse already conducted – <i>SKIP to 3a</i>
2a. Did . . . receive any rental income from property owned jointly by . . . and . . . 's (husband/wife) during the last 4 months? <i>Include only property owned entirely by couple.</i>	4602 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – <i>SKIP to 3a</i>
b. About how much was received in gross rent from this property during the 4-month period?	4604 \$ <input style="width: 60px;" type="text"/> . <input style="width: 30px;" type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. – <i>SKIP to next ISS Code or Check Item P1, page 53</i>
c. What is your best estimate of the amount that was cleared after expenses?	4606 \$ <input style="width: 60px;" type="text"/> . <input style="width: 30px;" type="text"/> 00 x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. – <i>SKIP to next ISS Code or Check Item P1, page 53</i> 4608 x4 <input type="checkbox"/> Lost money – <i>Enter amount of loss in box</i>
3a. Did . . . receive rental income from property owned entirely in . . . 's own name during the last 4 months?	4610 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – <i>SKIP to 4a</i>
b. About how much was received in gross rent from this property during the 4-month period?	4612 \$ <input style="width: 60px;" type="text"/> . <input style="width: 30px;" type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. – <i>SKIP to next ISS Code or Check Item P1, page 53</i>
c. What is your best estimate of the amount that was cleared after expenses?	4614 \$ <input style="width: 60px;" type="text"/> . <input style="width: 30px;" type="text"/> 00 x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. – <i>SKIP to next ISS Code or Check Item P1, page 53</i> 4616 x4 <input type="checkbox"/> Lost money – <i>Enter amount of loss in box</i>
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 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – <i>SKIP to next ISS code or Check Item P1, page 53</i>
b. What is your best estimate of . . . 's share of the amount cleared on this property during the last 4 months?	4620 \$ <input style="width: 60px;" type="text"/> . <input style="width: 30px;" type="text"/> 00 x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. 4622 x4 <input type="checkbox"/> Lost money – <i>Enter amount of loss in box</i>

AMOUNTS – PARTS D & E

SKIP to next ISS Code or Check Item P1, page 53

NOTES

Section 3 – AMOUNTS (Continued)

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

CHECK ITEM A15	Asset types owned. <i>Mark (X) all that apply.</i>	4700 4702 4704	<input type="checkbox"/> ISS Code 130 – Mortgages <input type="checkbox"/> ISS Code 140 – Royalties <input type="checkbox"/> ISS Code 150 – Other financial investments
CHECK ITEM A16	Refer to Check Item A15. Is ISS Code 130 marked?	4708	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to 3
CHECK ITEM A17	Interview status of ...'s spouse.	4708	<input type="checkbox"/> No spouse in household – SKIP to 2b <input type="checkbox"/> Interview for spouse not yet conducted <input type="checkbox"/> Interview for spouse already conducted – SKIP to 2a
1a.	Earlier you said ... had a mortgage. Did ... own this jointly with ...'s spouse?	4710	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to 2b
b.	During the past 4 months, how much interest was paid to ... and ...'s spouse by the borrower?	4712	\$ <input style="width:50px;" type="text"/> . <input style="width:30px;" type="text"/> 00 <input type="checkbox"/> None <input type="checkbox"/> DK <input type="checkbox"/> Ref.
2a.	(Besides these jointly held mortgages) did ... hold any mortgages in ...'s own name?	4714	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to Check Item A18
b.	(Earlier you said that ... held a mortgage.) During the past 4 months, how much interest was paid to ... by the borrower?	4718	\$ <input style="width:50px;" type="text"/> . <input style="width:30px;" type="text"/> 00 <input type="checkbox"/> None <input type="checkbox"/> DK <input type="checkbox"/> Ref.
CHECK ITEM A18	Refer to Check Item A15. Is ISS Code 140 or 150 marked?	4718	<input type="checkbox"/> Yes <input type="checkbox"/> No – SKIP to Check Item P1
3.	Earlier you said ... had (Read asset types). During the past 4 months, how much income did ... receive from these (Read asset types)? <i>If income was shared, count only ...'s share.</i>	4720 4722	\$ <input style="width:50px;" type="text"/> . <input style="width:30px;" type="text"/> 00 <input type="checkbox"/> None <input type="checkbox"/> DK <input type="checkbox"/> Ref. <input type="checkbox"/> Lost money – Enter amount of loss in box

NOTES

PROGRAM QUESTIONS

Section 4 – PROGRAM QUESTIONS

CHECK ITEM P1	Refer to cc item 19b. Is this the reference person's questionnaire?	4800	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No – SKIP to Statement C, page 54
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	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No – SKIP to 2a
1 a. What is your monthly rent? <i>Include only the amount the respondent pays for rent. Exclude any amount paid by the government.</i>		4804	\$ <input style="width: 60px;" type="text"/> . <input style="width: 30px;" type="text"/> 00 <input type="checkbox"/> x3 None <input type="checkbox"/> x1 DK <input type="checkbox"/> x2 Ref. } SKIP to 2a
b. (In addition to rent,) do you pay for any utilities such as water, electricity, gas, or oil? <i>Exclude telephone.</i>		4806	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> x1 DK
2 a. 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	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> 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? <i>Mark (X) all that apply.</i>		4818 4820 4822	<input type="checkbox"/> 1 Checks sent to household <input type="checkbox"/> 2 Coupons or vouchers sent to household <input type="checkbox"/> 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	\$ <input style="width: 60px;" type="text"/> . <input style="width: 30px;" type="text"/> 00 <input type="checkbox"/> x1 DK
CHECK ITEM P3	Are there any children 5 to 18 years old who live in this household?	4826	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No – SKIP to Statement C, page 54
3 a. Do any of the children in this household usually receive a complete hot lunch offered at school?		4828	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No – SKIP to Statement C, page 54
b. How many children?		4830	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> Children
c. How many complete school lunches do all of the children receive per week?		4832	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> Number of lunches <input type="checkbox"/> 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	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No – SKIP to 3f
e. In the past 4 months, were the lunches free, reduced price, or were they full price? <i>Mark (X) only one.</i>		4836	<input type="checkbox"/> 1 Free lunch – SKIP to 3g <input type="checkbox"/> 2 Reduced-price lunch <input type="checkbox"/> 3 Full-price lunch
f. What was the average price paid by all of the children for a complete school lunch?		4838	\$ <input style="width: 60px;" type="text"/> . <input style="width: 30px;" type="text"/> <input type="checkbox"/> x1 DK
g. Do any of the children usually receive breakfast at school under the Federal School Breakfast Program?		4840	<input type="checkbox"/> 1 Yes <input type="checkbox"/> 2 No – SKIP to Statement C, page 54
h. How many children?		4842	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> Children
i. How many complete school breakfasts do all of the children receive per week?		4844	<input style="width: 20px;" type="text"/> <input style="width: 20px;" type="text"/> Number of breakfasts <input type="checkbox"/> x1 DK
j. In the past 4 months, were the breakfasts free, reduced price, or were they full price? <i>Mark (X) only one.</i>		4846	<input type="checkbox"/> 1 Free breakfast <input type="checkbox"/> 2 Reduced-price breakfast <input type="checkbox"/> 3 Full-price breakfast

PROGRAM QUESTIONS

Section 5 – TOPICAL MODULES

Part A – ANNUAL INCOME AND RETIREMENT ACCOUNTS

STATEMENT C

The purpose of this part of our interview is to get the most accurate picture possible of the situation of persons and families during calendar year 1990. It would be very helpful to refer to records during this part of the interview.

CHECK ITEM T1	Are the names of any businesses listed for . . . on the control card? (cc item 43)	8000	1 <input type="checkbox"/> Yes – SKIP to 1b 2 <input type="checkbox"/> No
CHECK ITEM T2	Was an interview obtained for . . . for each of the 1st, 2nd, 3rd, AND 4th waves (cc items 44, 45, 46, and 47)?	8002	1 <input type="checkbox"/> Yes – SKIP to Statement D, page 57 2 <input type="checkbox"/> No
1 a.	Did . . . own and operate a business at any time during calendar year 1990? <i>Include farms.</i>	8004	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Statement D, page 57
	ASK OR VERIFY – b. How many different businesses did . . . own and operate during calendar year 1990?	8006	<input type="text"/> <input type="text"/> Businesses OR x3 <input type="checkbox"/> None – SKIP to Statement D, page 57
	ASK OR VERIFY – c. What were the names of the businesses that . . . owned and operated during calendar year 1990? (List up to 2 businesses; list according to net income from business beginning with the business providing the largest net income.)	PGM8 8008	PGM8 8058
		Business name _____ _____	Business name _____ _____
CHECK ITEM T3	Transcribe ID number for this business from the control card (cc item 43). <i>(Fill items T3–T9 for the first business listed, then fill items T3–T9 if a second business is listed.)</i>	PGM7 8010	<input type="checkbox"/> Business ID No. OR x3 <input type="checkbox"/> Not listed on control card
		PGM7 8060	<input type="checkbox"/> Business ID No. OR x3 <input type="checkbox"/> Not listed on control card
CHECK ITEM T4	Has information about this business already been obtained in an interview for another household member?	8012	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 2a
		8062	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 2a
INTERVIEWER INSTRUCTION: Enter name, person number, and business ID number of the other owner who previously reported the business to indicate the location of the information about this business.		8014	8064
	Name _____	Name _____	
	Person number _____	Person number _____	
	Business ID number _____	Business ID number _____	
	8016 <input type="checkbox"/>	8066 <input type="checkbox"/>	
	OR x3 <input type="checkbox"/> Not listed on control card	OR x3 <input type="checkbox"/> Not listed on control card	
	} SKIP to Check Item T9, page 56	} SKIP to Check Item T10, page 56	
	ASK OR VERIFY – 2 a. What was the form of this (business/practice) – was it a sole proprietorship, a partnership, or a corporation?	8018	1 <input type="checkbox"/> Sole proprietorship 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Corporation x1 <input type="checkbox"/> DK
		8068	1 <input type="checkbox"/> Sole proprietorship 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Corporation x1 <input type="checkbox"/> DK
	b. Was this business primarily located in . . . 's own home or somewhere else?	8020	1 <input type="checkbox"/> Own home 2 <input type="checkbox"/> Somewhere else
		8070	1 <input type="checkbox"/> Own home 2 <input type="checkbox"/> Somewhere else

