2016 Content Test Question Wording

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Note that there are multiple versions for CATI/CAPI wording in Round 1. The version that best resembles Round 2 wording appears in the tables below.

^{*}The Retirement income topics is the only topic that includes a different series of questions for the Content Follow-up (CFU) than what is asked in the Content Test Interview. These questions are included in a separate table.

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TELEPHONE SERVICE

2014 CURRENT WORDII	NG	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
B Does this house, apartment, o home have – a. hot and cold running water? b. a flush toilet? c. a bathtub or shower? d. a sink with a faucet? e. a stove or range? f. a refrigerator? g. telephone service from which you can both make and receive calls? Include cell phones.	r mobile Yes No	Version 1 At this house, apartment, or mobile home – do you or any member of this household have telephone service from which you can both make and receive calls? Include service for regular telephones (land lines), cell phones, and other methods of communication such as voice over Internet. Yes No Version 2 At this house, apartment, or mobile home – do you or any member of this household have telephone service from which you can both make and receive calls? Include voice service from the telephone company, cell phone provider, cable company or any other voice provider. Yes No	At this house, apartment, or mobile home – do you or any member of this household have telephone service from which you can both make and receive calls? Include voice service from a telephone company, cell or mobile phone provider, cable company, or any other voice provider. Yes No	Version 1 Can you or any member of this household both make and receive phone calls when at this house, apartment or mobile home? Yes No Version 2 Can you or any member of this household both make and receive phone calls when at this house, apartment or mobile home? Include calls using cell phones, land lines, or other phone devices. Yes No

CAPI VERSION

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
2014 CURRENT WORDING <fill 1:="" [house="" and="" apartment="" at="" available="" both="" calls.="" calls?="" can="" cell="" correct?<="" does="" from="" have="" home="" i="" including="" is="" make="" mobile="" or="" p="" phone="" phones,="" receive="" recorded="" service,="" telephone="" that="" there="" this="" unit]="" which="" you=""> Yes No</fill>	At this [house/apartment/mobile home/unit] – do you or any member of this household have telephone service from which you can both make and receive calls? Include voice service from the telephone company, cell phone provider, cable company or any other voice provider. Yes No	At this [house/apartment/mobile home/unit] – do you or any member of this household have telephone service from which you can both make and receive calls? Include voice service from a telephone company, cell or mobile phone provider, cable company, or any other voice provider. Yes No	Version 1 Can you or any member of this household both make and receive phone calls when at this [house/apartment/mobile home/unit]? Yes No Version 2 Can you or any member of this household both make and receive phone calls when at this [house/apartment/mobile home/unit]? Include calls using cell phones, land lines, or other phone devices.
			Yes No

INTERNET VERSION

2014 CURRENT WORDING	FINAL WORDING
Does this (house/apartment/mobile home/unit) have	Version 1 Can you or any member of this household both make and receive phone calls when at this house, apartment
a. hot and cold running water?b. a flush toilet?	or mobile home?
c. a bathtub or shower?	Version 2
d. a sink with a faucet?e. a stove or range?f. a refrigerator?	Can you or any member of this household both make and receive phone calls when at this house, apartment or mobile home?
g. telephone service from which you can both make and receive calls? Include cell phones.	Include calls using cell phones, land lines, or other phone devices.

TELEPHONE SERVICE

COMPUTER AND INTERNET

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
At this house, apartment, or mobile home – do you or any member of this household own or use any of the following computers? • EXCLUDE GPS devices, digital music players, and devices with only limited computing capabilities, for example: household appliances. Yes No a. Desktop, laptop, netbook, or notebook computer b. Handheld computer, smart mobile phone, or other handheld wireless computer c. Some other type of computer Specify	Version 1 At this house, apartment, or mobile home — do you or any member of this household own or use any of the following computing devices? Desktop, laptop, or tablet (Yes/No) Smartphone or other portable wireless computer (Yes/No) Some other type of computer (Yes/No) Specify Version 2 At this house, apartment, or mobile home — do you or any member of this household own or use any of the following computing devices? Desktop, laptop, or notebook computer (Yes/No) Smartphone (Yes/No) Tablet or other portable wireless computer that is carried or worn (Yes/No) Some other type of computer (Yes/No) Specify	At this house, apartment, or mobile home – do you or any member of this household own or use any of the following types of computers? Desktop or laptop (Yes/No) Smartphone (Yes/No) Tablet or other portable wireless computer (Yes/No) Some other type of computer (Yes/No) Specify	At this house, apartment, or mobile home – do you or any member of this household own or use any of the following types of computers? Desktop or laptop (Yes/No) Smartphone (Yes/No) Tablet or other portable wireless computer (Yes/No) Some other type of computer (Yes/No) Specify

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
At this house, apartment, or mobile home – do you or any member of this household access the Internet? Yes, with a subscription to an Internet service Yes, without a subscription to an Internet service → SKIP to question 12 No Internet access at this house, apartment, or mobile home → SKIP to question 12	Version 1 At this house, apartment, or mobile home — do you or any member of this household access the Internet? Yes, with a paid subscription to an Internet service Yes, without a paid subscription to an Internet service No Internet access at this house, apartment, or mobile home Version 2 At this house, apartment, or mobile home — do you or any member of this household connect to the internet? Yes, with a plan purchased from an Internet service provider Yes, without a plan purchased from an Internet service provider No Internet access at this house, apartment, or mobile home	At this house, apartment, or mobile home – do you or any member of this household access the Internet? Yes, by paying a cell phone company or Internet service provider Yes, without paying a cell phone company or Internet service provider No Internet access at this house, apartment, or mobile home	At this house, apartment, or mobile home – do you or any member of this household have access to the Internet? Yes, by paying a cell phone company or Internet service provider Yes, without paying a cell phone company or Internet service provider (SKIP next question) No access to the Internet at this house, apartment, or mobile home (SKIP next question)
At this house, apartment, or mobile home – do you or any member of this household subscribe to the Internet using – Yes No	Version 1 At this house, apartment, or mobile home – do you or any member of this household	At this house, apartment, or mobile home – do you or any member of this household access the Internet using –	Do you or any member of this household have access to the Internet using a –
a. Dial-up service?	connect to the Internet using – Mobile broadband plan for a smartphone,	Mobile broadband Internet service for a smartphone or other mobile device?	Cellular data plan for a smartphone or other mobile device? (Yes/No)
b. DSL service?	computer or other device? (Yes/No)	(Yes/No)	Broadband (high speed) Internet
c. Cable modem service?	Dial-up Service? (Yes/No)	Broadband (high speed) Internet service	service such as cable, fiber optic, or
d. Fiber-optic service?	Satellite Internet service? (Yes/No) Broadband (high speed) installed in the	installed in this house, apartment, or mobile home, such as cable, fiber optic,	DSL service installed in this household? (Yes/No)
e. Mobile broadband plan for a computer or a cell phone?	house, apartment, or mobile home?	or DSL service? (Yes/No)	Satellite Internet service installed in
f. Satellite Internet service?	(Yes/No) Some other service? (Yes/No)	Satellite Internet service? (Yes/No) Dial-up Internet service? (Yes/No)	this household? (Yes/No) Dial-up Internet service installed in this
g. Some other service?	Specify service	Some other service? (Yes/No) Specify service	household? (Yes/No) Some other service? (Yes/No) Specify service

COMPUTER AND INTERNET

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
	Version 2 At this house, apartment, or mobile home – do you or any member of this household access the Internet using — Mobile broadband or data plan for a computer, a smartphone or other device? (Yes/No) Broadband (high speed) installed in the house, apartment, or mobile home? (Yes/No) Satellite Internet service? (Yes/No) Dial-up Service? (Yes/No) Some other service? (Yes/No) Specify service		

CATI/CAPI VERSION

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
For the next few questions about computers, EXCLUDE GPS devices, digital music players, and devices with only limited computing capabilities, for example: household appliances.	At this <house apartment="" mobile<br="">home/unit>, do you or any member of this household own or use a desktop, laptop, or notebook computer? Yes No</house>	At this <house apartment="" home="" mobile="" unit="">, do you or any member of this household own or use a desktop or laptop computer? Yes No</house>	At this <house apartment="" home="" mobile="" unit="">, do you or any member of this household own or use a desktop or laptop computer? Yes No</house>
At this <house apartment="" home="" mobile="" unit="">, do you or any member of this household own or use a desktop, laptop, netbook, or notebook computer? Yes No</house>	At this <house apartment="" home="" mobile="" unit="">, Do you or any member of this household own or use a smartphone? Yes No</house>	At this <house apartment="" home="" mobile="" unit="">, Do you or any member of this household own or use a tablet or other portable wireless computer? Yes No</house>	At this <house apartment="" home="" mobile="" unit="">, Do you or any member of this household own or use a smartphone? Yes No</house>
At this <house apartment="" home="" mobile="" unit="">, Do you or any member of this household own or use a handheld computer, smart mobile phone, or other handheld wireless computer?</house>	At this <house apartment="" home="" mobile="" unit="">, Do you or any member of this household own or use a tablet or other portable wireless computer that is carried or worn?</house>	At this <house apartment="" home="" mobile="" unit="">, Do you or any member of this household own or use some other type of computer? Yes</house>	At this <house apartment="" home="" mobile="" unit="">, Do you or any member of this household own or use a tablet or other portable wireless computer? Yes</house>
Yes No	Yes No	No What is this other type of computer?	No At this <house apartment="" mobile<="" td=""></house>
At this <house apartment="" home="" mobile="" unit="">, Do you or any member of this household own or use some other type of computer? Yes No</house>	At this <house apartment="" home="" mobile="" unit="">, Do you or any member of this household own or use some other type of computer? Yes No</house>		home/unit>, Do you or any member of this household own or use some other type of computer? Yes No
What is this other type of computer?	What is this other type of computer?		What is this other type of computer? ————

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
At this <house apartment="" home="" mobile="" unit="">,</house>	At this <house apartment="" mobile<="" td=""><td>At this <house apartment="" mobile<="" td=""><td>At this <house apartment="" mobile<="" td=""></house></td></house></td></house>	At this <house apartment="" mobile<="" td=""><td>At this <house apartment="" mobile<="" td=""></house></td></house>	At this <house apartment="" mobile<="" td=""></house>
do you or any member of this household	home/unit>, do you or any member of	home/unit>, do you or any member of	home/unit>, do you or any member of
access the Internet?	this household connect to the Internet?	this household pay for a plan for a	this household have access to the
Yes	Yes	smartphone or mobile device to access	Internet?
No	No	the Internet and make phone calls?	Yes
		Yes (Skip to Internet Access)	No (Skip to vehicle question)
At this <house apartment="" home="" mobile="" unit="">,</house>	At this <house apartment="" mobile<="" td=""><td>No</td><td></td></house>	No	
Do you or any member of this household	home/unit>, Do you or any member of		At this <house apartment="" mobile<="" td=""></house>
access the Internet with or without a	this household connect to the Internet	<telephone here="" question="" service=""></telephone>	home/unit>, Do you or any member of
subscription to an Internet service?	with or without a plan purchased from an		this household pay a cell phone company
With a subscription to an Internet service	Internet service provider?	At this <house apartment="" mobile<="" td=""><td>or Internet service provider to access the</td></house>	or Internet service provider to access the
Without a subscription to an Internet service	With a plan purchased from an Internet	home/unit>, do you or any member of	Internet?
	service provider	this household access the Internet?	Yes
At this <house apartment="" home="" mobile="" unit="">,</house>	Without a plan purchased from an	Yes	No (Skip to vehicle question)
do you or any member of this household	Internet service provider	No (Skip next question)	
subscribe to the Internet using a dial-up			
service?		At this <house apartment="" mobile<="" td=""><td></td></house>	
Yes		home/unit>, Do you or any member of	
No		this household pay a cell phone company	
		or Internet service provider to access the	
At this <house apartment="" home="" mobile="" unit="">,</house>		Internet?	
Do you or any member of this household		Yes	
subscribe to the Internet using a DSL service?		No	
Yes			
No	At this <house apartment="" mobile<="" td=""><td>At this <house apartment="" mobile<="" td=""><td>Do you or any member of this household</td></house></td></house>	At this <house apartment="" mobile<="" td=""><td>Do you or any member of this household</td></house>	Do you or any member of this household
	home/unit>, do you or any member of	home/unit>, do you or any member of	access the Internet using a cellular data
At this <house apartment="" home="" mobile="" unit="">,</house>	this household access the Internet using a	this household access the Internet using	plan for a smartphone or other mobile
Do you or any member of this household	mobile broadband or data plan for a	mobile broadband Internet service for a	device?
subscribe to the Internet using a cable-modem	computer, a smartphone or other device?	smartphone or other mobile device?	Yes
service?	Yes	Yes	No
Yes	No	No	
No			
	At this <house apartment="" mobile<="" td=""><td>At this <house apartment="" mobile<="" td=""><td>Do you or any member of this household</td></house></td></house>	At this <house apartment="" mobile<="" td=""><td>Do you or any member of this household</td></house>	Do you or any member of this household
At this <house apartment="" home="" mobile="" unit="">,</house>	home/unit>, Do you or any member of	home/unit>, Do you or any member of	access the Internet using a broadband or
Do you or any member of this household	this household access the Internet using a	this household access the Internet using	high speed Internet service such as cable,
subscribe to the Internet using a fiber-optic	broadband or high speed connection	broadband or high speed Internet service	fiber optic, or DSL service installed in this
service?	installed in this	installed in this	<pre><house apartment="" home="" mobile="" unit="">?</house></pre>