TOPICAL MODULES

Section 5 – TOPICAL MODULES (Continued)

Part A – ANNUAL INCOME AND RETIREMENT ACCOUNTS (Continued)

CHECK ITEM T5	Is "sole proprietorship" marked in item 2a?	8104 1 <input type="checkbox"/> Yes – SKIP to 2h 2 <input type="checkbox"/> No	8154 1 <input type="checkbox"/> Yes – SKIP to 2h 2 <input type="checkbox"/> No
2c.	Were any other members of this household part owners of this (business/practice)?	8106 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK } SKIP to 2g	8156 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No x1 <input type="checkbox"/> DK } SKIP to 2g
d.	Which other household members were owners?	Person No. 8108 <input type="text"/> <input type="text"/> <input type="text"/> Name _____	Person No. 8158 <input type="text"/> <input type="text"/> <input type="text"/> Name _____
		Person No. 8110 <input type="text"/> <input type="text"/> <input type="text"/> Name _____	Person No. 8160 <input type="text"/> <input type="text"/> <input type="text"/> Name _____
e.	Was this (business/practice) owned entirely by members of this household?	8112 1 <input type="checkbox"/> Yes – SKIP to 2g 2 <input type="checkbox"/> No	8162 1 <input type="checkbox"/> Yes – SKIP to 2g 2 <input type="checkbox"/> No
f.	What percentage of this (business/practice) was owned by members of this household?	8114 <input type="text"/> <input type="text"/> Percent OR x1 <input type="checkbox"/> DK	8164 <input type="text"/> <input type="text"/> Percent OR x1 <input type="checkbox"/> DK
g.	What percentage of this (business/practice) did ... own in ...'s own name?	8116 <input type="text"/> <input type="text"/> Percent OR x1 <input type="checkbox"/> DK	8166 <input type="text"/> <input type="text"/> Percent OR x1 <input type="checkbox"/> DK
h.	What were the gross RECEIPTS of this (business/practice) in 1990? Please use records if they are available. ★ <i>Obtain estimate, if necessary.</i>	8118 \$ <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.	8168 \$ <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
i.	What were the total EXPENSES of this (business/practice) in 1990? Please use records if they are available. ★ <i>Obtain estimate, if necessary.</i>	8120 \$ <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.	8170 \$ <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
CHECK ITEM T6	Is "DK" marked in either item 2h or 2i?	8122 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item T7	8172 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to Check Item T7
2j.	If I were to call back later could you provide me with an estimate of (receipts/expenses)? (This information is especially important for this survey.)	8124 1 <input type="checkbox"/> Yes – Mark Callback Summary and Reminder Card, Items 11a and/or 11b 2 <input type="checkbox"/> No	8174 1 <input type="checkbox"/> Yes – Mark Callback Summary and Reminder Card, Items 11a and/or 11b 2 <input type="checkbox"/> No
CHECK ITEM T7	Is "sole proprietorship" marked in item 2a?	8126 1 <input type="checkbox"/> Yes – SKIP to Check Item T9 2 <input type="checkbox"/> No	8176 1 <input type="checkbox"/> Yes – SKIP to Check Item T10 2 <input type="checkbox"/> No

TOPICAL MODULES

Section 5 – TOPICAL MODULES (Continued)

Part A – ANNUAL INCOME AND RETIREMENT ACCOUNTS (Continued)

<p>2k. What was ...'s net income from this (business/practice) in 1990? Please use records if they are available.</p> <p align="right">★</p> <p><i>Obtain estimate, if necessary.</i></p>	<p>8202 \$ <input type="text"/> . <input type="text"/> 00</p> <p>x3 <input type="checkbox"/> None</p> <p>x2 <input type="checkbox"/> Ref.</p> <p>x1 <input type="checkbox"/> DK</p> <p>8204 x4 <input type="checkbox"/> Lost money – Enter amount of loss in box – SKIP to Check Item T8</p>	<p>8252 \$ <input type="text"/> . <input type="text"/> 00</p> <p>x3 <input type="checkbox"/> None</p> <p>x2 <input type="checkbox"/> Ref.</p> <p>x1 <input type="checkbox"/> DK</p> <p>8254 x4 <input type="checkbox"/> Lost money – Enter amount of loss in box – SKIP to Check Item T8</p>
<p>l. If I were to call back later could you provide me with an estimate? (This information is especially important for the purposes of this survey.)</p>	<p>8206 1 <input type="checkbox"/> Yes – Mark Callback Summary and Reminder Card, Item 12</p> <p>2 <input type="checkbox"/> No</p>	<p>8256 1 <input type="checkbox"/> Yes – Mark Callback Summary and Reminder Card, Item 12</p> <p>2 <input type="checkbox"/> No</p>
<p>CHECK ITEM T8 Refer to item 2d. Were any other household members part owners of this business?</p>	<p>8208 1 <input type="checkbox"/> Yes</p> <p>2 <input type="checkbox"/> No – SKIP to Check Item T9</p>	<p>8258 1 <input type="checkbox"/> Yes</p> <p>2 <input type="checkbox"/> No – SKIP to Check Item T10</p>
<p>2m. Apart from the net income already reported for ... did (Read names of other household owners) receive any net income in 1990 from this (business/practice)?</p>	<p>8210 1 <input type="checkbox"/> Yes</p> <p>2 <input type="checkbox"/> No</p> <p>x1 <input type="checkbox"/> DK } SKIP to Check Item T9</p>	<p>8260 1 <input type="checkbox"/> Yes</p> <p>2 <input type="checkbox"/> No</p> <p>x1 <input type="checkbox"/> DK } SKIP to Check Item T10</p>
<p>n. What was the amount of net income that was received by (Read names of other household owners)?</p> <p><i>Obtain estimate, if necessary.</i></p>	<p>Person No. <input type="text"/> <input type="text"/> <input type="text"/></p> <p>8212 <input type="text"/> <input type="text"/> <input type="text"/></p> <p>8214 \$ <input type="text"/> . <input type="text"/> 00</p> <p>x3 <input type="checkbox"/> None</p> <p>x1 <input type="checkbox"/> DK</p> <p>x2 <input type="checkbox"/> Ref.</p> <p>8216 x4 <input type="checkbox"/> Lost money – Enter amount of loss in box</p> <p>SECOND CO-OWNER</p> <p>Person No. <input type="text"/> <input type="text"/> <input type="text"/></p> <p>8218 <input type="text"/> <input type="text"/> <input type="text"/></p> <p>8220 \$ <input type="text"/> . <input type="text"/> 00</p> <p>x3 <input type="checkbox"/> None</p> <p>x1 <input type="checkbox"/> DK</p> <p>x2 <input type="checkbox"/> Ref.</p> <p>8222 x4 <input type="checkbox"/> Lost money – Enter amount of loss in box</p>	<p>Person No. <input type="text"/> <input type="text"/> <input type="text"/></p> <p>8262 <input type="text"/> <input type="text"/> <input type="text"/></p> <p>8264 \$ <input type="text"/> . <input type="text"/> 00</p> <p>x3 <input type="checkbox"/> None</p> <p>x1 <input type="checkbox"/> DK</p> <p>x2 <input type="checkbox"/> Ref.</p> <p>8266 x4 <input type="checkbox"/> Lost money – Enter amount of loss in box</p> <p>SECOND CO-OWNER</p> <p>Person No. <input type="text"/> <input type="text"/> <input type="text"/></p> <p>8268 <input type="text"/> <input type="text"/> <input type="text"/></p> <p>8270 \$ <input type="text"/> . <input type="text"/> 00</p> <p>x3 <input type="checkbox"/> None</p> <p>x1 <input type="checkbox"/> DK</p> <p>x2 <input type="checkbox"/> Ref.</p> <p>8272 x4 <input type="checkbox"/> Lost money – Enter amount of loss in box</p>
<p>CHECK ITEM T9 Is another business listed in item 1c?</p>	<p>8274 1 <input type="checkbox"/> Yes – Complete Check Item T3 for next business</p> <p>2 <input type="checkbox"/> No – SKIP to Statement D</p>	<p align="center">Go to Check Item T10</p>
<p>CHECK ITEM T10 Is the number of businesses recorded in item 1b three or more?</p>	<p>8276 1 <input type="checkbox"/> Yes</p> <p>2 <input type="checkbox"/> No – SKIP to Statement D</p>	
<p>3. What was ...'s net income from ...'s other businesses in 1990? Please use records if they are available.</p>	<p>8278 \$ <input type="text"/> . <input type="text"/> 00</p> <p>x3 <input type="checkbox"/> None</p> <p>x1 <input type="checkbox"/> DK</p> <p>x2 <input type="checkbox"/> Ref.</p> <p>8280 x4 <input type="checkbox"/> Lost money – Enter amount of loss in box</p>	
<p>NOTES</p>		

Section 5 — TOPICAL MODULES (Continued)

Part A — ANNUAL INCOME AND RETIREMENT ACCOUNTS (Continued)

STATEMENT D

The next few questions are about personal retirement plans.