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
Yes	<pre><house apartment="" home="" mobile="" unit="">?</house></pre>	<pre><house apartment="" home="" mobile="" unit="">,</house></pre>	Yes
No	Yes	such as cable, fiber optic, or DSL service?	No
	No	Yes	
At this <house apartment="" home="" mobile="" unit="">,</house>		No	
Do you or any member of this household			Do you or any member of this household
subscribe to the Internet using a mobile	At this <house apartment="" mobile<="" td=""><td>At this <house apartment="" mobile<="" td=""><td>access the Internet using a satellite</td></house></td></house>	At this <house apartment="" mobile<="" td=""><td>access the Internet using a satellite</td></house>	access the Internet using a satellite
broadband plan for a computer or a cell	home/unit>, Do you or any member of	home/unit>, Do you or any member of	Internet service installed in this
phone?	this household access the Internet using a	this household access the Internet using a	<pre><house apartment="" home="" mobile="" unit="">?</house></pre>
Yes	satellite Internet service?	satellite Internet service?	Yes
No	Yes	Yes	No
	No	No	
At this <house apartment="" home="" mobile="" unit="">,</house>			Do you or any member of this household
Do you or any member of this household	At this <house apartment="" mobile<="" td=""><td>At this <house apartment="" mobile<="" td=""><td>access the Internet using a dial-up</td></house></td></house>	At this <house apartment="" mobile<="" td=""><td>access the Internet using a dial-up</td></house>	access the Internet using a dial-up
subscribe to the Internet using a satellite	home/unit>, Do you or any member of	home/unit>, Do you or any member of	Internet service installed in this
Internet service?	this household access the Internet using a	this household access the Internet using a	<pre><house apartment="" home="" mobile="" unit="">?</house></pre>
Yes	dial-up service?	dial-up Internet service?	Yes
No	Yes	Yes	No
	No	No	
At this <house apartment="" home="" mobile="" unit="">,</house>			Do you or any member of this household
Do you or any member of this household	At this <house apartment="" mobile<="" td=""><td>At this <house apartment="" mobile<="" td=""><td>access the Internet using some other</td></house></td></house>	At this <house apartment="" mobile<="" td=""><td>access the Internet using some other</td></house>	access the Internet using some other
subscribe to the Internet using some other	home/unit>, Do you or any member of	home/unit>, Do you or any member of	service?
service?	this household access the Internet using	this household access the Internet using	Yes
Yes	some other service?	some other service?	No
No	Yes	Yes	
	No	No	
What is this other type of Internet service?			What is this other type of Internet
	What is this other type of Internet	What is this other type of Internet	service?
	service?	service?	

INTERNET VERSION

2014 CURRENT WORDING	FINAL WORDING
At this <house apartment="" home="" mobile="" unit=""> – do you</house>	At this <house apartment="" home="" mobile="" unit=""> - do</house>
or any member of this household own or use any of the	you or any member of this household own or use any
following computers? Exclude GPS devices, digital music	of the following types of computers?
players, and devices with only limited computer capabilities, for example: household appliances.	Desktop or laptop (Yes/No)
cupubilities, for example. Household appliances.	Desktop of Taptop (163/110)
Desktop, laptop, netbook, or notebook computer	Smartphone (Yes/No)
(Yes/No)	
	Tablet or other portable wireless computer (Yes/No)
Handheld computer, smart mobile phone, or other	
handheld wireless computer (Yes/No)	Some other type of computer (Yes/No)
Compath on the second of the s	Specify
Some other type of computer (Yes/No)	
Specify	
	At this <house apartment="" home="" mobile="" unit=""> - do</house>
At this <house apartment="" home="" mobile="" unit=""> – do you</house>	you or any member of this household have access to
or any member of this household access the Internet?	the Internet?
Yes, with a subscription to an Internet service	Yes, by paying a cell phone company or Internet service
Yes, without a subscription to an internet service	provider
No Internet access at this <house apartment="" mobile<="" td=""><td>Yes, without paying a cell phone company or Internet</td></house>	Yes, without paying a cell phone company or Internet
home/unit>	service provider (SKIP next question)
	No access to the Internet at this house, apartment, or mobile home (SKIP next question)
At this <house apartment="" home="" mobile="" unit=""> – do you</house>	mobile nome (SKIF flext question)
or any member of this household subscribe to the	
Internet using –	Do you or any member of this household have access
Dial-up Service? (Yes/No)	to the Internet using a –
DSL service? (Yes/No)	
Cable modem service? (Yes/No)	Cellular data plan for a smartphone or other mobile
Fiber-optic service? (Yes/No)	device? (Yes/No)
Mobile broadband plan for a computer or a cell phone?	
(Yes/No)	Broadband (high speed) Internet service, such as
Satellite Internet service? (Yes/No)	cable, fiber optic, or DSL service installed in this
Some other service? (Yes/No)	<house apartment="" home="" mobile="" unit="">? (Yes/No)</house>
Specify service	

COMPUTER AND INTERNET

2014 CURRENT WORDING	FINAL WORDING
	Satellite Internet service installed in this
	<house apartment="" home="" mobile="" unit="">? (Yes/No)</house>
	Dial-up Internet service installed in this
	<house apartment="" home="" mobile="" unit="">? (Yes/No)</house>
	Some other service? (Yes/No)
	Specify service

COMPUTER AND INTERNET

(Back to Table of Contents)

RELATIONSHIP

	2014 CURRENT WORDING			DING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING	
E	2 H	low	v is this person related to Person 1 Husband or wife Biological son or daughter Adopted son or daughter Stepson or stepdaughter Brother or sister Father or mother Grandchild Parent-in-law		-	Not in cognitive testing. This item was field tested in the 2013 questionnaire design test.	Not in cognitive testing. This item was field tested in the 2013 questionnaire design test.	How is this person related to Person 1? Mark (X) ONE box. Opposite-sex husband/wife/spouse Opposite-sex unmarried partner Same-sex husband/wife/spouse Same-sex unmarried partner Biological son or daughter Adopted son or daughter Stepson or stepdaughter Brother or sister Father or mother Grandchild
								Parent-in-law Son-in-law or daughter-in-law Other relative Roomer or boarder Housemate or roommate Foster child Other nonrelative

CATI/CAPI VERSION

	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
CAPI: <using a="" card="" in="" packet,="" this=""></using>	Not in cognitive testing. This item was field	Not in cognitive testing. This item was field tested	CAPI: <using a="" card="" in="" packet,="" this=""></using>
How <is (name)="" are="" you=""> related to <(reference</is>	tested in the 2013	in the 2013 questionnaire	How <is (name)="" are="" you=""> related to <(reference</is>
person)/you>?	questionnaire design	design test.	person)/you>?
	test.		
Husband or wife			Opposite-sex husband/wife/spouse
Son or daughter (CATI ONLY)			Opposite-sex unmarried partner
Biological son or daughter (CAPI ONLY)			Same-sex husband/wife/spouse
Adopted son or daughter (CAPI ONLY)			Same-sex unmarried partner
Stepson or stepdaughter (CAPI ONLY)			Son or daughter (CATI ONLY)
Brother or sister			Biological son or daughter (CAPI ONLY)
Father or mother			Adopted son or daughter (CAPI ONLY)
Grandchild			Stepson or stepdaughter (CAPI ONLY)
Parent-in-law			Brother or sister
Son-in-law or daughter-in-law			Father or mother
Other relative			Grandchild
Roomer or boarder			Parent-in-law
Housemate or roommate			Son-in-law or daughter-in-law
Unmarried partner			Other relative
Foster child			Roomer or boarder
Other nonrelative			Housemate or roommate
			Foster child
CATI:			Other nonrelative
<ls (name)="" are="" you=""> <your (reference="" person)'s=""> biological</your></ls>			
son or daughter, adopted son or daughter, stepson or			CATI:
stepdaughter, OR foster son or daughter?			<is (name)="" are="" you=""> <your (reference="" person)'s=""> biological</your></is>
Biological son or daughter			son or daughter, adopted son or daughter, OR stepson or
Adopted son or daughter			stepdaughter?
Stepson or stepdaughter			Biological son or daughter
Foster son or daughter			Adopted son or daughter
			Stepson or stepdaughter
			Foster son or daughter

INTERNET VERSION

2014 CURRENT WORDING	FINAL WORDING
How is (Name) related to (Reference person)?	How is (Name) related to (Reference person)?
Husband or wife	Opposite-sex husband/wife/spouse
Biological son or daughter	Opposite-sex unmarried partner
Adopted son or daughter	Same-sex husband/wife/spouse
Stepson or stepdaughter	Same-sex unmarried partner
Brother or sister	Biological son or daughter
Father or mother	Adopted son or daughter
Grandchild	Stepson or stepdaughter
Parent-in-law	Brother or sister
Son-in-law or daughter-in-law	Father or mother
Other relative	Grandchild
Roomer or boarder	Parent-in-law
Housemate or roommate	Son-in-law or daughter-in-law
Unmarried partner	Other relative
Foster child	Roomer or boarder
Other nonrelative	Housemate or roommate
	Foster child
	Other nonrelative
	Conditions under which a follow-up screen should appear:
	The sex reported for this person and the reference person do not match the relationship category chosen. There
	are 4 relationship categories to which this applies:
	1. Opposite sex husband/wife/spouse
	2. Same sex husband/wife/spouse
	3. Opposite sex unmarried partner
	4. Same sex unmarried partner
	So if this person is reported as the 1 st or 3 rd category above, but the reference person and this person are
	reported to have the <i>same</i> sex value (both=1 or both=2), then the check should come up. Conversely, if this
	person is reported to have the 2 nd or 4 th category above, but the reference person and this person are reported
	as different sex values (one=1 and the other=2) then the check should come up.
	Edit check wording:
	Please confirm that your answers are correct. [NAME] is recorded as [REFERENCE PERSON]'s [RELATIONSHIP
	CATEGORY]. Is that correct?
	<a href="mailto:

HISPANIC ORIGIN/RACE

	2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
Is Person 1 o	ease answer BOTH Question 5 about Hispanic origin and about race. For this survey, Hispanic origins are not races. of Hispanic, Latino, or Spanish origin? of Hispanic, Latino, or Spanish origin kican, Mexican Am., Chicano	Version 1 → NOTE: Please answer BOTH Question 5 about Hispanic origin and Question 6 about race. For this survey, Hispanic origins are not races.		Version 1 → NOTE: Please answer BOTH Question 5 about Hispanic origin and Question 6 about race. For this survey, Hispanic origins are not races.
Yes, Puel Yes, Cub Yes, and Argentin and so of	oan ther Hispanic, Latino, or Spanish origin – <i>Print origin, for example,</i> sean. Colombian. Dominican. Nicaraguan. Salvadoran. Spaniard.	Is Person 1 of Hispanic, Latino, or Spanish origin? Mark (X) one or more boxes. No, not of Hispanic, Latino, or Spanish origin Yes, Mexican, Mexican Am., Chicano		Is Person 1 of Hispanic, Latino, or Spanish origin? Mark all boxes that apply AND print origins. Note, you may report more than one group.
White Black or American	African Am. In Indian or Alaska Native — Print name of enrolled or principal tribe.	Yes, Puerto Rican Yes, Cuban Yes, another Hispanic, Latino, or Spanish origin — Print origin(s), for example, Salvadoran, Dominican, Colombian, and so on		No, not of Hispanic, Latino, or Spanish origin Yes, Mexican, Mexican Am., Chicano Yes, Puerto Rican Yes, Cuban Yes, another Hispanic, Latino, or Spanish origin – Print details, for example, Salvadoran, Dominican, Colombian, etc.
for exam	dian	What is Person 1's race? Mark (X) one or more boxes. White – Print origin(s), for example, German, Lebanese, Egyptian, and so on. Black or African Am. – Print origin(s), for		What is Person 1's race? Mark all boxes that apply AND print origins in the spaces below. Note, you may report more than one group.
Some oth	her race – Print race. 戻	example, African American, Jamaican, Nigerian, and so on American Indian or Alaska Native — Print name of enrolled or principal tribe(s), for example, Navajo Nation, Mayan, Chevak Native Village, and so on		White – Print details, for example, German, Lebanese, Egyptian, etc. Black or African Am. – Print details, for example, African American, Jamaican,

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
	Chinese Filipino Asian Indian Vietnamese Korean Japanese Other Asian – Print origin(s), for example, Pakistani, Cambodian, Hmong, and so on. Native Hawaiian Samoan Guamanian or Chamorro Other Pacific Islander – Print origin(s), for example Tongan, Fijian, Marshallese, and so on. Some other race – Print race(s) or origin(s).		American Indian or Alaska Native – Print name of enrolled or principal tribe(s), for example, Navajo Nation, Mayan, Native Village of Barrow Inupiat Traditional Government, etc. Chinese Filipino Asian Indian Vietnamese Korean Japanese Other Asian – Print details, for example, Pakistani, Cambodian, Hmong, etc. Native Hawaiian Samoan Chamorro Other Pacific Islander – Print details, for example, Tongan, Fijian, Marshallese, etc. Some other race – Print race(s) or origin(s).