4a. Does ... have an Individual Retirement Account — an IRA — in ...'s OWN name?
If ... is only included in ...'s (husband's/wife's) IRA accounts, mark the "No" box.

9330 1 Yes
 2 No } *SKIP to 4h*
 x1 DK }

b. Did ... make any tax-deductible contributions to IRA accounts which applied to ...'s 1990 tax return?
(Contributions which were deducted from gross income.)

9332 1 Yes
 2 No } *SKIP to 4d*
 x1 DK }

c. How much were ...'s tax-deductible contributions to IRA accounts which applied to ...'s 1990 tax return?
(Form 1040, line 24a)
(Form 1040A, line 15a)

9334 \$. 00
 x1 DK
 x2 Ref.

d. Did ... make any withdrawals from ...'s IRA accounts during 1990?
Mark "No" if funds were "rolled over" within 60 days of the withdrawal.

9336 1 Yes
 2 No } *SKIP to 4f*
 x1 DK }

e. How much did ... withdraw from IRA accounts during 1990?

9338 \$. 00
 x1 DK
 x2 Ref.

f. Including ALL IRA accounts in ...'s OWN name, how much did ...'s IRA accounts earn during 1990?

9340 \$. 00
 x1 DK
 x2 Ref.

g. What types of assets did ... have in ...'s IRA accounts during 1990?
Mark (X) all that apply.
Anything else?

9342 1 Certificates of deposit or other savings certificates
9344 2 Money Market Funds
9346 3 U.S. Government Securities
9348 4 Municipal or Corporate Bonds
9350 5 U.S. Savings Bonds
9352 6 Stocks or Mutual Fund Shares
9354 7 Other assets — *Specify*
9356 x1 DK

h. Does ... have a Keogh account in ...'s OWN name?

9358 1 Yes
 2 No } *SKIP to Check Item T11*
 x1 DK }

i. Did ... make any tax-deductible contributions to a Keogh account which applied to ...'s 1990 tax return?

9360 1 Yes
 2 No } *SKIP to 4k*
 x1 DK }

j. How much were ...'s tax-deductible contributions to Keogh accounts which applied to ...'s 1990 tax return?
(Form 1040, line 27)

9362 \$. 00
 x1 DK
 x2 Ref.

k. Did ... make any withdrawals from ...'s Keogh accounts during 1990?

9364 1 Yes
 2 No } *SKIP to 4m*
 x1 DK }

Section 5 – TOPICAL MODULES (Continued)

Part A – ANNUAL INCOME AND RETIREMENT ACCOUNTS (Continued)

4l. How much did . . . withdraw from Keogh accounts during 1990?

9368 \$. 00

x1 DK
x2 Ref.

m. Including ALL Keogh accounts in . . . 's OWN name, how much did . . . 's Keogh accounts earn during 1990?

9368 \$. 00

x1 DK
x2 Ref.

n. What types of assets did . . . have in . . . 's Keogh accounts during 1990?

Mark (X) all that apply.

Anything else?

- 9370 1 Certificates of deposit or other savings certificates
 - 9372 2 Money Market Funds
 - 9374 3 U.S. Government Securities
 - 9376 4 Municipal or Corporate Bonds
 - 9378 5 U.S. Savings Bonds
 - 9380 6 Stocks or Mutual Fund Shares
 - 9382 7 Other assets – Specify
- 9384 x1 DK

CHECK ITEM T11

Refer to cc item 42.

Are the names of any employers listed for . . . on the control card?

9385 1 Yes
2 No – SKIP to Check Item T12

4o. During 1990, did . . . participate in an employee thrift plan such as a 401k plan? Such a plan allows employees to defer part of their salary and not have to pay taxes on their deferred salary until they retire or make a withdrawal.

9386 1 Yes
2 No } SKIP to Check Item T12
x1 DK

p. How much did . . . contribute to this plan during 1990?

9388 \$. 00

x3 None
x1 DK
x2 Ref.

NOTES

Section 5 – TOPICAL MODULES (Continued)

Part B – TAXES

CHECK ITEM T12

Has tax information for . . . already been obtained in an interview for a spouse with whom . . . filed a joint return?

- 9390** 1 Yes – SKIP to Check Item T19, page 61
2 No

1 a. Did . . . file a Federal income tax return for 1990?

Mark "Yes" if . . . filed alone or jointly.

- 9392** 1 Yes
2 No – SKIP to Check Item T19, page 61

b. Do you have a copy of the tax form or a worksheet that you could refer to for the next few questions?

- 9394** 1 Yes – Allow person time to get form
2 No

2. What was . . . 's filing status on . . . 's 1990 Federal tax return? Did . . . file as –

Read categories – Mark (X) one.

- 9396** 1 A single taxpayer?
2 Married, filing a joint return?
3 Married, filing separately?
4 Unmarried head of household?
5 Qualifying widow(ler) with dependent child?
x1 DK

3 a. What were the total number of exemptions claimed on . . . 's tax return?

- 9398** Exemptions – If "01" SKIP to 4
x1 DK

CHECK ITEM T13

Refer to cc item 20.
Number of current household members.

- 9400** 1 One – SKIP to 3c
2 Two or more

3 b. Besides . . . which persons in this household did . . . claim as an exemption?

Person No.	Name
9402 <input type="text"/> <input type="text"/> <input type="text"/>	
9404 <input type="text"/> <input type="text"/> <input type="text"/>	
9406 <input type="text"/> <input type="text"/> <input type="text"/>	
9408 <input type="text"/> <input type="text"/> <input type="text"/>	
9410 <input type="text"/> <input type="text"/> <input type="text"/>	
9412 1 <input type="checkbox"/> None in household	

ASK OR VERIFY –

c. Did . . . claim exemptions for any persons who lived outside of . . . 's home for the entire year?

- 9414** 1 Yes
2 No – SKIP to 4

d. What was the relationship of this (these) person(s) to . . . ?

Record for two persons only.

FIRST DEPENDENT	SECOND DEPENDENT
9416 1 <input type="checkbox"/> Parent 2 <input type="checkbox"/> Child 3 <input type="checkbox"/> Brother/sister 4 <input type="checkbox"/> Other	9418 1 <input type="checkbox"/> Parent 2 <input type="checkbox"/> Child 3 <input type="checkbox"/> Brother/sister 4 <input type="checkbox"/> Other

4. Did . . . file form 1040, the long form or did . . . file one of the short forms, 1040A or 1040EZ?

(Form 1040 is blue)
(Form 1040A is pink)
(Form 1040EZ is green)

- 9420** 1 Form 1040
2 Form 1040A
3 Form 1040EZ } SKIP to Check Item T14
x1 DK

5. I am going to mention two forms that people are sometimes required to attach to their tax return. Please tell me if these were included with . . . 's 1990 tax return.

(1) Schedule A, Itemized Deductions

- 9422** 1 Yes
2 No
x1 DK

(2) Schedule D, Capital Gains and Losses

- 9424** 1 Yes
2 No
x1 DK

Section 5 – TOPICAL MODULES (Continued)

Part B – TAXES (Continued)

CHECK ITEM T14	Does the respondent have a copy of ...'s Federal income tax form or a worksheet to refer to?	9428	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 9a
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CHECK ITEM T15	Refer to item 4. Is "Form 1040" marked?	9430	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 8a
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CHECK ITEM T16	Is "Schedule A, Itemized Deductions" marked "Yes" in item 5(1)?	9432	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 6b
-----------------------	---	-------------	--

6a.	How much were ...'s (and ...'s husband's/wife's) itemized deductions for 1990? <i>(Schedule A, line 27)</i>	9434	\$ <input style="width:50px;" type="text"/> . <input style="width:20px;" type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. – SKIP to Check Item T17
------------	--	-------------	--

b.	On ...'s Form 1040, did ... (and ...'s husband/wife) claim –		
<i>(Ask for each credit claimed.)</i>			
(1)	A child and dependent care expense credit ... <i>(Form 1040, line 41)</i>	9446	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
		9448	\$ <input style="width:50px;" type="text"/> . <input style="width:20px;" type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
(2)	A credit for the elderly or the disabled ... <i>(Form 1040, line 42)</i>	9450	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
		9452	\$ <input style="width:50px;" type="text"/> . <input style="width:20px;" type="text"/> 00 x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.

CHECK ITEM T17	Refer to item 5(2). Is "Schedule D, Capital Gains and Losses" marked "Yes"?	9458	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No – SKIP to 8a
-----------------------	--	-------------	--

7.	How much were ...'s (and ...'s husband's/wife's) capital gains or losses from the sale or exchange of personal assets for 1990? <i>(Form 1040, line 13)</i>	9460	\$ <input style="width:50px;" type="text"/> . <input style="width:20px;" type="text"/> 00 x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. 9461 x4 <input type="checkbox"/> Lost money – Enter amount of loss in box
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<i>(SHOW FLASHCARD CC WITH APPROPRIATE TAX FORM)</i>			
8a.	This card shows the portion of the tax return that deals with adjusted gross income and with the net tax liability for the year. Adjusted gross income is total income less certain types of adjustments and exclusions. What was ...'s (and ...'s husband's/wife's) adjusted gross income in 1990? <i>(Form 1040, line 31)</i> <i>(Form 1040A, line 16)</i> <i>(Form 1040EZ, line 3)</i>	9462	\$ <input style="width:50px;" type="text"/> . <input style="width:20px;" type="text"/> 00 x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref. 9463 x4 <input type="checkbox"/> Lost money – Enter amount of loss in box

b.	Federal income tax liability is the total tax as determined by the tax table or schedule plus or minus certain adjustments. What was ...'s (and ...'s husband's/wife's) net tax liability in 1990? <i>(Form 1040, line 54)</i> <i>(Form 1040A, line 27)</i> <i>(Form 1040EZ, line 7)</i>	9464	\$ <input style="width:50px;" type="text"/> . <input style="width:20px;" type="text"/> 00 x3 <input type="checkbox"/> None x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.
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CHECK ITEM T18	Refer to item 8a. What is the amount of adjusted gross income reported?	9466	1 <input type="checkbox"/> \$20,264 or more – SKIP to Check Item T19 2 <input type="checkbox"/> Less than \$20,264
-----------------------	--	-------------	---

Section 5 – TOPICAL MODULES (Continued)

Part B – TAXES (Continued)

9a. Did . . . claim an earned income credit on . . . 's Federal income tax return?

9472 Yes
 No
 DK } *SKIP to Check Item T19*

b. What was the amount of earned income credit claimed?

*(Form 1040, line 57)
(Form 1040A, line 28c)*

9474 \$. 00
x1 DK
x2 Ref.

CHECK ITEM T19

*Refer to cc item 15.
Tenure of reference person.
Are . . . 's living quarters –*

9486 Owned or being bought?
 Rented for cash?
 Occupied without cash payment? } *SKIP to Statement E, page 62*

CHECK ITEM T20

Interview status of . . . 's spouse

9488 No spouse in household
 Interview for spouse not yet conducted
 Interview for spouse already conducted –
SKIP to Statement E, page 62

10a. Did . . . pay any property taxes on . . . 's residence(s) in 1990?

9490 Yes
 No – *SKIP to Statement E, page 62*

b. Did . . . pay these jointly with someone else living here?

9492 Yes
 No – *SKIP to 10d*

c. Who made these joint payments with . . . ?

Person No. Name
9494 _____

Person No. Name
9496 _____

d. What was the property tax bill for . . . 's residence(s) in 1990?

*Obtain estimate, if necessary.
(Schedule A, line 6)*

9498 \$. 00
x1 DK
x2 Ref.

NOTES

Section 5 – TOPICAL MODULES (Continued)

Part C – SCHOOL ENROLLMENT AND FINANCING

Statement E → The next few questions are about school enrollment and financing.

1. Was ... enrolled in school anytime during the past 12 months? (Include any regular school, such as elementary, high school, or college, or any vocational, technical or business school.)

- 9610** 1 Yes
 2 No – SKIP to Check Item C1, page 64

2. At what level or grade was ... enrolled? (If enrolled at more than one level in the past 12 months, check level in which the greatest amount of time was spent.)

- 9612** 1 Elementary grades 1–8
 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
 12 Other or DK

CHECK ITEM T21

Was ... enrolled in elementary or high school?

- 9614** 1 Yes
 2 No – SKIP to 4

3. Was ... enrolled in a public school? (Mark "Yes" if the school at which ... spent the greatest amount of time was public.)

- 9616** 1 Yes – SKIP to Check Item C1, page 64
 2 No

4. During the past 12 months –

a. What was the total cost of ...'s tuition and fees?

9618 \$. 00
 x3 None
 x1 DK

b. What was the total cost of ...'s books and supplies?

9620 \$. 00
 x3 None
 x1 DK

c. Did ... live away from home while attending school?

- 9622** 1 Yes
 2 No – SKIP to 5

d. What was the total cost for room and board while away at school?

9624 \$. 00
 x3 None
 x1 DK

NOTES

Section 5 – TOPICAL MODULES (Continued)

Part C – SCHOOL ENROLLMENT AND FINANCING (Continued)

(HAND RESPONDENT CARD DD)

5a. Please look at this card and tell me if . . . received any of these types of educational assistance during the past 12 months.

Anything else?

5b. How much did . . . receive?

9626 x3 None –
SKIP to
Check Item
C1

(1) The GI Bill?

9628 1 Received

9630 \$. 00
x1 DK

(2) Other Veterans' Educational Assistance Programs? (Include survivors and dependents, vocational rehabilitation and post-Vietnam veterans' assistance.)

9632 1 Received

9634 \$. 00
x1 DK

(3) College Work Study Program?

9636 1 Received

9638 \$. 00
x1 DK

(4) A Pell Grant?

9640 1 Received

9642 \$. 00
x1 DK

(5) A Supplemental Educational Opportunity Grant (SEOG)?

9644 1 Received

9646 \$. 00
x1 DK

(6) A National Direct Student Loan (NDSL) (or Perkins Loan)?

9648 1 Received

9650 \$. 00
x1 DK

(7) A guaranteed student loan (or Stafford Loan)?

9652 1 Received

9654 \$. 00
x1 DK

(8) A JTPA Training Program?

9656 1 Received

9658 \$. 00
x1 DK

(9) Employer assistance

9660 1 Received

9662 \$. 00
x1 DK

(10) A fellowship or scholarship?

9664 1 Received

9666 \$. 00
x1 DK

(11) A tuition reduction?

9668 1 Received

9670 \$. 00
x1 DK

(12) Anything else (other than assistance from relatives and friends)?

9672 1 Received

9674 \$. 00
x1 DK

NOTES

CALLBACK SUMMARY

CHECK ITEM C1

Are any items marked on Reminder Card for ...?

5000

- 1 Yes - Mark appropriate item(s) below, then SKIP to Check Item C2
 2 No - SKIP to Check Item C2

1. Social Security Number
(Enter in cc item 33a)

x1 DK x2 Ref. x3 None

2. Medicare claim number
(Item 23b, page 8)

5002 **5004** **5005**

3. EMPLOYER

a. Employer #1
(Item 8a, page 17)

What was the total amount of pay received before deductions on this job in ...?

5006 \$ _____ . **00** Last month x1 DK x2 Ref. x3 None
5008 \$ _____ . **00** 2 months ago x1 DK x2 Ref. x3 None
5010 \$ _____ . **00** 3 months ago x1 DK x2 Ref. x3 None
5012 \$ _____ . **00** 4 months ago x1 DK x2 Ref. x3 None

b. Employer #2
(Item 16a, page 19)

What was the total amount of pay received before deductions on this job in ...?

5014 \$ _____ . **00** Last month x1 DK x2 Ref. x3 None
5016 \$ _____ . **00** 2 months ago x1 DK x2 Ref. x3 None
5018 \$ _____ . **00** 3 months ago x1 DK x2 Ref. x3 None
5020 \$ _____ . **00** 4 months ago x1 DK x2 Ref. x3 None

4. SELF-EMPLOYMENT

a. Self-employment #1
(Item 7, page 21)

What was the total amount of income received from this business in ...?

5022 \$ _____ . **00** Last month x1 DK x2 Ref. x3 None
5024 \$ _____ . **00** 2 months ago x1 DK x2 Ref. x3 None
5026 \$ _____ . **00** 3 months ago x1 DK x2 Ref. x3 None
5028 \$ _____ . **00** 4 months ago x1 DK x2 Ref. x3 None

b. Self-employment #2
(Item 18, page 23)

What was the total amount of income received from this business in ...?

5030 \$ _____ . **00** Last month x1 DK x2 Ref. x3 None
5032 \$ _____ . **00** 2 months ago x1 DK x2 Ref. x3 None
5034 \$ _____ . **00** 3 months ago x1 DK x2 Ref. x3 None
5036 \$ _____ . **00** 4 months ago x1 DK x2 Ref. x3 None

5. What was the average amount in savings/Money market deposit accounts/CD's/Interest-earning checking accounts held jointly by husband and wife? *(Item 2c, page 48)*

Amounts for the period of - _____ through _____

5038 \$ _____ . **00** x1 DK x2 Ref.

6. What was the average amount in savings/Money market deposit accounts/CD's/Interest-earning checking accounts in own name? *(Item 3c, page 48)*

5040 \$ _____ . **00** x1 DK x2 Ref.

7. What was the average amount in Money market funds/securities/ bonds held jointly by husband and wife? *(Item 2c, page 49)*

5042 \$ _____ . **00** x1 DK x2 Ref.

8. What was the average amount in Money market funds/securities/ bonds in own name? *(Item 3c, page 49)*

5044 \$ _____ . **00** x1 DK x2 Ref.

9. What was the amount received in dividends by husband and wife jointly? *(Item 1b, page 50)*

5048 \$ _____ . **00** x1 DK x2 Ref. x3 None

10. What was the amount received in dividends in own name? *(Item 2a, page 50)*

5050 \$ _____ . **00** x1 DK x2 Ref. x3 None

CALLBACK SUMMARY

CALLBACK SUMMARY (Continued)

		Business 1		Business 2	
<input type="checkbox"/>	11a. What were the gross receipts of this (business/practice) in 1990? <i>(Item 2h, page 55)</i>	9676	\$ <input style="width:80%; border: none; border-bottom: 1px solid black;" type="text"/> . <input style="width:20%; border: none; border-bottom: 1px solid black; text-align: center;" type="text"/> 00	9682	\$ <input style="width:80%; border: none; border-bottom: 1px solid black;" type="text"/> . <input style="width:20%; border: none; border-bottom: 1px solid black; text-align: center;" type="text"/> 00
		x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.		x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.	
<input type="checkbox"/>	11b. What were the total expenses of this (business/practice) in 1990? <i>(Item 2i, page 55)</i>	9678	\$ <input style="width:80%; border: none; border-bottom: 1px solid black;" type="text"/> . <input style="width:20%; border: none; border-bottom: 1px solid black; text-align: center;" type="text"/> 00	9684	\$ <input style="width:80%; border: none; border-bottom: 1px solid black;" type="text"/> . <input style="width:20%; border: none; border-bottom: 1px solid black; text-align: center;" type="text"/> 00
		x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.		x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.	
<input type="checkbox"/>	12. What was the net income from this business/practice) in 1990? <i>(Item 2k, page 56)</i>	9680	\$ <input style="width:80%; border: none; border-bottom: 1px solid black;" type="text"/> . <input style="width:20%; border: none; border-bottom: 1px solid black; text-align: center;" type="text"/> 00	9686	\$ <input style="width:80%; border: none; border-bottom: 1px solid black;" type="text"/> . <input style="width:20%; border: none; border-bottom: 1px solid black; text-align: center;" type="text"/> 00
		x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.		x1 <input type="checkbox"/> DK x2 <input type="checkbox"/> Ref.	