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
	Version 2 What is Person 1's race or origin? Mark (X) one or more boxes AND print the specific race(s) and/or origin(s).	Which categories describe Person 1? Mark all boxes that apply AND print details in the spaces below.	Wersion 2 Which categories describe Person 1? Mark all boxes that apply AND print details in the spaces below.
	White — Print origin(s), for example, German, Irish, English, and so on	White – Print details, for example, German, Irish, English	White – Print details, for example, German, Irish, English, etc
	Hispanic, Latino, or Spanish origin – Print origin(s), for example, Mexican or Mexican American, Puerto Rican, Colombian, and so on.	Hispanic, Latino, or Spanish origin – Print details, for example, Mexican or Mexican American, Puerto Rican, Colombian.	Hispanic, Latino, or Spanish origin – Print details, for example, Mexican or Mexican American, Puerto Rican, Colombian, etc.
	Black or African Am. – Print origin(s), for example, African American, Jamaican, Nigerian, and so on.	Black or African Am. – Print details, for example, African American, Jamaican, Nigerian.	Black or African Am. – Print details, for example, African American, Jamaican, Nigerian, etc
	Asian – Print origin(s), for example, Chinese, Asian Indian, Vietnamese, and so on	Asian – Print details, for example, Chinese, Asian Indian, Vietnamese.	Asian – Print details, for example, Chinese, Asian Indian, Vietnamese, etc
	American Indian or Alaska Native – Print name of enrolled or principal tribe(s), for example, Navajo Nation, Mayan, Chevak Native Village, and so on.	American Indian or Alaska Native – Print details, for example, Navajo Nation, Mayan, Chevak Native Village	American Indian or Alaska Native – Print name(s) of enrolled or principal tribe(s), for example, Navajo Nation, Mayan, Native Village of Barrow Inupiat Traditional Government, etc
	Middle Eastern or North African – Print origin(s), for example, Lebanese, Iranian, Egyptian, and so on.	Middle Eastern or North African — Print details, for example, Lebanese, Iranian, Egyptian	Middle Eastern or North African – Print details, for example, Lebanese, Iranian, Egyptian, etc.
	Native Hawaiian or Other Pacific Islander – Print origin(s), for example, Native Hawaiian, Guamanian or Chamorro, Fijian, and so on. ————	Native Hawaiian or Other Pacific Islander – Print details, for example, Native Hawaiian, Guamanian or Chamorro, Fijian.	Native Hawaiian or Other Pacific Islander – Print details, for example, Native Hawaiian, Chamorro, Fijian, etc.
	Some other race or origin – Print race(s) and/or origin(s).	Some other race or origin – Print details.	Some other race, ethnicity, or origin – Print details.

CATI/CAPI VERSION

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
(First time question asked)	CATI: I'm going to read a list of races and	CATI: I'm going to read a list of categories.	VERSION 1
CAPI: Please look at Card B.	origins. You may choose one or more.	You may choose all that apply.	<is (name)="" are="" you=""> of Hispanic, Latino, or</is>
<is (name)="" are="" you=""> of Hispanic, Latino, or</is>			Spanish origin?
Spanish origin?	CAPI: Please look at Card C and choose one or	<is (name)="" are="" you=""> White; Hispanic,</is>	Yes
Yes	more races or origins.	Latino, or Spanish origin; Black or African	No
No		American; Asian; American Indian or	CATI: You may choose one or more
	<is (name)="" are="" you=""> White; Hispanic, Latino,</is>	Alaska Native; Middle Eastern or North	origins. <are (name)="" is="" you=""> Mexican,</are>
(Subsequent persons)	or Spanish origin; Black or African American;	African; Native Hawaiian or Other Pacific	Mexican American, Chicano; Puerto Rican;
<how <(name)="" about="" you="">?> <is< td=""><td>Asian; American Indian or Alaska Native;</td><td>Islander; or Some other race or origin?</td><td>Cuban; or of some other Hispanic, Latino, or</td></is<></how>	Asian; American Indian or Alaska Native;	Islander; or Some other race or origin?	Cuban; or of some other Hispanic, Latino, or
(Name)/Are you> of Hispanic, Latino, or	Middle Eastern or North African; Native		Spanish origin?
Spanish origin?	Hawaiian or Other Pacific Islander; or Some	CAPI: Please look at Card B and choose all	
Yes	other race or origin?	categories that apply.	Mexican, Mexican American, or Chicano
No			Puerto Rican
	CAPI:	CAPI:	Cuban
<is (name)="" are="" you=""> Mexican, Mexican</is>	(Card C shows what is listed below)	(Card B shows what is listed below)	Another Hispanic, Latino, or Spanish origin
American, or Chicano; Puerto Rican; Cuban;			
or of another Hispanic, Latino, or Spanish	Choose one or more races or origins.	Choose all categories that apply.	What is that origin or origins? (For example,
origin; for example, Argentinean,	Milita Fan avanania Camana iniah Finaliah	Milita Fan ayanan la Cannana Isiah	Salvadoran, Dominican, Colombian,
Colombian, Dominican, Nicaraguan,	White – For example, German, Irish, English,	White – For example, German, Irish,	Guatemalan, Spaniard, Ecuadorian, etc.)
Salvadoran, Spaniard, and so on?	and so on.	English.	
Mayisan Mayisan American or Chicana	Hispanic, Latino, or Spanish origin – For	Hispanic, Latino, or Spanish origin – For	
Mexican, Mexican American, or Chicano Puerto Rican	example, Mexican or Mexican American, Puerto Rican, Colombian, and so on.	example, Mexican or Mexican American,	CAPI: Please look at Card B and choose one
Cuban	Black or African American – For example,	Puerto Rican, Colombian. Black or African American – For example,	or more origins.
Another Hispanic, Latino, or Spanish origin	African American, Jamaican, Nigerian, and so	African American, Jamaican, Nigerian.	
(For example, Argentinean, Colombian,	on.	Asian – For example, Chinese, Asian Indian,	<are (name)="" is="" you=""> Mexican, Mexican</are>
Dominican, Nicaraguan, Salvadoran,	Asian – For example, Chinese, Asian Indian,	Vietnamese.	American, Chicano; Puerto Rican; Cuban; or
Spaniard, and so on)	Vietnamese, and so on.	American Indian or Alaska Native – For	of some other Hispanic, Latino, or Spanish
Spaniard, and 30 ony	American Indian or Alaska Native – For	example, Navajo Nation, Mayan, Chevak	origin?
What is that origin? (For example,	example, Navajo Nation, Mayan, Chevak	Native Village.	
Argentinean, Colombian, Dominican,	Native Village, and so on.	Middle Eastern or North African – For	(Card B shows what is listed below)
Nicaraguan, Salvadoran, Spaniard, and so	Middle Eastern or North African – For	example, Lebanese, Iranian, Egyptian.	Mexican, Mexican American, or Chicano
on.)	example, Lebanese, Iranian, Egyptian, and so	Native Hawaiian or Other Pacific Islander –	Puerto Rican
	on.	For example Native Hawaiian, Guamanian	Cuban
	Native Hawaiian or Other Pacific Islander –	or Chamorro, Fijian.	Another Hispanic, Latino, or Spanish origin (For example, Salvadoran, Dominican,

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
	For example Native Hawaiian, Guamanian or	Some other race or origin	Colombian, Guatemalan, Spaniard,
	Chamorro, Fijian, and so on.		Ecuadorian, etc.)
CATI: I'm going to read a list of race	Some other race or origin	Managaridahan dalamakiahan anak	What is that anisin an anisin 2 (Fan annual
categories. You may choose one or more	Vou said that «(Nama) is (vou ava)	You said that <(Name) is/you are>:	What is that origin or origins? (For example,
races.	You said that <(Name) is/you are>:	WHITE	Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc.)
CAPI: Please look at Card C and choose one	WHITE	HISPANIC, LATINO, OR SPANISH	Guatemaian, Spaniaru, Ecuadorian, etc.,
or more races.	HISPANIC, LATINO, OR SPANISH	BLACK OR AFRICAN AMERICAN	
of more races.	BLACK OR AFRICAN AMERICAN	ASIAN	CATI:I'm going to read a list of races. You
<for a<="" hispanic="" is="" not="" origin="" survey,="" td="" this=""><td>ASIAN</td><td>AMERICAN INDIAN OR ALASKA NATIVE</td><td>may choose one or more races. For this</td></for>	ASIAN	AMERICAN INDIAN OR ALASKA NATIVE	may choose one or more races. For this
race.>	AMERICAN INDIAN OR ALASKA NATIVE	MIDDLE EASTERN OR NORTH AFRICAN	survey, Hispanic origin is not a race.
Tace.	MIDDLE EASTERN OR NORTH AFRICAN	NATIVE HAWAIIAN OR OTHER PACIFIC	Survey, mispanic origin is not a race.
<is (name)="" are="" you=""> White; Black or</is>	NATIVE HAWAIIAN OR OTHER PACIFIC	ISLANDER	CARL Places leak at Count Count above one
African American; American Indian or	ISLANDER	SOME OTHER RACE	CAPI: Please look at Card C and choose one
Alaska Native; Asian; Native Hawaiian or	SOME OTHER RACE	SOME OTHER MACE	or more races. For this survey, Hispanic
Other Pacific Islander; or Some other race?		Now, I'm going to collect detailed	origin is not a race.
White	Now, I'm going to collect detailed information	information. You may give more than one	What is <(Name)'s/your> race?
Black or African American	for each race or origin you provided. You may	response.	<pre><!--s (Name) / Are you--> White; Black or</pre>
American Indian or Alaska Native	give one or more origins.	•	African American; American Indian or
Asian		What are <(Name)'s/your> specific	Alaska Native; Asian; Native Hawaiian or
Native Hawaiian or Other Pacific Islander	What is <(Name)'s/your> WHITE origin or	categories for WHITE? For example,	Other Pacific Islander; or Some other race?
Some other race	origins? For example, German, Irish, English,	German, Irish, English.	White
	and so on	_	Black or African American
What is <(Name)'s/your> race?		What are <(Name)'s/your> specific	American Indian or Alaska Native
(<is (name)="" are="" you=""> White; Black or</is>	What is <(Name)'s/your> HISPANIC, LATINO,	categories for HISPANIC, LATINO, OR	Asian
African American; American Indian or	OR SPANISH origin or origins? For example,	SPANISH origin? For example, Mexican or	Native Hawaiian or Other Pacific Islander
Alaska Native; Asian; Native Hawaiian or	Mexican or Mexican American, Puerto Rican,	Mexican American, Puerto Rican,	Some other race
Other Pacific Islander; or Some other race?)	Colombian, and so on	Colombian	
			You said that <(Name) is/you are>:
How about <(Name)/you?>	What is <(Name)'s/your> BLACK OR AFRICAN	What are <(Name)'s/your> specific	
	AMERICAN origin or origins? For example,	categories for BLACK OR AFRICAN	WHITE
You may list one or more tribes.	African American, Jamaican, Nigerian, and so	AMERICAN? For example, African	BLACK OR AFRICAN AMERICAN
What is <(Name)'s/ your> enrolled or	on	American, Jamaican, Nigerian.	AMERICAN INDIAN OR ALASKA NATIVE
principal tribe?			ASIAN
	What is <(Name)'s/your> ASIAN origin or	What are <(Name)'s/your> specific	NATIVE HAWAIIAN OR OTHER PACIFIC
You may choose one or more Asian groups.	origins? For example, Chinese, Asian Indian,	categories for ASIAN? For example,	ISLANDER
	Vietnamese, and so on	Chinese, Asian Indian, Vietnamese.	SOME OTHER RACE

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
<pre>cls (Name)/Are you> Asian Indian, Chinese, Filipino, Japanese, Korean, Vietnamese, or another Asian group, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on? Asian Indian Chinese Filipino Japanese Korean Vietnamese Other Asian (For example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.) What is that other Asian group? (For example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.) You may choose one or more Pacific Islander groups. </pre> Is (Name)/Are you> Native Hawaiian; Guamanian or Chamorro; Samoan; or another Pacific Islander group, for example, Fijian, Tongan, and so on? Native Hawaiian Guamanian or Chamorro Samoan Other Pacific Islander (For example, Fijian, Tongan, and so on) What is that other Pacific Islander group? (For example, Fijian, Tongan, and so on.)	What is <(Name)'s/your> AMERICAN INDIAN OR ALASKA NATIVE enrolled or principal tribe? For example, Navajo Nation, Mayan, Chevak Native Village, and so on What is <(Name)'s/your> MIDDLE EASTERN OR NORTH AFRICAN origin or origins? For example, Lebanese, Iranian, Egyptian, and so on What is <(Name)'s/your> NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER origin or origins? For example, Native Hawaiian, Guamanian or Chamorro, Fijian, and so on What is <(Name)'s/your> OTHER RACE OR ORIGIN?	What are <(Name)'s/your> specific categories for AMERICAN INDIAN OR ALASKA NATIVE? For example, Navajo Nation, Mayan, Chevak Native Village. What are <(Name)'s/your> specific categories for MIDDLE EASTERN OR NORTH AFRICAN? For example, Lebanese, Iranian, Egyptian. What are <(Name)'s/your> specific categories for NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER? For example, Native Hawaiian, Guamanian or Chamorro, Fijian. What are <(Name)'s/your> specific categories for OTHER RACE OR ORIGIN?	Now I'm going to collect detailed information for each race you provided. You may give one or more origins. What is <(Name)'s/your> race? (<is (name)="" are="" you=""> White; Black or African American; American Indian or Alaska Native; Asian; Native Hawaiian or Other Pacific Islander; or Some other race?) How about <(Name)/you?> What are <(Name)'s/your> WHITE origin or origins? For example, German, Irish, English, Italian, Lebanese, Egyptian, etc. What are <(Name)'s/your> BLACK OR AFRICAN AMERICAN origin or origins? For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc. What are <(Name)'s/your> AMERICAN INDIAN OR ALASKA NATIVE enrolled or principal tribe or tribes? For example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc. You may choose one or more Asian groups. <is (name)="" are="" you=""> Chinese, Filipino,</is></is>
What is <(Name)'s/your> other race group?			Asian Indian, Vietnamese, Korean, Japanese, or of some other Asian origin? Chinese Filipino

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
			☐ Asian Indian
			☐ Vietnamese
			□ Korean
			□ Japanese
			☐ Other Asian
			What is that other Asian origin or origins?
			For example, Pakistani, Cambodian, Hmong,
			etc.
			You may choose one or more Pacific
			Islander groups.
			(Is <name>/Are you) Native Hawaiian,</name>
			Samoan, Chamorro, or of some other
			Pacific Islander origin?
			☐ Native Hawaiian
			□ Samoan
			☐ Chamorro
			☐ Other Pacific Islander
			M/hat is that ather Posific Islander origin or
			What is that other Pacific Islander origin or origins? For example, Tongan, Fijian,
			Marshallese, etc.
			Warshallese, etc.
			What is (<name>'s/your) other race group</name>
			or groups?
			VERSION 2
			CATI: I'm going to read a list of categories.
			You may choose all that apply.
			<ls (name)="" are="" you=""> White; Hispanic,</ls>
			Latino, or Spanish origin; Black or African
			American; Asian; American Indian or Alaska
			Native; Middle Eastern or North African;

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
			Native Hawaiian or Other Pacific Islander; or Some other race, ethnicity, or origin?
			CAPI: Please look at Card B and choose all categories that apply.
			CAPI: (Card B shows what is listed below)
			Choose all categories that apply.
			White – For example, German, Irish, English, Italian, Polish, French, etc. Hispanic, Latino, or Spanish origin – For example, Mexican or Mexican American, Puerto Rican, Cuban, Salvadoran, Dominican, Colombian, etc. Black or African American – For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc. Asian – For example, Chinese, Filipino, Asian Indian, Vietnamese, Korean, Japanese, etc. American Indian or Alaska Native – For example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc. Middle Eastern or North African – For example, Lebanese, Iranian, Egyptian,
			Syrian, Moroccan, Algerian, etc. Native Hawaiian or Other Pacific Islander — For example, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian,
			Marshallese, etc. Some other race, ethnicity, or origin
			You said that <(Name) is/you are>:

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
			WHITE HISPANIC, LATINO, OR SPANISH BLACK OR AFRICAN AMERICAN ASIAN AMERICAN INDIAN OR ALASKA NATIVE MIDDLE EASTERN OR NORTH AFRICAN NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER SOME OTHER RACE Now, I'm going to collect detailed
			information. You may give more than one response. What are <(Name)'s/your> specific categories for WHITE? For example, German, Irish, English, Italian, Polish, French, etc
			What are <(Name)'s/your> specific categories for HISPANIC, LATINO, OR SPANISH origin? For example, Mexican or Mexican American, Puerto Rican, Cuban, Salvadoran, Dominican, Colombian, etc.
			What are <(Name)'s/your> specific categories for BLACK OR AFRICAN AMERICAN? For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc
			What are <(Name)'s/your> specific categories for ASIAN? For example, Chinese, Filipino, Asian Indian, Vietnamese, Korean, Japanese, etc.

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
			What are <(Name)'s/your> specific categories for AMERICAN INDIAN OR ALASKA NATIVE? For example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc What are <(Name)'s/your> specific categories for MIDDLE EASTERN OR NORTH AFRICAN? For example, Lebanese, Iranian,
			Egyptian, Syrian, Moroccan, Algerian, etc. What are <(Name)'s/your> specific categories for NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER? For example, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, Marshallese, etc. What are <(Name)'s/your> specific categories for OTHER RACE, ETHNICITY, OR ORIGIN?

INTERNET VERSION

2014 CURRENT WORDING	FINAL WORDING
Is (Name) of Hispanic, Latino, or Spanish origin? No, not of Hispanic, Latino, or Spanish origin Yes, Mexican, Mexican Am., Chicano Yes, Puerto Rican Yes, Cuban Yes, another Hispanic, Latino, or Spanish origin – Enter origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.	VERSION 1 Is (NAME) of Hispanic, Latino, or Spanish origin? Select all boxes that apply AND enter origins. Note, you may report more than one group. No, not of Hispanic, Latino, or Spanish origin Yes, Mexican, Mexican Am., Chicano Yes, Puerto Rican Yes, Cuban Yes, another Hispanic, Latino, or Spanish origin – Enter details, for example, Salvadoran, Dominican, Colombian, Guatemalan, Spaniard, Ecuadorian, etc.
What is (Name)'s race? Select one or more boxes. For this survey, Hispanic origins are not races. White Black or African Am. American Indian or Alaska Native – Enter name of enrolled or principal tribe.	What is (NAME)'s race? Select all boxes that apply AND enter origins in the spaces below. Note, you may report more than one group. White – Enter details, for example, German, Irish, English, Italian, Lebanese, Egyptian, etc.
Chinese Filipino Japanese Korean Vietnamese Other Asian – Enter race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.	Black or African Am. – Enter details, for example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.
Native Hawaiian Guamanian or Chamorro Samoan Other Pacific Islander – Enter race, for example, Fijian, Tongan, and so on.	American Indian or Alaska Native – Enter details, for example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, etc.
Some other race – Enter race.	

HISPANIC ORIGIN/RACE

Chinese

Filipino

Asian Indian

Vietnamese

Korean

Japanese

Other Asian – Enter details, for example, Pakistani, Cambodian, Hmong, etc.

Native Hawaiian

Samoan

Chamorro

Other Pacific Islander – Enter details, for example, Tongan, Fijian, Marshallese, etc.

Some other race – Enter race or origin

VERSION 2

Which categories describe NAME? Select all boxes that apply. Note, you may report more than one group.

White – For example, German, Irish, English, Italian, Polish, French, etc.

Hispanic, Latino, or Spanish origin — For example, Mexican or Mexican American, Puerto Rican, Cuban, Salvadoran, Dominican, Colombian, etc.

Black or African Am. – For example, African American, Jamaican, Haitian, Nigerian, Ethiopian, Somali, etc.

Asian – For example, Chinese, Filipino, Asian Indian, Vietnamese, Korean, Japanese, etc.

American Indian or Alaska Native – For example, Navajo Nation, Blackfeet Tribe, Mayan, Aztec, Native Village of

Barrow Inupiat Traditional Government, Nome Eskimo Community, etc. Middle Eastern or North African – For example, Lebanese, Iranian, Egyptian, Syrian, Moroccan, Algerian, etc. Native Hawaiian or Other Pacific Islander – For example, Native Hawaiian, Samoan, Chamorro, Tongan, Fijian, Marshallese, etc. Some other race, ethnicity, or origin ***For each box checked above for the COMBINED QUESTION, a subsequent screen should appear. Wording for subsequent screens are listed below *** Next, we will collect detailed information for each category selected. Note, you may report more than one group. Select all boxes that apply and/or enter details in the space below. WHITE ☐ German Irish ☐ English Italian ☐ Polish ☐ French ☐ Enter, for example, Scottish, Norwegian, Dutch, etc. Select all boxes that apply and/or enter details in the space below. HISPANIC, LATINO, OR SPANISH Mexican or Mexican American ☐ Puerto Rican

☐ Cuban
☐ Salvadoran
☐ Dominican
☐ Colombian
\square Enter, for example, Guatemalan, Spaniard,
Ecuadorian, etc
Select all boxes that apply and/or enter details in the
space below.
BLACK OR AFRICAN AMERICAN
African American
☐ Jamaican
☐ Haitian
☐ Nigerian
☐ Ethiopian
☐ Somali
\square Enter, for example, Ghanaian, South African,
Barbadian, etc
Select all boxes that apply and/or enter details in the
space below.
ASIAN
☐ Chinese
☐ Filipino
Asian Indian
☐ Vietnamese
☐ Korean
☐ Japanese
\square Enter, for example, Pakistani, Cambodian, Hmong,
etc
Enter details in the space below.
AMERICAN INDIAN
Enter, for example, Navajo Nation, Blackfeet Tribe,

ALASKA NATIVE Enter, for example, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Orutsararmuit Native Village, etc. CENTRAL OR SOUTH AMERICAN INDIAN Enter, for example, Mayan, Aztec, Taino, etc. Gelect all boxes that apply and/or enter details in the space below. MIDDLE EASTERN OR NORTH AFRICAN
Traditional Government, Nome Eskimo Community, Orutsararmuit Native Village, etc. CENTRAL OR SOUTH AMERICAN INDIAN Enter, for example, Mayan, Aztec, Taino, etc. Select all boxes that apply and/or enter details in the space below.
CENTRAL OR SOUTH AMERICAN INDIAN Enter, for example, Mayan, Aztec, Taino, etc. Select all boxes that apply and/or enter details in the space below.
CENTRAL OR SOUTH AMERICAN INDIAN Enter, for example, Mayan, Aztec, Taino, etc. Select all boxes that apply and/or enter details in the space below.
Enter, for example, Mayan, Aztec, Taino, etc. Select all boxes that apply and/or enter details in the space below.
Select all boxes that apply and/or enter details in the space below.
space below.
space below.
MIINNIE EACTEDRI AD RIADTO AEDICARI
_
Lebanese
Iranian
Egyptian
Syrian
Moroccan
Algerian
Enter, for example, Israeli, Iraqi, Tunisian, etc.
Select all boxes that apply and/or enter details in the space below. NATIVE HAWAIIAN OR OTHER PACIFIC ISLANDER
Native Hawaiian
□ Native Hawaiian
☐ Chamorro
□ Tongan
□ Fijian
☐ Marshallese
☐ Enter, for example, Palauan, Tahitian, Chuukese, etc

HEALTH INSURANCE

	2014 CURRENT WORDING			ROUND 1 ENGLISH		ROUND 2 ENGLISH		FINAL WORDING	
0	 Is this person CURRENTLY covered by following types of health insurance of coverage plans? Mark "Yes" or "No" for of coverage in items a – h. Insurance through a current or former employer or union (of this person or another family member) 	or hea	lth type	e	Version 1 and 3 Is this person CURRENTLY covered by any of the following types of health insurance or health coverage plans? Mark "Yes" or "No" for EACH type of coverage in items a – h.	any ins	his person CURRENTLY covered by y of the following types of health urance or health coverage plans? ork "Yes" or "No" for EACH type of the property in items a – h.	and ins	this person CURRENTLY covered by y of the following types of health surance or health coverage plans? ark "Yes" or "No" for EACH type of verage in items a – h.
	b. Insurance purchased directly from an insurance company (by this person or another family member)				Do NOT include plans that cover only one type of service, such as dental, drug or vision plans.	typ	NOT include plans that cover only one e of service, such as dental, drug or on plans.	typ	NOT include plans that cover only one of service, such as dental, drug, or ion plans.
	c. Medicare, for people 65 and older, or people with certain disabilities d. Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability e. TRICARE or other military health care f. VA (including those who have ever used or enrolled for VA health care) g. Indian Health Service			•	 a. Insurance through a current or former employer or union (of this person or another family member) (Yes/No) b. Medicare, for people 65 and older, or people with certain disabilities (Yes/No) c. Medicaid, Medical Assistance, or any kind of state or government-assistance plan for those with low income (Yes/No) 	a.	Insurance through a current or former employer or union (of this person or another family member) (Yes/No) Medicare, for people 65 and older, or people with certain disabilities (Yes/No) Medicaid, Medical Assistance, or any kind of state or government-assistance plan for those with low		Insurance through a current or former employer or union (of this person or another family member) (Yes/No) Medicare, for people 65 and older, or people with certain disabilities (Yes/No) Medicaid, Medical Assistance, or any kind of state- or government-assistance plan for those with low
	h. Any other type of health insurance or health coverage plan – Specify				 d. Insurance purchased directly from an insurance company or through a State or Federal Marketplace (by this person or another family member) (Yes/No) e. TRICARE or other military health care (Yes/No) f. VA (including those who have ever used or enrolled for VA health care) (Yes/No) 	d. e.	income (Yes/No) Insurance purchased directly from an insurance company or through a State or Federal Marketplace, healthcare.gov, or a similar state website (by this person or another family member) (Yes/No) TRICARE or other military health care (Yes/No)	d. e.	income (Yes/No) Insurance purchased directly from an insurance company or through a State or Federal Marketplace, HealthCare.gov, or a similar state website (by this person or another family member) (Yes/No) TRICARE or other military health care (Yes/No)