CHECK ITEM C2

Has an interview been conducted for all household members 15 + ?

5052

- 1 Yes — *Enter finish time on cover page, fill cc items 36 and 39 and END INTERVIEW*
- 2 No — *Enter finish time for this household member, THEN interview next 15 + household member*

NOTES

NOTES

NOTES

INCOME SOURCE LIST

INCOME LIST

Code	Type	Code	Type
1	Social Security	28	Child support payments
2	U.S. Government Railroad Retirement pay	29	Alimony payments
3	Federal Supplemental Security Income (SSI)	30	Pension from company or union
4	State Supplemental Security Income (State administered SSI only)	31	Federal Civil Service or other Federal civilian employee pensions
5	State unemployment compensation	32	U.S. Military retirement pay
6	Supplemental Unemployment Benefits	33	National Guard or Reserve Forces retirement
7	Other unemployment compensation (Trade Adjustment Act benefits, strike pay, other)	34	State government pensions
8	Veterans' compensation or pensions	35	Local government pensions
9	Black lung payments	36	Income from paid-up life insurance policies or annuities
10	Workers' compensation	37	Estates and trusts
11	State temporary sickness or disability benefits	38	Other payments for retirement, disability or survivor
12	Employer or union temporary sickness policy	40	G.I. Bill
13	Payments from a sickness, accident or disability insurance policy purchased on your own	41	Other VA educational assistance
20	Aid to Families with Dependent Children (AFDC, ADC)	50	Income assistance from a charitable group
21	General assistance or General relief	51	Money from relatives or friends
22	Indian, Cuban, or Refugee Assistance	52	Lump sum payments
23	Foster child care payments	53	Income from roomers or boarders
24	Other welfare	54	National Guard or Reserve pay
25	WIC (Women, Infants and Children Nutrition Program)	55	Incidental or casual earnings
27	Food stamps	56	Other cash income not included elsewhere

ASSET LIST

SPECIAL INDICATORS

Code	Type	Code	Type
100	Regular/passbook savings accounts in a bank, savings and loan or credit union	170	Worked
101	Money market deposit accounts	171	Disabled
102	Certificates of Deposit or other savings certificates	172	Medicare
103	Interest-earning checking accounts (such as NOW or Super NOW accounts)	173	Medicaid
104	Money market funds	174	U.S. Savings Bonds (E, EE)
105	U.S. Government securities	175	College work study
106	Municipal or corporate bonds	176	PELL Grant
107	Other interest-earning assets	177	Supplemental Educational Opportunity Grant (SEOG)
110	Stocks or mutual fund shares	178	National Direct Student Loan (NDSL)
120	Rental property	179	Guaranteed Student Loan
130	Mortgages	180	JTPA Training
140	Royalties	181	Employer assistance
150	Other financial investments	182	Fellowship/Scholarship
		183	Other financial aid
		200	VA disability rating of 100%
		201	VA disability of less than 100%

INCOME SOURCE SUMMARY (ISS)

INSTRUCTION — Column (a) shows the income source code. In column (b), mark (X) for all sources from which income was received during the reference period. In column (c), enter the code to indicate whether the respondent used records to verify or provide amounts. Column (d) shows the type of income source. The Amounts section should be filled starting with the page number shown in column (e) for those income sources which have been marked.

ISS code (a)	Mark (X) (b)	Record use code 1 = Yes 2 = No 3 = Ref. 4 = Sp. Q. (c)	Type of income source and income source code (d)	Amounts section page number (e)
PGM 9				
1			INCOME CODES 1-7 Social Security	
2			U.S. Government Railroad Retirement pay	
3			Federal Supplemental Security Income (SSI)	
5			State Unemployment compensation	
6			Supplemental Unemployment Benefits	
8			INCOME CODES 8-13 Veterans' compensation or pensions	
20			INCOME CODES 20-29 Aid to Families with Dependent Children (AFDC, ADC)	
24			Other Welfare — Specify	
25			WIC (Women, Infants, and Children Nutrition Program)	
27			Food Stamps	(A) - 24
28			Child Support payments	28
29			Alimony payments	32
				36
				40
				44
30			INCOME CODES 30-38 Pension from company or union	
40			INCOME CODES 40-41 GI Bill education benefits	
55			INCOME CODES 50-56 Incidental or casual earnings	
100			ASSET CODES 100-150 Interest Earning Assets Regular/passbook/savings accounts in a bank, savings and loan or credit union	(B)-48
101			Money market deposit accounts	
102			Certificates of Deposit or other savings certificates	
103			Interest-earning checking accounts (such as NOW or Super NOW accounts)	
104			Money market funds	
105			U.S. Government securities	(C) - 49
106			Municipal or corporate bonds	
107			Other interest-earning assets	
110			Stocks or mutual fund shares	(D) - 50
120			Rental property	(E) - 51
130			Mortgages	
140			Royalties	(F) - 52
150			Other financial investments	
170			SPECIAL INDICATOR CODES 170-183, 200, 201 Worked	Section 2
171			Disabled	
172			Medicare	
173			Medicaid	
174			U.S. Savings Bonds	
200			VA disability rating of 100%	DO NOT FILL
201			VA disability rating of less than 100%	

PRE-INTERVIEW TRANSCRIPTION ITEMS

Fill the following items with a red pencil.

Item	Page
11a, Start time (Cover page)	1
2-4, 5b, 5c, 6	1
Check Item N1	1
Check Item R6	4
Income Roster, 11b, columns (2) and (3)	5
Check Item R7	4
Check Item R8	5
Asset Roster, 28b, columns (2) and (3)	12
Check Item R31	12
Check Item T1	54
Check Item T19	61
11a, Finish time (Cover page)	1

LABOR FORCE AND RECIPIENCY

EARNINGS AND EMPLOYMENT

AMOUNTS - PART A

AMOUNTS - PARTS B & C

AMOUNTS - PARTS D & E

PROGRAM QUESTIONS

TOPICAL MODULES

CALLBACK SUMMARY

APPENDIX C

Working Papers

This appendix provides a list of a SIPP Working Papers. Any of these papers are free of charge. See the order form on page C-12.

1995

9501 - "Adjusting For Attrition in Event History Analysis" by D.H. Hill (Survey Research Institute, University of Toledo)

1994

9401 - "A Comparison of Attrition in the Panel Study of Income Dynamics and the Survey of Income and Program Participation" by J.E. Zabel

9402 - "The Effect of Attrition on Income and Poverty Estimates From the Survey of Income and Program Participation" (SIPP)" by E. Lamas, J. Tin and J. Eargle

9403 - "An Analysis of Attrition in the PSID and SIPP With An Application to a Model of Labor Market Behavior" by J.E. Zabel

9404 - "Mover Nonresponse Adjustment Research For the Survey of Income and Program Participation" by T.M. Allen and R.J. Petroni

9405 - "Use of Administrative Data in SIPP Longitudinal Estimation" by S.M. Dorinski and H. Huang

9406 - "Longitudinal Imputation of SIPP Food Stamp Benefits" by A. Tremblay

9407 - "Testing a New Attrition Nonresponse Adjustment Method For SIPP" by R.E. Folsom and M.B. Witt

9408 - "An Experiment to Reduce Measurement Error in the SIPP: Preliminary Results" by K.H. Marquis, J.C. Moore and K. Bogen (U.S. Bureau of the Census)

9409 - "Oversampling in Panel Surveys" by R. Singh, R.J. Petroni and T.M. Allen (Census Bureau)

1993

9301 - "Multiple Program Use in a Dynamic Context: Data From the SIPP" by R. M. Blank (Northwestern University) and P. Ruggles (The Urban Institute)

9302 - "A Comparative Analysis of the Labor Force Activities of Ethnic Populations" by F.D. Wilson (University Wisconsin-Madison ASA/NSF/Census Fellow) and L.L. Wu (University of Wisconsin Madison)

9303 - "Variance Estimation by User of SIPP Micro-data Files" by R.P. Chakrabarty (Census Bureau)

9304 - "Measurements of Job Exits: What Difference Does Ambiguity Make?" by T.J. Devine (Pennsylvania State University)

9305 - "The Seasonality of Moving: An Analysis of Data From the Survey of Income and Program Participation" by D. Deare (Census Bureau)

SIPP FILES

- 9306 - "The Quality of Census Bureau Survey Data Among Respondents With High Income" by C.T. Nelson (Census Bureau)
- 9307 - "Modeling Food Stamp Participation in the Presence of Reporting Errors" by C. Bollinger and M. David (University of Wisconsin)
- 9308 - "The Seam Effect in SIPP's Labor Force Data: Did the Recession Make It Worse?" by P. Ryscavage (Census Bureau)
- 9309 - "Where's Papa? Father's Role in Child Care" by M. O'Connell (Census Bureau)
- 9310 - "Effectiveness of Oversampling Low Income Households in the Survey of Income and Program Participation" by T. Allen, R. Petroni and R. Singh
- 9311 - "Informal Mechanisms For Government Decision-Making: Case Study of a Team Approach to Redesigning the Survey of Income and Program Participation" by D.H. Weinberg (Census Bureau)
- 9312 - "The Earned Income Tax Credit: Participation Compliance, and Antipoverty Effectiveness" by J.K. Scholz (University of Wisconsin-Madison)
- 9313 - "Effects of a Cognitive Interviewing Approach on Response Quality in a Pretest for the SIPP" by K.H. Marquis, J.C. Moore and K.E. Bogen (Census Bureau)
- 9314 - "Cross-Sectional Imputation and Longitudinal Editing Procedures in the Survey of Income and Program Participation" by S.G. Pennel (The University of Michigan)
- 9315 - "Who's Wealthy? Who's Not? Stability and Change in Sociodemographic Covariate Structures of Positive, Zero, and Negative Net Worth Data in the Survey of Income and Program Participation" by K.C. Land and S.T. Russell
- 9316 - "Are College-Educated Young Persons Finding Good Jobs? A Look At Some of the Evidence" by P. Ryscavage (Census Bureau)