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
	g. Indian Health Service (Yes/No) h. Any other type of health insurance NOT listed above (Yes/No) – Specify ————————————————————————————————————	f. VA (including those who have ever used or enrolled for VA health care) (Yes/No) g. Indian Health Service (Yes/No) h. Any other type of health insurance NOT listed above (Yes/No)—Specify————	f. VA (including those who have ever used or enrolled for VA health care) (Yes/No) g. Indian Health Service (Yes/No) h. Other type of health coverage NOT listed above (Yes/No) – Specify ————

CATI/CAPI VERSION

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
I am now going to ask you some questions about [your/ <name>'s] health insurance and health coverage. [Are you/Is <name>] currently covered by health insurance through a current or former employer or union of [yours or</name></name>	I am now going to ask you some questions about (your/ <name>'s) health insurance and health coverage. Do NOT include plans that cover only one type of service, such as dental, drug or vision plans.</name>	I am now going to ask you some questions about (your/ <name>'s) health insurance and health coverage. Do NOT include plans that cover only one type of service, such as dental, drug or vision plans.</name>	I am now going to ask you some questions about (your/ <name>'s) health insurance and health coverage. Do NOT include plans that cover only one type of service, such as dental, drug or vision plans.</name>
another family member/ <him her=""> or another family member]?</him>	(Are you/Is <name>) currently covered by health insurance through a current or former employer or union of (yours or another family</name>	a.(Are you/Is <name>) currently covered by health insurance through an employer or union? Include coverage from current or</name>	a. (Are you/Is <name>) currently covered by health insurance through an employer or union? Include coverage from current or</name>
[Are you/Is <name>] currently covered by health insurance purchased directly from an insurance company by [you or another family member/<him her=""> or another family member]?</him></name>	member/ <his hers=""> or another family member)? Yes No</his>	former employers or unions of (yours/his/hers) or another family member. Yes No	former employers or unions of (yours/his/hers) or another family member. Yes No
I recorded that (you/ <name>) (have/has) both insurance through an employer or union AND insurance directly purchased through an insurance company. These are two different plans, is that correct?</name>	(Are you/Is <name>) currently covered by Medicare, for people age 65 or older or people with certain disabilities? Yes No</name>	b. (Are you/Is <name>) currently covered by Medicare, for people age 65 or older or people with certain disabilities? Yes No</name>	b. (Are you/Is <name>) currently covered by Medicare, for people age 65 or older or people with certain disabilities? Yes No</name>
[Are you/Is <name>] currently covered by Medicare, for people age 65 or older or people with certain disabilities?</name>	(Are you/Is <name>) currently covered by Medicaid, Medical Assistance, or any kind of state or government-assistance plan for those with low incomes? Yes</name>	c.(Are you/Is <name>) currently covered by Medicaid, Medical Assistance, or any kind of state or government-assistance plan for those with low incomes? Yes</name>	c. (Are you/Is <name>) currently covered by Medicaid, Medical Assistance, or any kind of state or government-assistance plan for those with low incomes? Yes</name>
[Are you/Is <name>] currently covered by Medicaid, Medical Assistance, or any kind of government-assistance plan for those</name>	No (Are you/Is <name>) currently covered by</name>	No d.(Are you/Is <name>) currently covered by</name>	No d.(Are you/Is <name>) currently covered by</name>
with low incomes or a disability?	health insurance purchased directly from an insurance company or through a State or	health insurance purchased directly from an insurance company or through a State or	health insurance purchased directly from an insurance company or through a State or
[Are you/Is <name>] currently covered by TRICARE or other military health care?</name>	Federal Marketplace by (you or another family member/ <him her=""> or another family member)?</him>	Federal Marketplace, Healthcare.gov, or a similar state website by <you her="" him=""> or another family member?</you>	Federal Marketplace, HealthCare.gov, or a similar state website by <you her="" him=""> or another family member?</you>
[Are you/Is <name>] currently covered through the Veteran's Administration or</name>	Yes No	Yes No	Yes No

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
[Fill 2: have you/has <name>] ever used or</name>	I recorded that (you/ <name>) (have/has)</name>	e.(Are you/Is <name>) currently covered by</name>	e. (Are you/Is <name>) currently covered</name>
enrolled for VA health care?	both insurance through an employer or	TRICARE or other military health care?	by TRICARE or other military health care?
	union AND insurance directly purchased	Yes	Yes
[Are you/Is <name>] currently covered</name>	through an insurance company. These are	No	No
through the Indian Health Service?	two different plans, is that correct?		
[Are you/Is <name>] currently covered by</name>	Yes	f.(Are you/Is <name>) currently covered</name>	f. (Are you/Is <name>] currently covered</name>
any other health insurance or health	No	through the VA or (have you/has <name>)</name>	through the VA or [have you/has <name>]</name>
coverage plan?		ever used or enrolled for VA health care?	ever used or enrolled for VA health care?
What is the name of the health care plan?	(Are you/Is <name>) currently covered by</name>	Yes	Yes
	TRICARE or other military health care?	No	No
	Yes		
	No	g.(Are you/Is <name>) currently covered</name>	g. (Are you/Is <name>) currently covered</name>
	(0. (1. 0. 1. 1. 1. 1. 1.	through the Indian Health Service?	through the Indian Health Service?
	(Are you/Is <name>] currently covered</name>	Yes	Yes
	through the VA or [have you/has <name>]</name>	No	No
	ever used or enrolled for VA health care?		h (0 /)
	Yes	h.(Are you/Is <name>) currently covered by</name>	h. (Are you/Is <name>) currently covered</name>
	No	any other health insurance or health coverage plan?	by any other type of health coverage NOT already mentioned?
	(Are you/Is <name>) currently covered</name>	Yes	Yes
	through the Indian Health Service?	No	No
	Yes		_
	No		What is the name of that health care
		What is the name of the health care plan?	coverage?
	(Are you/Is <name>) currently covered by any</name>		
	other health insurance or health coverage plan?	[AFTER PARTS B-H, IF YES TO PART A AND ANY OTHER PLAN]	[AFTER PARTS B-H, IF YES TO PART A AND ANY OTHER PLAN]
	Yes	I recorded that (you/ <name>) (have/has)</name>	I recorded that (you/ <name>) (have/has)</name>
	No	insurance through an employer or union	insurance through an employer or union
	110	AND (READ PLAN). These are two different	AND (READ PLAN). Are these two different
	What is the name of the health care plan?	plans, is that correct?	plans?
	The state of the floater care plant	Yes	Yes (SKIP to Premiums or Daily Activities, as
	Person 2+:	No	applicable)
	I am now going to ask you some questions		No
	about (your/ <person 2+="" name="">'s) health</person>		
	insurance and health coverage. Do NOT	Which of these best describes	Which of these best describes
	include plans that cover only one type of	(your/ <name>'s) plan?</name>	(your/ <name>'s) plan?</name>

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
	service, such as dental, drug or vision plans.		_
	(Are you/Is <name>) currently covered by</name>	Person 2+:	[AFTER PARTS A-H, IF YES TO BOTH C AND
	health insurance through a current or former	I am now going to ask you some questions	D]
	employer or union of (yours or another family	about (your/ <person 2+="" name="">'s) health</person>	I recorded that (you/ <name>) (have/has)</name>
	member/ <his hers=""> or another family</his>	insurance and health coverage. Do NOT	Medicaid, Medical Assistance, or a state or
	member)?	include plans that cover only one type of	government-assistance plan AND health
	Yes	service, such as dental, drug or vision plans.	insurance purchased directly from an
	No	/Augusta /II- (Alaman) and a samual har	insurance company or through a State or
	Same type as Person 1	(Are you/Is <name>) currently covered by</name>	Federal Marketplace. Are these two
	Faultan Lucas and adultative Decrease 4 Name	health insurance through an employer or	different plans?
	Earlier I recorded that < Person 1 Name	union? Include coverage from current or	Yes (SKIP to Premium)
	is/you are> currently covered by <read full<="" td=""><td>former employers or unions of</td><td>No</td></read>	former employers or unions of	No
	type of first insurance marked for PERSON 1>.	(yours/his/hers) or another family member.	NA/Iniah af thaga bagt daggibas
	(Do you/Does <person 2+="" name="">) have this same type of health insurance or health</person>	Yes No	Which of these best describes
	coverage?	Same type as Person 1	(your/ <name>'s) plan?</name>
	_	Same type as Person 1	AFTER PART H, IF "YES" TO BOTH H AND
	Yes No	[IF SAME TYPE AS PERSON 1]	(any other (a-q) or Specific types):
	I NO	Earlier I recorded that < Person 1 Name	I recorded that (you/ <name>) (have/has)</name>
	I also recorded that (< Person 1 Name> is/you	is/you are> currently covered by <read full<="" td=""><td>(<fill (a-g)="" plan="" type="">) and (<fill plan<="" td=""></fill></fill></td></read>	(<fill (a-g)="" plan="" type="">) and (<fill plan<="" td=""></fill></fill>
	are) currently covered by <read full="" of<="" td="" type=""><td>type of first insurance marked for PERSON</td><td>NAME PROVIDED in H>/another type of</td></read>	type of first insurance marked for PERSON	NAME PROVIDED in H>/another type of
	second insurance marked for PERSON 1>. (Do	1>. (Do you/Does <person 2+="" name="">) have</person>	health coverage)? Are these two different
	you/Does <person 2+="" name="">) have this same</person>	this same type of health insurance or	plans?
	type of health insurance or health coverage?	health coverage?	Yes (SKIP to PREMIUM question)
	type of fleatth misurance of fleatth coverage:	Yes	No
	(Are you/Is <person2+ name="">) covered by</person2+>	No	140
	any other health insurance plan? Do NOT		Which of these best describes
	include plans that cover only one type of	I also recorded that (< Person 1 Name>	(your/ <name>'s) plan?</name>
	service, such as dental, drug or vision plans.	is/you are) currently covered by <read full<="" td=""><td>() ,</td></read>	() ,
	, , ,	type of second insurance marked for	
		PERSON 1>. (Do you/Does <person 2+<="" td=""><td>Person 2+:</td></person>	Person 2+:
		Name>) have this same type of health	I am now going to ask you some questions
		insurance or health coverage?	about (your/ <person 2+="" name="">'s) health</person>
			insurance and health coverage. Do NOT
		(Are you/Is <person2+ name="">) covered by</person2+>	include plans that cover only one type of
		any other health insurance plan? Do NOT	service, such as dental, drug or vision plans.
		include plans that cover only one type of	

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
		service, such as dental, drug or vision plans.	(Are you/Is <name>) currently covered by health insurance through an employer or union? Include coverage from current or former employers or unions of (yours/his/hers) or another family member. Yes No Same type as Person 1 [IF SAME TYPE AS PERSON 1] Earlier I recorded that < Person 1 Name is/you are> currently covered by <read 1="" first="" for="" full="" insurance="" marked="" of="" person="" type="">. (Do you/Does <person 2+="" name="">) have this same type of health insurance or health coverage? Yes No I also recorded that (< Person 1 Name> is/you are) currently covered by <read for<="" full="" insurance="" marked="" of="" second="" td="" type=""></read></person></read></name>
			PERSON 1>. (Do you/Does <person 2+="" name="">) have this same type of health insurance or health coverage?</person>
			(Are you/Is <person2+ name="">) covered by any other health insurance plan? Do NOT include plans that cover only one type of service, such as dental, drug or vision plans.</person2+>

2014 CURRENT WORDING	FINAL WORDING
Is (Name) CURRENTLY covered by any of the following types of health insurance or health coverage plans? Select "Yes" or "No" for EACH type of coverage in items a – h. a. Insurance through a current or former employer or union (of this person or another family member) b. Insurance purchased directly from an insurance company (by this person or another family member) c. Medicare, for people 65 and older, or people with certain disabilities d. Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low income or a disability e. TRICARE or other military health care f. VA (including those who have ever used or enrolled for VA health care) g. Indian Health Service h. Any other type of health insurance - Specify	Are [is] [you/Name] CURRENTLY covered by any of the following types of health insurance or health coverage plans? Select "Yes" or "No" for EACH type of coverage in items a – h. Do NOT include plans that cover only one type of service, such as dental, drug or vision plans. i. Insurance through a current or former employer or union (of this person or another family member) (Yes/No) j. Medicare, for people 65 and older, or people with certain disabilities (Yes/No) k. Medicaid, Medical Assistance, or any kind of state or government-assistance plan for those with low income (Yes/No) l. Insurance purchased directly from an insurance company or through a State or Federal Marketplace, HealthCare.gov, or a similar state website (by this person or another family member) (Yes/No) m. TRICARE or other military health care (Yes/No) n. VA (including those who have ever used or enrolled for VA health care) (Yes/No) o. Indian Health Service (Yes/No) p. Other type of health coverage NOT listed above (Yes/No) — Specify Add edit checks as similar to CAI as possible on the internet version to reduce multi-reporting: Here are some examples of how it might work: IF "YES" TO BOTH C AND D Show New Screen after respondent clicks "Next" on Health Insurance Screen You entered that (you/ <name>) (have/has) insurance through Medicaid, Medical Assistance, or a state or government-assistance plan AND health</name>