1992

- 9201 - "Changes in Parent-Child Coresidence in Late Life" by A. Speare, Jr. (Census Bureau/Brown University and R. Avery (Brown University))
- 9202 - "Who Helps Whom in Older Parent-Child Families" by A. Speare, Jr. (Population Studies and Training Center) R. Avery (Brown University)
- 9203 - "Testing Alternative Household Roster Questions For the Survey of Income and Program Participation" by D. Cantor and C. Edwards
- 9204 - "Pretest Results of An Alternative Measurement Design For the Survey of Income and Program Participation" by K. Bogen, J.C. Moore and K.H. Marquis (Center For Survey Methods Research and Census Bureau)
- 9205 - "Dependent and Independent Data Collection in Panel Surveys: Analysis of 1985-1986 SIPP Occupation and Industry Data" by D.H. Hill (Survey Research Institute/University of Toledo)
- 9206 - "The Survey of Income and Program Participation in the 1990's" by D.H. Weinberg and R.J. Petroni (Census Bureau)

- 9207 - "A Statistical Profile At-Risk Children in the United States" by C. Winquist Nord and A. Rhoads (Child Trends, Inc.)
- 9208 - "Social Security Earnings of Wives Relative to Their Husbands: A Cohort Analysis" by H.M. Iams (Social Security Administration)
- 9209 - "Private Health Insurance and the Utilization of Medical Care by the Elderly" by V. Wilcox-Gok and J. Rubin
- 9210 - "Analyzing Spells of Program Participation in the SIPP" by G. Kalton, D.P. Miller, and J. Lepkowski
- 9211 - "Time in Panel Effects in the SIPP" by G. Kalton, J.M. Lepkowski, S.G. Pennell, D.P. Miller and E. Luis

1991

- 9101 - "Trends in Income and Wealth of the Elderly in the 1980's" by P. Ryscavage (Census Bureau)
- 9102 - "The Impact of Survey and Questionnaire Design on Longitudinal Labor Force Measures" by A. Martini (Mathematica Policy Research) and P. Ryscavage (Census Bureau)
- 9103 - "Using SIPP to Analyze Black-White Differences in Youth Employment" by G.C. Gain and P.M. Gleason (University of Wisconsin)
- 9104 - "A Random-Effects Approach to Attrition Bias in the SIPP Health Insurance Data" by J.A. Klerman (The Rand Corporation)
- 9105 - "Alternative Samples For Welfare Duration in SIPP: Does Attrition Matter?" by J. Fitzgerald (Census Bureau/Bowdoin College) and X Zuo (Census Bureau/Shanghai Academy of Social Science)
- 9106 - "Job-Exits and Job-to-Job Transitions in the United States: An Empirical Analysis Using SIPP" by T.J. Devine (Pennsylvania State University)
- 9107 - "The Flow of Household Income in the 1984 Survey of Income and Program Participation" by H.W. Watts (Census Bureau/Columbia University), D.B. McMillen (Census Bureau) and L. Moeller (Census Bureau/Columbia University)
- 9108 - "The Survey of Income and Program Participation as a Source of Data on Children and Families: A Comparison of Estimates Derived From SIPP With Estimates From Other Sources" by C. Winquist Nord and A. Rhoads (Child Trends, Inc.)
- 9109 - "Health Insurance Coverage Among the Elderly" by V. Wilcox-Gok (Department of Economics and Institute For Health) and J. Rubin (Health Care Policy, and Aging Research)
- 9110 - "A Cognitive Approach to Redesigning Measurement in the Survey of Income and Program Participation" by K.H. Marquis, J.C. Moore and K.E. Bogen (Census Bureau)
- 9111 - "Effects of Measurement Error on Occupational Event History Analysis" by D.H. Hill (University of Toledo)
- 9112 - "Record Use by Respondents" by R. Kominski (Census Bureau)
- 9113 - "Reciprocity History and Left-Censored Spells of Program Participation in the SIPP" by K. Short and J. Eargle (Census Bureau)
- 9114 - "Receipt of Food Stamps by Longitudinal" by N.R. Burstein (Abt Associates, Inc.)

SIPP FILES

- 9115 - "Within PSU Sort and Stratification Research to Improve Survey Efficiency" by M. Gorsak, K. Mansur, D. Fenstermaker and R. Petroni (Census Bureau)
- 9116 - "Marital Separation and the Economic Well-Being of Children and Their Absent Fathers" by S.M. Bianchi (Census Bureau)
- 9117 - "Rationale For a SIPP-Based Microsimulation Model of SSI and OASDI" by B. Wixon and D.R. Vaughan (Social Security Administration)
- 9118 - "Implementing An SSI Model Using the Survey of Income and Program Participation" by B. Wixon and D.R. Vaughan (Social Security Administration)
- 9119 - "Local Labor and Local Effects on Welfare Duration: Evidence From SIPP" by J. Fitzgerald (Census Bureau) and X. Zuo (Bowdoin College and Shanghai Academy of Social Science)
- 9120 - "Oversampling the Low-Income Population in the Survey of Income and Program Participation" by G.D. Weller, V.J. Huggins and R.P. Singh (Census Bureau)
- 9121 - "Estimates of the Uninsured Population From the Survey of Income and Program Participation: Size Characteristics, and the Possibility of Attrition Bias" by K. Swartz (The Urban Institute)
- 1990
- 9001 - "Recent Developments in the Survey of Income and Program Participation" Census Bureau
- 9002 - "An Analysis of Leaving Home Using Data From the 1984 Panel of the SIPP" by Alden Speare, Roger Avery and Frances Goldscheider (Brown University)
- 9003 - "The Effect of the Marriage Market on First Marriages: Evidence From SIPP" by John Fitzgerald (Bowdoin College)
- 9004 - "Counting Spells of Unemployment" by Paul Ryscavage and Kathleen Short (Census Bureau)
- 9005 - "The Elderly and Their Sources of Income: Implications for Rural Development" by Robert Hoppe, (Economic Research Service, U.S. Department of Agriculture)
- 9006 - "Alternative Estimates of Economic Well-Being by Age Using Data on Wealth and Income, Daniel Radner (Social Security Administration)
- 9007 - "Longitudinal Analysis of Federal Survey Data" by Patricia Ruggles (Joint Economic Committee)
- 9008 - "Measurement Errors in SIPP Program Reports" by Kent H. Marquis and Jeffrey C. Moore (Census Bureau)
- 9009 - "Handling Single Wave Nonresponse in Panel Survey" by R. Singh, V. Huggins, and D. Kasprzyk (Census Bureau)
- 9010 - "Nonresponse Research for SIPP" by R. Petroni (Census Bureau)
- 9011 - "The Seam Effect in Panel Surveys" by G. Kalton, D. Hill, and M. Miller (University of Michigan)
- 9012 - "The Effects of Being Uninsured on Health Care Service Use: Estimates from the SIPP" by S. Long and J. Rodgers (Congressional Budget Office)
- 9013 - "Wage Differential and Job Changes" by S. Seninger and D. Greenberg (University of Maryland)

- 9014 - "Wages and Employment Among the Working Poor: New Evidence From SIPP" by S. Long and A. Martini (The Urban Institute and Mathematica Policy Research)
- 9015 - "Pension Portability & Labor Mobility: Evidence from SIPP" by A. Gustman and T. Steinmeier (Dartmouth College and Texas Tech University)
- 9016 - "Response & Procedural Error Variance in Surveys: An Application of Poisson and Newman Type A Regression" by D. Hill (University of Toledo)
- 9017 - "Aging and the Income Value of Housing Wealth" by S.F. Venti and D.A. Wise (Dartmouth College and Harvard University)
- 9018 - "Welfare Participation and Welfare Recidivism: The Role of Family Events" by S.K. Long (The Urban Institute)
- 9019 - "Racial Differences in Health and Health Care Service Utilization: The Effect of Socioeconomic Status" by J.E. Mutchler and J.A. Burr (State University of New York at Buffalo)
- 9020 - "Living Benefits: Closing the Gap for LTC Financing" by D.G. Shea, (Pennsylvania State University)
- 9021 - "SIPP Record Check Results: Implications for Measurement Principles and Practice" by K.H. Marquis and J.C. Moore (Census Bureau)
- 9022 - "Workers with Disabilities in Large and Small Firms: Profiles from the SIPP" by D. Drury (Berkeley Planning Associates)
- 9023 - "Entry into Marriage and the Transition to Adulthood Among Recent Firth Cohorts of Young Adults in the United States and the Federal Republic of Germany" by J. Witte (Harvard University)
- 9024 - "The Saving Effect of Tax-Deferred Retirement Accounts: Evidence from the SIPP" by S. Venti and D.A. Wise, (Dartmouth College and Harvard University)
- 9025 - "Children and Welfare: Patterns of Multiple Program Participations" by S.K. Long (The Urban Institute)
- 9026 - "Household and Nonhousehold Living Arrangements in Later Life: A Longitudinal Analysis of A Social Process" by J.E. Mutchler and J.A. Burr (University of Buffalo)
- 9027 - "The SIPP Event History Calendar: Aiding Respondents in the Dating of Longitudinal Process" by R. Kominski (Census Bureau)
- 9028 - "Estimates of Employer Contributions for Health Insurance by Worker Characteristics" by S. Haber (George Washington University)
- 9029 - "Two Notes on Relating the Risk of Disclosure for Microdata and Geographic Area Size" by B. Greenberg and L. Voshell (Census Bureau)
- 9030 - "Childcare Effects on Social Security Benefits (91 ARC)" by H.M. Iams (Social Security Administration)
- 9031 - "The Effect of the Medicaid Program on Welfare Participation & Labor Supply" by R. Moffit and B. Wolfe (Brown University and University of Wisconsin)
- 9032 - "Proxy Reports: Results from a Record Check Study" by J.C. Moore (Census Bureau)
- 9033 - "Spells Without Health Insurance: What Affects Spell Durations and Who are the Chronically Uninsured?" by T. McBride and K. Swartz (The Urban Institute)