HEALTH INSURANCE

2014 CURRENT WORDING	FINAL WORDING
	insurance purchased directly from an insurance company or through a State or Federal Marketplace. Are these two different plans? Yes (SKIP to Premium Question) No Show on new screen with above question greyed out: Which of these best describes (your/ <name>'s) plan?</name>
	Medicaid, Medical Assistance, or a state or government-assistance plan
	Purchased directly from an insurance company or through a State or Federal Marketplace
	Add edit check to the internet instrument for those reporting both (h) Other and any other plan type (a-g) (Reason: Respondents may select "yes" for a plan type (a-g) and then provide the name of that plan in the "Other" category.)
	AFTER PART H, IF "YES" TO BOTH H AND (any other (a-g) or Specific types) show a new screen: You entered that (you/ <name>) (have/has) (<fill (a-g)="" plan="" type="">) and (<fill name<="" plan="" th=""></fill></fill></name>
	PROVIDED in H>/another type of health coverage)? Are these two different plans? Yes (SKIP to PREMIUM question) No
	Which of these best describes (your/ <name>'s) plan?</name>
	Add edit check to the internet instrument for those reporting both (a) insurance through an employer

HEALTH INSURANCE

or union and any other type [AFTER PARTS B-H, IF YES TO PART A AND ANY OTHER PLAN] You entered that (you/ <name>) (have/has) insurance through an employer or union AND (READ PLAN). Are these two different plans?</name>	2014 CURRENT WORDING	FINAL WORDING
OTHER PLAN] You entered that (you/ <name>) (have/has) insurance through an employer or union AND</name>		or union and any other type
Yes (SKIP to Premiums or Daily Activities, as applicable) No Which of these best describes (your/ <name>'s) plan? Add skip</name>		OTHER PLAN] You entered that (you/ <name>) (have/has) insurance through an employer or union AND (READ PLAN). Are these two different plans? Yes (SKIP to Premiums or Daily Activities, as applicable) No Which of these best describes (your/<name>'s) plan?</name></name>

HEALTH INSURANCE

Premium and Subsidies

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
New question- no current wording	Version 1 Is there a monthly premium for this plan? A monthly premium is a fixed amount of money people pay each month to have health coverage. It does not include copays or other expenses such as prescription drug costs. Yes No → SKIP next question Is the cost of the premium subsidized based on family income? Yes No Version 2 Is there a monthly premium for this plan? Yes No → SKIP next question	Does this person or another family member pay a premium for this health insurance plan? A premium is a fixed amount of money paid on a regular basis for health coverage. It does not include copays, deductibles, or other expenses such as prescription costs. Yes No Based on family income, does this person or another family member receive financial assistance through a subsidy or tax credit to help pay part or all of the cost of the premium for this plan? Yes No	Version 1 Is there a premium for this plan? A premium is a fixed amount of money paid on a regular basis for health coverage. It does not include copays, deductibles, or other expenses such as prescription costs. Yes No -> SKIP subsidy question Does this person or another family member receive a tax credit or subsidy based on family income to help pay the premium? Yes No Version 2
	Does this person or another family member receive a tax credit or subsidy based on family income to help pay the monthly premium? Yes No Version 3 Is there a monthly premium for this plan? Yes No → SKIP next question		Does this person or another family member pay a premium for this health insurance plan? A premium is a fixed amount of money paid on a regular basis for health coverage. It does not include copays, deductibles, or other expenses such as prescription costs. Yes No -> SKIP subsidy question Based on family income, does this person or another family member receive financial

PREMIUM AND SUBSIDIES

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
	Is there a tax credit or subsidy based on family		assistance through a subsidy or tax credit to
	income to help pay the monthly premium for this		help pay part or all of the cost of the
	plan?		premium for this plan?
	Yes		Yes
	No		No

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING	
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2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
New question- no current wording	Is there a monthly premium for this plan? Yes No Is there a tax credit or subsidy based on family income to help pay the monthly premium for this plan? Yes No	<do (name)="" does="" you=""> or another family member pay a premium for this health insurance plan? A premium is a fixed amount of money paid on a regular basis for health coverage. It does not include copays, deductibles, or other expenses such as prescription costs. Yes No Based on family income, <do (name)="" does="" you=""> or another family member receive financial assistance through a subsidy or tax credit to help pay part or all of the cost of the premium for this plan? Yes No</do></do>	Version 1 If "Yes" in question 15b, 15d, and/or 15h Continue. Otherwise, SKIP to question 17 Is there a premium for this plan? A premium is a fixed amount of money paid on a regular basis for health coverage. It does not include copays, deductibles, or other expenses such as prescription costs. Yes No -> SKIP subsidy question <do (name)="" does="" you=""> or another family member receive a tax credit or subsidy based on family income to help pay the premium? Yes No Version 2 If "Yes" in question 15c, 15d, and/or 15h Continue. Otherwise, SKIP to question 17 <do (name)="" does="" you=""> or another family member pay a premium for this health insurance plan? A premium is a fixed amount of money paid on a regular basis for health coverage. It does not include copays, deductibles, or other expenses such as prescription costs. Yes No -> SKIP subsidy question Based on family income, <do (name)="" does="" you=""> or another family member receive financial assistance through a subsidy or tax credit to help pay part or all of the cost of the premium for this plan? Yes No</do></do></do>

2014 CURRENT WORDING	FINAL WORDING
New question- no current wording	Version 2 If "Yes" in question 15b, 15d, and/or 15h Continue. Otherwise, SKIP to question 17
	Is there a premium for this plan? A premium is a fixed amount of money paid on a regular basis for health coverage. It does not include copays, deductibles, or other expenses such as prescription costs. Yes No -> SKIP subsidy question
	Does (Name) or another family member receive a tax credit or subsidy based on family income to help pay the premium? Yes No
	Version 2 If "Yes" in question 15c, 15d, and/or 15h Continue. Otherwise, SKIP to question 17
	Does (Name) or another family member pay a premium for this health insurance plan? A premium is a fixed amount of money paid on a regular basis for health coverage. It does not include copays, deductibles, or other expenses such as prescription costs. Yes -> Go To Subsidy Question No -> add a skip around subsidy Q
	Based on family income, does (Name) or another family member receive financial assistance through a subsidy or tax credit to help pay part or all of the cost of the premium for this plan? Yes
	No

PREMIUM AND SUBSIDIES

JOURNEY TO WORK: COMMUTING MODE

JOURNEY TO WORK: COMMUTING MODE

2014 CURRENT WORDING	2014 CURRENT WORDING ROUND 1 ENGLISH		FINAL WORDING
How did this person usually get to work WEEK? If this person usually used more the method of transportation during the trip, method of the one used for most of the distribute box of the distribute	work LAST WEEK? If this person usually used more than one method of transportation during the trip, mark (X) the box of the one used for most of the distance. Car, truck, or van Bus or trolley bus Subway or elevated rail Cammuter or long distance railroad	train Light rail, streetcar, or trolley Ferryboat Taxicab Motorcycle Bicycle Walked Worked from home→ SKIP to 39a	How did this person usually get to work LAST WEEK? Mark ONEbox for the method of transportation used for most of the distance. Car, truck, or van Bus Subway or elevated rail Long-distance train or commuter rail Light rail, streetcar, or trolley Ferryboat Taxicab Motorcycle Bicycle Walked Worked from home→ SKIP to 39a Other method
	Other method	Other method	Other method

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
CAPI: <using card="" g=""> LAST WEEK, how did <(Name)/you> USUALLY get to work?</using>	CAPI: <using card="" g=""> LAST WEEK, how did <(Name)/you> USUALLY get to work?</using>	CAPI: <using card="" g,=""> LAST WEEK, how did <(Name)/you> USUALLY get to work?</using>	CAPI: <using card="" g,=""> LAST WEEK, how did <(Name)/you> USUALLY get to work?</using>
(If <he (name)="" she="" you=""> usually used more than one method of transportation during the trip, report the one used for most of the distance.)</he>	(If <he (name)="" she="" you=""> usually used more than one method of transportation during the trip, report the one used for most of the distance.)</he>	(If <he (name)="" she="" you=""> usually used more than one method of transportation during the trip, report the one used for most of the distance.)</he>	(If <he (name)="" she="" you=""> usually used more than one method of transportation during the trip, report the one used for most of the distance.)</he>
Car, truck, or van Bus or trolley bus Streetcar or trolley car Subway or elevated Railroad Ferryboat Taxicab	Car, truck, or van Bus or trolley bus Subway or elevated rail Commuter or long-distance railroad Light rail, streetcar, or trolley Ferryboat Taxicab	Car, truck, or van Bus Subway or elevated rail Commuter rail or long-distance train Light rail, streetcar, or trolley Ferryboat Taxicab	Car, truck, or van Bus Subway or elevated rail Long-distance train or commuter rail Light rail, streetcar, or trolley Ferryboat Taxicab
Motorcycle Bicycle Walked Worked at home→ SKIP to weeks worked	Motorcycle Bicycle Walked Worked at home → SKIP to weeks worked	Motorcycle Bicycle Walked Worked from home → SKIP to weeks	Motorcycle Bicycle Walked Worked from home → SKIP to weeks
question Other method	question Other method	worked question Other method	worked question Other method

2014 CURRENT WORDING	FINAL WORDING	
How did (Name) usually get to work LAST WEEK? If (Name) usually used more than one method of transportation during the trip, select the one used for most of the distance. Car, truck, or van Bus or trolley bus Streetcar or trolley car Subway or elevated Railroad Ferryboat Taxicab Motorcycle Bicycle Walked Worked at home Other method	How did (Name) usually get to work LAST WEEK? Select ONE box for the method of transportation used for most of the distance. Car, truck, or van Bus Subway or elevated rail Long-distance train or commuter rail Light rail, streetcar, or trolley Ferryboat Taxicab Motorcycle Bicycle Walked Worked from home → SKIP to 39a Other method	

JOURNEY TO WORK: COMMUTING MODE

JOURNEY TO WORK: TIME LEFT FOR WORK

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JOURNEY TO WORK: TIME LEFT FOR WORK

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
What time did this person usually leave home to go to work LAST WEEK? Hour Minute a.m. p.m.	What time did this person usually arrive at work LAST WEEK? Hour Minute a.m. p.m.	LAST WEEK, what time did this person's trip to work usually begin? Hour Minute a.m. p.m.	LAST WEEK, what time did this person's trip to work usually begin? Hour Minute a.m. p.m.

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
LAST WEEK, what time did <(Name)/you> usually leave for work (what hour)?	LAST WEEK, what time did <(Name)/you> usually arrive at work (what hour)?	LAST WEEK, what time did <your (name)'s=""> trip to work usually begin (what hour)?</your>	LAST WEEK, what time did <your (name)'s=""> trip to work usually begin? (what hour)?</your>
(How many minutes past that hour?) (Was that AM or PM)?	(How many minutes past that hour?) (Was that AM or PM)?	(How many minutes past that hour?) (Was that AM or PM)?	(How many minutes past that hour?) (Was that AM or PM)?

INTERNET VERSION

2014 CURRENT WORDING	FINAL WORDING	
What time did (name) usually leave home	LAST WEEK, what time did (Name)'s trip to	
to go to work LAST WEEK?	work usually begin?	
Hour Minute a.m. p.m.	Hour Minute a.m. p.m.	