SIPP FILES

- 9034 - "Spells Without Health Insurance: Distributions of Durations and their Link to Point-in-Time Estimates of the Uninsured" by K. Swartz and T. McBride (The Urban Institute)
- 9035 - "Discrete Time Models of Entry into Marriage Based on Retrospective Marital Histories of Young Adults in the U.S. and the Federal Republic of Germany" by J. Witte (Harvard University)

1989

- 8901 - "Quality of SIPP Estimates" by R. P. Singh, L. Weidman, and G. Shapiro (Census Bureau)
- 8902 - "Two Notes on Sampling Variance Estimates from the 1984 SIPP Public-Use Files" by B. Bye and S. J. Gallicchio (Social Security Administration)
- 8903 - "Longitudinal vs. Retrospective Measures of Work Experience" by P. Ryscavage and J. Coder (Census Bureau)
- 8904 - "Analyzing the Characteristics of Blacks: A Comparison of Data from SIPP and CPS" by R. Farley and L. J. Neidert (University of Michigan)
- 8905 - "Enhanced Demographic-Economic Data Sets" by R. Herriot, C. Bowie, D. Kasprzyk, and S. Haber (Census Bureau)
- 8906 - "Reflections on the Income Estimates from the Initial Panel of The Survey of Income and Program Participation (SIPP)" by D. Vaughan (Social Security Administration)
- 8907 - "Measuring Spells of Unemployment and Their Outcomes" by P. Ryscavage (Census Bureau)
- 8908 - "Welfare Dependency and its Causes: Determinants of the Duration of Welfare Spells" by P. Ruggles (The Urban Institute)
- 8909 - "Measuring the Duration of Poverty Spells" by P. Ruggles, The Urban Institute and R. Williams (Congressional Budget Office)
- 8910 - "Methods of Processing Unit Data Longitudinally on the SIPP" by K. Smith (Congressional Budget Office)
- 8911 - "Composite Estimation for SIPP Annual Estimates" by R. P. Chakrabarty (Census Bureau)
- 8912 - "Research and Evaluation Conducted on the Survey of Income and Program Participation" by R. Petroni, T. Carmody, and V. Huggins (Census Bureau)
- 8913 - "A Poisson Model of Response and Procedural Error Analysis of SIPP Reinterview Data" by D. Hill (University of Michigan)
- 8914 - "The Economic Resources of the Edlerly" by S. Crystal and D. Shea (Rutgers University)
- 8915 - "Multivariate Analysis by Users of SIPP Micro-Data Files" by R. P. Chakrabarty (Census Bureau)
- 8916 - "A Resource-Based Model of Living Arrangements Among the Unmarried Elderly" by J. E. Mutchler and J. A. Burr (University of Buffalo)
- 8917 - "Measuring Household Change at The individual Level Using Data From SIPP" by A. Speare, Jr. and R. Avery (Brown University)
- 8918 - "The Effect of Child Care Costs on Married Women's Labor Force participation" by R. Connelly (Bowdoin College)

- 8919 - "Income and Assets of Social Security Beneficiaries by Type of Benefit" by S. Grad (Social Security Administration)
- 8920 - "Development and Evaluation of a Survey-Based Type of Benefit Classification for the Social Security Program" by D. Vaughan (Social Security Administration)
- 8921 - "Wave Seam Effects in the SIPP" by N. Young (The Urban Institute)
- 8922 - "Components of Longitudinal Household Change for 1984-1985: An Evaluation of National Estimates from the SIPP" by Donald J. Hernandez (Census Bureau)
- 8923 - "Database Design for Large-Scale Complex Data" by Martin H. David and Alice Robbin (University of Wisconsin-Madison)
- 8924 - "Measuring the Frequency and Consequences of Job Separations: Data from the Survey of Income and Program Participation" by John M. McNeil and Enrique J. Lamas (Census Bureau)
- 8925 - "The Regular Receipt of Child Support: A Multi-step Process" by James L. Peterson and Christine Winquist Nord (Child Trends, Inc.)

1988

- 8801 - "The Impact of the Unit of Analysis on Measures of Serial Multiple Program Participation" by P. Doyle and S. E. Long (Mathematica Policy Research, Inc.)
- 8802 - "Short-Term Fluctuations in Income and Their Impacts on the Characteristics of the Low-Income Population: New Data From the Survey of Income and Program Participation" by P. Ruggles (Urban Institute)
- 8803 - "Residential Mobility of One-Person Households" by J. Witte and H. Lahmann (German Institute for Economic Research)
- 8804 - "Year-Apart Estimates of Household Net Worth From the Survey of Income and Program Participation" by John M. McNeil and Enrique J. Lamas (Census Bureau)
- 8805 - "Measuring Poverty and Crises: A Comparison of Annual and Subannual Accounting Program Participation" by Martin David and John Fitzgerald (Institute for Research on Poverty)
- 8806 - "Using Administrative Record Data to Evaluate the Quality of Survey Estimates" by Jeffrey C. Moore and Kent H. Marquis (Census Bureau)
- 8807 - "The Wealth of the Aged and Nonaged, 1984" by Daniel B. Radner (HHS)
- 8808 - "Examining the Dynamics of Health Insurance Loss: A Tale of Two Cohorts" by Alan C. Monheit and Claudia L. Schur (NCHSR)
- 8809 - "The Dynamics of Medicaid Enrollment" by Pam Farley Short, Joel C. Cantor, and Alan C. Monheit (NCHSR)
- 8810 - "The Discouraged Worker Effect: A Reappraisal Using Spell Duration Data" by Alberto Martini (University of Wisconsin-Madison)
- 8811 - "Income as a Proxy for the Economic Status of the Elderly" by Deborah J. Chollet and Robert B. Friedland (Employee Benefit Research Institute)
- 8812 - "The SIPP: Data from the Social Security Administration's 1987 Annual Statistical Supplement"

SIPP FILES

- 8813 - "Participation in Industrial Training Programs" by Sheldon Haber (George Washington University)
- 8814 - "A Methodological Study Using Administrative Records: The Special Frames Study of the Income Survey Development Program" by W. J. Logan, Social Security Administration, D. Kasprzyk and R. Cavanaugh (Census Bureau)
- 8815 - "The Effect of Income Taxation on Labor Supply When Deductions are Endogenous" by R. K. Thriest (Johns Hopkins University)
- 8816 - "A Comparison of Gross Change in Labor Force Status From SIPP and CPS" by P. Ryscavage and A. Feldman-Harkins (Census Bureau)
- 8817 - "How are the Elderly Housed? New Data from the 1984 Survey of Income and Program Participation" by A. Goldstein (Census Bureau)
- 8818 - "Welfare Reciprocity as Observed in the SIPP" by J. Coder, Census Bureau and P. Ruggles (The Urban Institute)
- 8819 - "Reservation Wages and Subsequent Acceptance Wages of Unemployed Persons" by P. Ryscavage (Census Bureau)
- 8820 - "Selected References From the Income Survey Development Program (ISDP) and Survey of Income and Program Participation (SIPP)"
- 8821 - "Training, Wage Growth, Firm Size" by S. Haber, The George Washington University and E. Lamas (Census Bureau)
- 8822 - "Defining and Measuring Normetro Poverty: Results From The Survey of Income and Program Participation" by R. Hoppe (USDA-ERS-ARED)
- 8823 - "Nonresponse Adjustment Methods For Demographic Surveys at the U.S. Bureau of the Census" by R. Singh and R. Petroni (Census Bureau)
- 8824 - "Testing Telephone Interviewing in the Survey of Income and Program Participation and Some Early Results" by S. Durant and P. Gbur (Census Bureau)
- 8825 - "Excluding Sample That Misses Some Interviews From SIPP Longitudinal Estimates" by L. Ernst and D. Gillman (Census Bureau)
- 8826 - "The Employment of Mothers and the Prevention of Poverty" by M. Hill, University of Michigan and H. Hartmann (Rutgers University)
- 8827 - "Using Administrative Record Data To Describe SIPP Response Errors" by J. Moore and K. Marquis (Census Bureau)
- 8828 - "A Look at Welfare Dependency Using The 1984 SIPP Panel File" by J. Coder, D. Burkhead, and A. Feldman-Harkins (Census Bureau)
- 8829 - "Census Bureau Microdata: Providing Useful Research Data While Protecting The Anonymity of Respondents" by G. Gates (Census Bureau)
- 8830 - "The Survey of Income and Program Participation: An Overview and Discussion of Research Issues" by D. Kasprzyk (Census Bureau)