NUMBER OF WEEKS WORKED

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
a. During the PAST 12 MONTHS (52 weeks), did this person work 50 or more weeks? Count paid time off as work. Yes → SKIP to question 40 No b. How many weeks DID this person work, even for a few hours, including paid vacation, paid sick leave, and military service? 50 to 52 weeks 48 to 49 weeks 40 to 47 weeks 27 to 39 weeks 14 to 26 weeks 13 weeks or less	Version 1 During the PAST 12 MONTHS (52 weeks), did this person work 50 or more weeks? Count paid time off as work. Yes No How many weeks DID this person work, even for a few hours, including paid vacation, paid sick leave, and military service? weeks Version 2 During the PAST 12 MONTHS (52 weeks), how many WEEKS did this person work? Count paid vacation, paid sick leave, and military service.	During the PAST 12 MONTHS (52 weeks), did this person work 50 or more weeks? Count paid vacation, paid sick leave, and military service as work. Yes No How many WEEKS did this person work, even for a few hours, including paid time off? weeks	During the PAST 12 MONTHS (52 weeks), did this person work EVERY week? Count paid vacation, paid sick leave, and military service as work. Yes SKIP TO QUESTION 39 No During the PAST 12 MONTHS (52 weeks), how many WEEKS did this person work? Include paid time off and include weeks when the person only worked for a few hours. weeks
	Weeks		

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
During the PAST 12 MONTHS or 52 weeks,	During the PAST 12 MONTHS or 52 weeks,	During the PAST 12 MONTHS or 52 weeks,	During the PAST 12 MONTHS or 52 weeks,
did <(Name)/you> work 50 or more weeks? Count paid time off as work.	did <(Name)/you> work 50 or more weeks? Count paid time off as work.	did <(Name)/you> work 50 or more weeks? Count paid vacation, paid sick leave, and	did <(Name)/you> work EVERY week? Count paid vacation, paid sick leave, and
	·	military service as work.	military service as work.
Yes	Yes		
No	No	Yes	Yes SKIP NEXT QUESTION
		No	No
How many weeks DID <(Name)/you> work,	How many weeks DID <(Name)/you>		
even for a few hours, including paid	work, even for a few hours, including paid	How many WEEKS did <(Name)/you> work,	During the PAST 12 MONTHS or 52 weeks,
vacation, paid sick leave, and military	vacation, paid sick leave, and military	even for a few hours, including paid time	how many WEEKS did <(Name)/you> work?
service? Was it:	service?	off?	Include paid time off and include weeks
			when <(Name)/you> only worked for a few
50 to 52 weeks	weeks	weeks	hours.
48 to 49 weeks			
40 to 47 weeks			weeks
27 to 39 weeks			
14 to 26 weeks			
13 weeks or less			

2014 CURRENT WORDING	FINAL WORDING
During the PAST 12 MONTHS (52 weeks), did (Name) work 50 or more weeks? Count paid time off as work.	During the PAST 12 MONTHS (52 weeks), did (Name) work EVERY week? Count paid vacation, paid sick leave, and military service as work.
•Yes	
•No	Yes (Skips to next question) No
How many weeks DID (Name) work, even for a few	
hours, INCLUDING paid vacation, paid sick leave, and military service?	During the PAST 12 MONTHS or 52 weeks, how many WEEKS did (Name) work? Include paid time off and include weeks when (Name) only
• 50 to 52 weeks	worked for a few hours.
• 48 to 49 weeks	
• 40 to 47 weeks	weeks
• 27 to 39 weeks	
• 14 to 26 weeks	
• 13 weeks or less	

NUMBER OF WEEKS WORKED

CLASS OF WORKER

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
41 - 46 CURRENT OR MOST RECENT JOB ACTIVITY. Describe clearly this person's chief	Version 1 40-45 CURRENT OR MOST RECENT JOB OR	40 DESCRIPTION OF EMPLOYMENT.	40 DESCRIPTION OF EMPLOYMENT.
job activity or business last week. If this person had more than one job, describe the one at which this person worked the most hours. If this person had no job or business last week, give information for his/her last job or business.	BUSINESS. Describe clearly this person's main job activity or business last week. If this person had more than one job, describe the one at which this person worked the	The next series of questions is about the type of employment this person had last week.	The next series of questions is about the type of employment this person had last week.
41 Was this person –	most hours. If this person had no job or business last week, give information for	If this person had more than one job, describe the one at which the most	If this person had more than one job, describe the one at which the most
Mark (X) ONE box. an employee of a PRIVATE FOR-PROFIT	his/her last job or business.	hours were worked. If this person did not work last week, describe the	hours were worked. If this person did not work last week, describe the
company or business, or of an individual, for wages, salary, or commissions?	Which one of the following best describes this person's current or most recent job or business in the past 5 years?	most recent employment in the past five years.	most recent employment in the past five years.
an employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization? a local GOVERNMENT employee	Mark (X) ONE box.	Which one of the following best describes this person's employment	Which one of the following best describes this person's employment
(city, county, etc.)?	PRIVATE SECTOR employee:	last week or the most recent	last week or the most recent
a state GOVERNMENT employee?	For-profit company or organizationNon-profit organization (including tax-	employment in the past 5 years? Mark (X) ONE box.	employment in the past 5 years? Mark (X) ONE box.
a Federal GOVERNMENT employee?	exempt and charitable organizations)	PRIVATE SECTOR EMPLOYEE	PRIVATE SECTOR EMPLOYEE
SELF-EMPLOYED in own NOT INCORPORATED business, professional practice, or farm?	GOVERNMENT employee:	o For-profit company or organization	o For-profit company or organization
SELF-EMPLOYED in own INCORPORATED business, professional practice, or farm?	 Local government (for example: city or county school district) State government (including state 	 Non-profit organization (including tax-exempt and charitable 	 Non-profit organization (including tax-exempt and charitable organizations)
working WITHOUT PAY in family business or farm?	colleges/universities)	organizations)	
'	o Active duty U.S. Armed Forces or	GOVERNMENT EMPLOYEE	GOVERNMENT EMPLOYEE
	Commissioned Corps service o Federal government civilian employee	 Local government (for example: city or county school district) 	 Local government (for example: city or county school district)
	3.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1	o State government (including state	State government (including state
	SELF-EMPLOYED or OTHER:	colleges/universities)	colleges/universities)
	 Own non-incorporated business, 	o Active duty U.S. Armed Forces or	o Active duty U.S. Armed Forces or

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
	professional practice, or farm • Own incorporated business, professional	Commissioned Corps o Federal government civilian	Commissioned Corps o Federal government civilian
	practice, or farm	employee	employee
	 Worked without pay in a for-profit family 	employee	employee
	business or farm for 15 hours or more per	SELF-EMPLOYED or OTHER:	SELF-EMPLOYED or OTHER
	week	○ Owner of non-incorporated	○ Owner of non-incorporated
		business, professional practice, or	business, professional practice, or
	<u>Version 2</u>	farm	farm
	CURRENT OR MOST RECENT JOB OR	 Owner of incorporated business, 	 Owner of incorporated business,
	BUSINESS. The next series of questions are	professional practice, or farm	professional practice, or farm
	about the type of business this person	Worked without pay in a for-profit	Worked without pay in a for-profit
	worked for and the type of work this person	family business or farm for 15	family business or farm for 15
	did. If this person had more than one job, describe the one at which the most hours	hours or more per week	hours or more per week
	were worked. If this person did not work last		
	week, give information for the last job or		
	business in the past five years.		
	business in the pust five years.		
	Which one of the following best describes		
	this person's current or most recent job or		
	business in the past 5 years?		
	Mark (X) one box.		
	-Employee of a for-profit, private sector		
	company or organization		
	-Employee of a non-profit, private sector		
	organization (including tax-exempt and		
	charitable organizations)		
	-Local government employee (for example: city or county school district)		
	-State government employee (including		
	state colleges/universities)		
	-Active duty U.S. Armed Forces or		
	Commissioned Corps service		
	-Federal government civilian employee		
	-Self-employed in own non-incorporated		
	business, professional practice, or farm		
	-Self-employed in own incorporated		
	business, professional practice, or farm		

CLASS OF WORKER

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
For whom did this person work? If now on active duty in the Armed Forces, mark (X) this box → and print the branch of the Armed Forces. Name of company, business, or other employer	-Worked without pay in a for-profit family business or farm for 15 hours or more per week -Did not work for pay in the past 5 years (for example: homemaker, unpaid intern) Version 1 and 2 What was the name of this person's employer, business, agency, or branch of the Armed Forces?	What was the name of this person's employer, business, agency, or branch of the Armed Forces?	What was the name of this person's employer, business, agency, or branch of the Armed Forces?

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
The next series of questions are about the	The next series of questions are about	The next series of questions is about the	[Fill- if worked last week:]
type of business <(Name)/you> worked	the type of business <(Name)/you>	type of employment <(Name)/you> had	The next series of questions is about the type of
for and the type of work that	worked for and the type of work that	last week.	employment <(Name)/you> had last week.
<he (name)="" she="" you=""> did.</he>	<pre><he (name)="" she="" you=""> did. If <(Name)/you> had more than 1 job,</he></pre>	If <(Name)/you> had more than 1 job,	[Fill- If previously reported that this person did
.(If <(Name)/ you> had more than 1 job,	describe the one at which the most	describe the one at which the most	not work last week but worked in the past 5
describe the one at which the most hours	hours were worked. If <(Name)/you>	hours were worked. If <(Name)/you>	years:]
were worked. If <(Name)/you> did not	did not work last week, give	did not work last week, describe the	The next series of questions is about the type of
work last week, give information for the	information for the last job or business	most recent employment in the past five	employment <(Name)/you> had most recently in
last job or business in the past five years.)	in the past five years.	years.	the past 5 years.
Let's start with the first question. I am		CATI:	If <(Name)/you> had more than one job,
going to read 5 categories. Please pick the	I am going to read 5 categories. Please	I am going to read 5 categories. Please	describe the one at which the most hours were
one that best describes who	pick the one that best describes who	pick the one that best describes	worked.
<he (name)="" she="" you=""> worked for - a</he>	<(Name)/you > worked for – a private	<(Name)'s/your> employment – a	
private organization or company,	organization or company, government,	private organization or company,	CATI:
government, the US Armed Forces (active	active duty U.S. Armed Forces or	government, active duty U.S. Armed	I am going to read 5 categories. Please
duty), self-employed, or working without	Commissioned Corps service, self-	Forces or Commissioned Corps, self-	choosethe one that best describes
pay in a family business.	employed, or worked without pay in a	employed, or worked without pay in a	<(Name)'s/your> employment – a private
Private organization or company	for-profit family business.	for-profit family business or farm.	organization or company, government, active
Government			duty U.S. Armed Forces or Commissioned Corps,
US Armed Forces (active duty)	Private company or organization	Private company or organization	self-employed, or worked without pay in a for-
Self-employed Working without pay in a family business	Government	Government	profit family business or farm.
working without pay in a family business	Active duty U.S. Armed Forces or Commissioned Corps service	Active duty U.S. Armed Forces or Commissioned Corps	Private company or organization
Was this a non-profit organization or a for	Self-employed	Self-employed	Government
profit company?	Worked without pay in a for-profit	Worked without pay in a for-profit family	Active duty U.S. Armed Forces or Commissioned
Non-profit organization	family business	business or farm	Corps
For-profit company	lammy business	Susmess of furm	Self-employed
, p	Was this a for-profit company or non-	Did <(Name)/you> work for a for-profit	Worked without pay in a for-profit family
Was this for Local, State, or the Federal	profit organization ?	company or non-profit organization?	business or farm
Government?	For-profit company	For-profit company	
Local	Non-profit organization	Non-profit organization	Did <(Name)/you> work for a for-profit
State			company or non-profit organization?
Federal	Was this for local, state, or the federal	Did <(Name)/you> work for a local,	For-profit company
	government?	state, or federal government?	Non-profit organization

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
Was this self-employment incorporated or	Local	Local	
not incorporated?	State	State	Did <(Name)/you> work for a local, state, or
Incorporated	Federal	Federal	federal government?
Not incorporated			Local
	Was <(Name)'s/your> self-employed	Was <(Name)'s/your> self-employed	State
	business, professional practice or farm	business, professional practice, or farm	Federal
	incorporated or not incorporated?	incorporated or not incorporated?	
	Incorporated	Incorporated	Was <(Name)'s/your> self-employed business,
	Not incorporated	Not incorporated	professional practice, or farm incorporated or
			not incorporated?
	Did <(Name)/you> work without pay in	Did <(Name)/you> work without pay in	Incorporated
	this for-profit family business or farm	this for-profit family business or farm	Not incorporated
	for 15 hours or more per week?	for 15 hours or more per week?	
	Yes	Yes	Did <(Name)/you> work without pay in this for-
	No	No	profit family business or farm for 15 hours or
			more per week?
		CAPI:	Yes
		Let's start with the first question. Using	No
What was the name of <(Name)'s/your>	What was the name of	CARD H, which one of the following best	
company, business or other employer?	<(Name)'s/your> employer, business,	describes <(Name)'s/your>	CAPI:
	or agency?	employment?	Let's start with the first question. Using CARD H,
Which branch of the Armed Forces <does< td=""><td></td><td></td><td>which one of the following best describes</td></does<>			which one of the following best describes
(Name)/do you> work for?	Which branch of the Armed Forces or	(Card H shows what is listed below)	<(Name)'s/your> employment?
U.S. Army	Commissioned Corps did		
U.S. Navy	<(Name)/you> work for?	For-profit company or organization	(CAPI screenshows what is listed below)
U.S. Air Force	U.S. Army	[PRIVATE SECTOR EMPLOYEE]	
U.S. Marine Corps	U.S. Navy	Non-profit organization (including tax-	For-profit company or organization [PRIVATE
U.S. Coast Guard	U.S. Air Force	exempt and charitable organizations)	SECTOR EMPLOYEE]
	U.S. Marine Corps	[PRIVATE SECTOR EMPLOYEE]	Non-profit organization (including tax-exempt
	U.S. Coast Guard	Local government [GOVERNMENT	and charitable organizations) [PRIVATE SECTOR
	U.S. Public Health Service	EMPLOYEE]	EMPLOYEE]
	National Oceanic and Atmospheric	State government (including state	Local government [GOVERNMENT EMPLOYEE]
	Administration (NOAA)	colleges/universities) [GOVERNMENT	State government (including state
		EMPLOYEE]	colleges/universities) [GOVERNMENT
		Active duty U.S. Armed Forces or	EMPLOYEE]
		Commissioned Corps [GOVERNMENT	Active duty U.S. Armed Forces or Commissioned
		EMPLOYEE]	Corps [GOVERNMENT EMPLOYEE]
		Federal government civilian employee	Federal government civilian employee