1987

- 8701 - "Tracking Persons Over Time" by A. C. Jean and E. K. McArthur (Census Bureau)
- 8702 - "Preliminary Data From the SIPP 1983-84 Longitudinal Research File" by J. F. Coder, D. Burkhead, A. Feldman-Harkins, and J. McNeil (Census Bureau)
- 8703 - "Work Experience Data From SIPP" by P. Ryscavage and A. Feldman-Harkins (Census Bureau)
- 8704 - "The Treatment of Person -Wave Nonresponse in Longitudinal Surveys" by G. Kalton, J. Lepkowski, S. Heeringa, Ting-Kwong Lin, and M. E. Miller, Survey Research Center (University of Michigan)
- 8705 - "SIPP: Filling Data Gaps on the Poverty and Social Welfare Fronts" by P. Ryscavage (Census Bureau)
- 8706 - "Response Errors in Labor Surveys: Comparisons Self and Proxy" by D. Hill (University of Michigan)
- 8707 - "Differences Between SIPP and Food and Nutrition Service Program Data on Child Nutrition and WIC Program Participation, by L. Ku and R. Dalrymple (Food and Nutrition Service (U.S. Department of Agriculture)
- 8708 - "Quality Profile for the Survey of Income and Program Participation" by K. King, R. Petroni, and R. Singh (Census Bureau)
- 8709 - "Survey of Income and Program Participation SIPP Sample Loss and the Efforts to Reduce It" by D. Nelson, C. Bowie, and A. Walker (Census Bureau)
- 8710 - "The Impact of Imputation Procedures on Distributional Characteristics of the Low Income Population" by P. Doyle, Mathematica Policy Research, Inc., and R. Dalrymple, Food and Nutrition Service (U. S. Department of Agriculture)
- 8711 - "Job Tenure, Lifetime Work Interruptions and Wage Differentials" by J. McNeil, E. Lamas (Census Bureau, and S. Haber (George Washington University)
- 8712 - "Measuring the Bias in Gross Flows in the Presence of Auto-Correlated Response Errors" by D. Hubble (Census Bureau), and D. Judkins (Westat, Inc.)
- 8713 - "Investigation of Possible Causes of Transition Patterns from SIPP" by L. Weidman (Census Bureau)
- 8714 - "Households and Income Sources: Monthly Averages for 1984" by J. Moorman (Census Bureau)
- 8715 - "Creating SIPP Longitudinal Files Using OSIRIS IV" by M. Servais (University of Michigan)
- 8716 - "Transition In and Out of Poverty: New Data From the Survey of Income and Program Participation" by P. Ruggles, Urban Institute and R. Williams (Congressional Budget Office)
- 8717 - "On their own: The Self-employed and Others in Private Business" by S. Haber, George Washington University, E. Lamas Bureau of the Census, and J. Lichtenstein (U.S. Small Business Administration)
- 8718 - "Factors Associated With Household Net Worth" by E. Lamas and J. McNeil, Bureau of the Census
- 8719 - "Exploring Changes In Health Care Coverage Using the SIPP Longitudinal Research File" by D. Burkhead and A. Feldman (Census Bureau)
- 8720 - "The Analysis of Geographical Mobility and Life Events with the SIPP" by D. Dahmann and E. McArthur, (Census Bureau)

SIPP FILES

- 8721 - "A Review of the Use of Administrative Records in the Survey of Income and Program Participation, by C. Bowie and D. Kasprzyk (Census Bureau)
- 8722 - "Survey of Income and Program Participation Update" by D. Kasprzyk (Census Bureau)
- 8723 - "Measuring Poverty with the SIPP and the CPS" by R. Williams (Congressional Budget Office)
- 8724 - "The Statistical Invisible Minority Aged" by C. Taeuber, Bureau of the Census, and E. Attah (Atlanta University)
- 8725 - "An Analysis of the SIPP Asset and Liability Feedback Experiment" by E. Lamas and J. McNeil, (Census Bureau)

1986

- 8601 - "Some Aspects of SIPP" by compiled and edited by R. A. Herriot and D. Kasprzyk (Census Bureau)
- 8602 - "Nonsampling Error Issues in the SIPP" by G. Kalton, University of Michigan, and D. B. McMillen and D. Kasprzyk (Census Bureau)
- 8603 - "An Investigation of Model-Based Imputation Procedures Using Data From the Income Survey Development Program" by V. J. Huggins and L. Weidman (Census Bureau)
- 8604 - "Food Stamp Participation: A Comparison of SIPP With Administrative Records" by S. Carlson and R. Dalrymple (Food and Nutrition Service)
- 8605 - "SIPP Longitudinal Household Estimation for the Proposed Longitudinal Definition" by L. R. Ernst (Census Bureau)
- 8606 - "A Comparison of Seven Imputation Procedures for the 1979 Panel of the Income Survey Development Program" by V. J. Huggins (Census Bureau)
- 8607 - "An Investigation of the Imputation of Monthly Earnings for the Survey of Income and Program Participation Using Regression Models" by V. J. Huggins and L. Weidman (Census Bureau)
- 8608 - "Evaluation of Training Materials and Methods for the Survey of Income and Program Participation" by M. Holt (Survey Research Consultant)
- 8609 - "Patterns of Household Composition and Family Status change" by C. F. Citro (ASA/Census Research Fellow) , and H. W. Watts (Department of Economics (Columbia University))
- 8610 - "Composite Estimation for SIPP: A Preliminary Report" by R. P. Chakrabarty (Census Bureau)
- 8611 - "Longitudinal Household Concepts in SIPP: Preliminary Results" by C. F. Citro, ASA/Census Research Fellow, D. J. Hernandez, and R. A. Herriot (Census Bureau)
- 8612 - "Following Children in the Survey of Income and Program Participation" by E. K. McArthur, K. S. Short, and S. Bianchi (Census Bureau)
- 8613 - "SIPP Labor Transitions: Problems and Promises" by P. Ryscavage and K. S. Short (Census Bureau)
- 8614 - "Augmenting Data Reported in the Survey of Income and Program Participation With Administrative Record Data - A Brief Discussion" by D.K. Sater (Census Bureau)

1985

- 8501 - "The Survey of Income and Program Participation: Uses and Application" by K.S. Short (Census Bureau)
- 8502 - "Application of a Matched File Linking the Bureau of the Census Survey of Income and Program and Participation and Economic Data" by S. Haber (George Washington University)
- 8503 - "Using the Survey of Income and Program Participation for Research on the Older Population" by D. B. McMillen, C. M. Taeuber, and J. Marks (Census Bureau)
- 8504 - "Summary of the Content of the 1984 Panel of the Survey of Income and Program Participation" by D. T. Frankel (Census Bureau)
- 8505 - "Enhancing Data From the Survey of Income and Program Participation With Data From Economic Censuses and Surveys" by D. K. Sater (Census Bureau)
- 8506 - "Methodologies for Imputing Longitudinal Survey Items" by V. J. Huggins, L. Weidman, and M. E. Samuhel (Census Bureau)
- 8507 - "New Household Survey and the CPS: A Look at Labor Force Differences" by P. M. Ryscavage (Census Bureau, and J. E. Bregger (Bureau of Labor Statistics)

1984

- 8401 - (Update No. 1, Revised 12/85) "An Overview of the Survey of Income and Program Participation" by D. Nelson, D.B. McMillen, and D. Kasprzyk (Census Bureau)

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APPENDIX D

Machine-Readable Data Dictionary Layout

Data dictionary lines are 46 characters. The character on the first position determines the type of lines. Each variable may have the following lines:

1. COMMENTS (" * ") lines
2. DATA DICTIONARY (" D ") ; line and DATA DESCRIPTION
3. UNIVERSE (" U ") lines
4. VALUE DESCRIPTION lines
5. One blank line at the end

FORMAT

"*" LINE COMMENTS

- a. " * " in the first position indicates that this is a comment line. This line can appear any place in the dictionary. It will be used for short comments or to nullify any value codes.
- b. " ** " in the first two positions is also comments but it has additional meaning. It indicates this is a block of comments which will be applied to several variables. The first line of this block will have the COMMENT NO. so that subsequent variable can refer back to this comment block.

"D" LINE DATA DICTIONARY

This line contains the following information:

ID	"D"	COL	1-1
NAME	Variable name	COL	3-10
SIZE	Size of data field	COL	14-15
BEGIN	Begin position of data field	COL	19-22
TYPE	Character variable indicator "CHAR" or blanks if numeric variable	COL	26-29
DEC	Implied decimal places	COL	33-34
IND	TABLE variable indicator "TABLE" with "(aa)" for its dimension; otherwise blanks	COL	38-46

Text describing the variable will follow this "D" line. Use COL. 6-46 and repeat as many lines as necessary.

"U" LINE UNIVERSE DEFINITION

This line contains the universe definition. Use COL. 3-46 and repeat as many lines as necessary.

ID	" U "	COL	1-1
DESCRIPTION	Universe description	COL	3-46

(For continuation use COL. 3-46 and repeat as many lines as necessary.)

"V" LINE VALUE DEFINITION

ID	" V "	COL	1-1
VALUE	Value code-right justified	COL	3-12
	" "	COL	14
DESCRIPTION	Value description	COL	15-46

(Repeat COL. 14-46 format for continued value description.)

APPENDIX E

User Notes

This section is reserved for any information relevant to the SIPP 1990 Panel, Wave 5 Educational Financing/Enrollment Topical Module Microdata File (Release) and Wave 5 Topical Module Research File (Rerelease) that indicates specific problems with the data, or that becomes available after the file is released. Any such information should be filed behind this page.

User Notes will be sent to all users who (1) purchased their file (or technical documentation) from the Census Bureau and (2) returned the coupon following the title page.