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
2014 CORRENT WORDING	KOUND 1 ENGLISH	[GOVERNMENT EMPLOYEE] Owner of non-incorporated business, professional practice, or farm [SELF-EMPLOYED] Owner of incorporated business, professional practice, or farm [SELF-EMPLOYED] Worked without pay in a for-profit family business or farm for 15 hours or more per week	[GOVERNMENT EMPLOYEE] Owner of non-incorporated business, professional practice, or farm [SELF- EMPLOYED] Owner of incorporated business, professional practice, or farm [SELF- EMPLOYED] Worked without pay in a for-profit family business or farm for 15 hours or more per week (Card H shows what is listed below, note grey headers) CARD H Which one of the following best describes this person's employment? (Choose one) PRIVATE SECTOR EMPLOYEE For-profit company or organization Non-profit organization (including tax- exempt and charitable organizations)
			GOVERNMENT EMPLOYEE Local government (for example: city or county school district) State government (including state colleges/universities) Active duty U.S. Armed Forces or Commissioned Corps Federal government civilian employee SELF-EMPLOYED OR OTHER Owner of non-incorporated business, professional practice, or farm Owner of incorporated business, professional practice, or farm Worked without pay in a for-profit family business or farm for 15 hours or more per week

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
		What was the name of <(Name)'s/your> employer, business, or agency? Which branch of the Armed Forces or Commissioned Corps did <(Name)/you> work for? U.S. Army U.S. Navy U.S. Air Force U.S. Marine Corps U.S. Coast Guard U.S. Public Health Service National Oceanic and Atmospheric Administration (NOAA)	What was the name of <(Name)'s/your> employer, business, or agency? Which branch of the Armed Forces or Commissioned Corps did <(Name)/you> work for? U.S. Army U.S. Navy U.S. Air Force U.S. Marine Corps U.S. Coast Guard U.S. Public Health Service National Oceanic and Atmospheric Administration (NOAA)
		Commissioned Corps did <(Name)/you> work for? U.S. Army U.S. Navy U.S. Air Force U.S. Marine Corps U.S. Coast Guard U.S. Public Health Service National Oceanic and Atmospheric	Commissioned Corps did <(Name)/you> wo for? U.S. Army U.S. Navy U.S. Air Force U.S. Marine Corps U.S. Coast Guard U.S. Public Health Service National Oceanic and Atmospheric

CLASS OF WORKER
INTERNET VERSION

2014 CURRENT WORDING **FINAL WORDING** The next series of questions are about the type of business **COWA [40]** (Name) worked for and the type of work that (he/she/he **40. DESCRIPTION OF EMPLOYMENT** or she) did. The next series of questions is about the type of Describe clearly (name's) chief job activity or business last employment (Name) had last week. week. If (name) had more than one job, describe the one at which (he/she/he or she) worked the most hours. If (name) If (Name) had more than one job, describe the one at which the most hours were worked. had no job or business last week, give information for (his/her/his or her) last job or business. If (Name) did not work last week, describe the most Was (name) recent employment in the past five years. an employee of a PRIVATE FOR-PROFIT company or business, or of an individual, for wages, salary, or a. Which one of the following best describes commissions? (Name)'s employment last week or the most an employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or recent employment in the past 5 years? charitable organization? a local GOVERNMENT employee (city, county, etc.)? PRIVATE SECTOR EMPLOYEE a state GOVERNMENT employee? For-profit company or organization an ACTIVE DUTY U.S. Armed Forces member? Non-profit organization (including taxa Federal GOVERNMENT employee (excluding active duty exempt and charitable organizations) military)? **GOVERNMENT EMPLOYEE** SELF-EMPLOYED in own NOT INCORPORATED business, professional practice, or farm? Local government (for example: city or SELF-EMPLOYED in own INCORPORATED business, county school district) professional practice, or farm? **State government** (including state working WITHOUT PAY in family business or farm? colleges/universities) **Active duty** U.S. Armed Forces or What was the name of (Name)'s company, business, or **Commissioned Corps** other employer? Federal government civilian employee Which branch of the Armed Forces does (Name) work for? SELF-EMPLOYED OR OTHER Owner of non-incorporated business, U.S. Army U.S. Navy professional practice, or farm U.S. Air Force Owner of incorporated business, professional U.S. Marine Corps practice, or farm

U.S. Coast Guard	Worked without pay in a for-profit family business or farm for 15 hours or more per week
	INW2 (if COWA not = 5 "Active duty") [40b] b. What was the name of (Name)'s employer, business, or agency?
	 [60 characters]
	INMIL (if COWA= 5 "Active duty") [40b] b. Which branch of the Armed Forces or Commissioned Corps did (Name) work for?
	U.S. Army U.S. Navy U.S. Air Force U.S. Marine Corps U.S. Coast Guard U.S. Public Health Service National Oceanic and Atmospheric Administration (NOAA)

CLASS OF WORKER

INDUSTRY AND OCCUPATION

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
What kind of business or industry was this? Describe the activity at the location where employed. (For example: hospital, newspaper publishing, mail order house, auto engine manufacturing, bank)	Version 1 What kind of place was this job or business? Include the main activity, product, or service provided at the location where employed. (For example: elementary school, women's clothing store, fast food restaurant)	What kind of business or industry was this? Include the main activity, product, or service provided at the location where employed. (For example: elementary school, residential construction)	What kind of business or industry was this? Include the main activity, product, or service provided at the location where employed. (For example: elementary school, residential construction)
	Version 2 What kind of business or industry was this? Include the main activity, product, or service provided at the location where employed. Be as specific as possible.		
What kind of work was this person doing? (For example: registered nurse, personnel manager, supervisor of order department, secretary, accountant)	Version 1 What was this person's main occupation or title? Be as specific as possible. (For example: 4 th grade teacher) Version 2 What was this person's main occupation or title? Be as specific as possible.	What was this person's main occupation? (For example: 4 th grade teacher, entry-level plumber)	What was this person's main occupation? (For example: 4 th grade teacher, entry-level plumber)

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
What were this person's most important activities or duties? (For example: patient care, directing hiring policies, supervising order clerks, typing and filling, reconciling financial records)	Version 1 What were this person's most important activities or duties? Be as specific as possible. (For example: instructing and evaluating students, creating lesson plans) Version 2	Describe this person's most important activities or duties. (For example: instruct and evaluate students and create lesson plans, assemble and install pipe sections and review building plans for work details)	Describe this person's most important activities or duties. (For example: instruct and evaluate students and create lesson plans, assemble and install pipe sections and review building plans for work details) [3 lines for write-in text on paper]
	What were this person's most important activities or duties? Be as specific as possible		

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
What kind of business or industry was this? For example: hospital, newspaper publishing, mail order house, auto engine manufacturing, bank.	What kind of business or industry was this? Include the main activity, product, or service provided at the location where employed. For example: elementary school, women's clothing store, fast food restaurant.	What kind of business or industry was this? Include the main activity, product, or service provided at the location where employed. For example: elementary school, residential construction.	What kind of business or industry was this? Include the main activity, product, or service provided at the location where employed. For example: elementary school, residential construction, oranother kind of business
What kind of work < was (Name)/were you> doing at this job? For example: registered nurse, personnel manager, supervisor of order department, secretary, accountant	What was <(Name)'s/your> main occupation or title? Be as specific as possible. For example: 4th grade teacher	What was <(Name)'s/your> main occupation? For example: 4th grade teacher, entry-level plumber	What was <(Name)'s/your> main occupation? For example: 4th grade teacher, entry-level plumber, or another occupation
What were <(Name)'s/your> most important activities or duties at this job? For example: patient care, directing hiring policies, supervising order clerks, typing and filing, reconciling financial records.	What were <(Name)'s/your> most important activities or duties? Be as specific as possible. For example: instructing and evaluating students, creating lesson plans	Describe <(Name)'s/your> most important activities or duties. For example: instruct and evaluate students and create lesson plans, assemble and install pipe sections and review building plans for work details.	Describe <(Name)'s/your> most important activities or duties. For example: instruct and evaluate students and create lesson plans, assemble and install pipe sections and review building plans for work details, or other duties [100 characters]

2014 CURRENT WORDING	FINAL WORDING
What kind of business or industry was this? Describe	c. What kind of business or industry was this?
the activity at the location where employed. (For	Include the main activity, product, or service
example: hospital, newspaper publishing, mail order	provided at the location where employed. (For
house, auto engine manufacturing, bank)	example: elementary school, residential
	construction)
Is this business mainly –	[60
manufacturing?	characters]
wholesale trade?	
retail trade?	d. Was this mainly
other (agriculture, construction, service, government,	
etc.)?	manufacturing?
Milest kind of work was (name) doing at this job? (For	wholesale trade? retail trade?
What kind of work was (name) doing at this job? (For	
example: registered nurse, personnel manager, supervisor of order department, secretary, accountant)	other (agriculture, construction, service, government, etc.)?
supervisor of order department, secretary, accountantly	government, etc.):
What were (Name)'s most important activities or	e. What was (Name)'s main occupation? (For
duties? (For example: patient care, directing hiring	example: 4 th grade teacher, entry-level plumber)
policies, supervising order clerks, typing and filing,	
reconciling financial records)	
	f. Describe (Name)'s most important activities or duties. (For example: instruct and evaluate students in math and create lesson plans, assemble and install pipe sections and review building plans for work details)

INDUSTRY AND OCCUPATION

(Back to Table of Contents)

RETIREMENT INCOME

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
g. Retirement, survivor, or disability pensions. Do NOT include Social Security. Yes → \$.00 No TOTAL AMOUNT for past 12 months	Version 1 Retirement, survivor, disability payments, or retirement account withdrawals or distributions. DO NOT include Social Security or amounts rolled over into other retirement accounts. Retirement accounts include employer plans and IRA, Roth IRA, 401(k), 403(b), SEP, KEOGH, SIMPLE accounts. Yes No TOTAL AMOUNT for past 12 months Version 2 Retirement, survivor, disability payments, or retirement account withdrawals or distributions. DO NOT include amounts rolled over into other retirement accounts. Yes No TOTAL AMOUNT for past 12 months	Retirement income, pensions, survivor or disability income. Include income from a previous employer or union, or any regular withdrawals or distributions from IRA, Roth IRA, 401(k), 403(b), or other accounts specifically designed for retirement. Do not include Social Security. Yes No TOTAL AMOUNT for past 12 months	Retirement income, pensions, survivor or disability income. Include income from a previous employer or union, or any regular withdrawals or distributions from IRA, Roth IRA, 401(k), 403(b), or other accounts specifically designed for retirement. Do not include Social Security. Yes No TOTAL AMOUNT for past 12 months

2014 CURRENT WORDING	ROUND 1 ENGLISH	ROUND 2 ENGLISH	FINAL WORDING
Did <(Name)/you> receive any	Did <(Name)/you> receive any survivor or	Did <(Name)/you> receive any survivor or	Did <(Name)/you> receive any survivor or
retirement, survivor, or disability	disability income DURING THE PAST 12	disability income DURING THE PAST 12	disability income DURING THE PAST 12
pensions DURING THE PAST 12 MONTHS?	MONTHS?	MONTHS?	MONTHS?
Yes	Yes	Yes	Yes
No	No	No	No
What was the amount? (Do not include Social Security.)	What was the amount? (Do not include Social Security)	What was the amount? (Do not include Social Security)	What was the amount? (Do not include Social Security)
	Did <(Name)/you> receive any retirement income from a previous employer or union or income from retirement accounts such as a 401(k), 403(b), IRA, or other accounts designed specifically for retirement savings DURING THE PAST 12 MONTHS? DO NOT include amounts rolled over into other retirement accounts.	Did <(Name)/you> receive a pension or any retirement income from a previous employer or union, or any regular withdrawals or distributions from retirement accounts such as a 401(k), 403(b), IRA, Roth IRA, or other accounts designed specifically for retirement DURING THE PAST 12 MONTHS?	Did <(Name)/you> receive a pension or any retirement income from a previous employer or union, or any regular withdrawals or distributions from retirement accounts such as a 401(k), 403(b), IRA, Roth IRA, or other accounts designed specifically for retirement DURING THE PAST 12 MONTHS?
	What was the amount? (Do not include Social Security)	What was the amount? (Do not include Social Security)	What was the amount? (Do not include Social Security)

2014 CURRENT WORDING	FINAL WORDING
Did (Name) receive any retirement, survivor, or disability	Did (Name) receive any survivor or disability
pensions during the PAST 12 MONTHS? Do NOT include	income DURING THE PAST 12 MONTHS?
Social Security.	Yes
Yes	No
No	
	What was the amount?
What was the amount?	(Do not include Social Security)
TOTAL AMOUNT for	
past 12 months	Did (Name) receive a pension or any
	retirement income from a previous
	employer or union, or any regular
	withdrawals or distributions from
	retirement accounts such as a 401(k), 403(b),
	IRA, Roth IRA, or other accounts designed
	specifically for retirement DURING THE PAST
	12 MONTHS?
	What was the amount?
	(Do not include Social Security)

RETIREMENT INCOME

CONTENT FOLLOW UP VERSION

2014 CURRENT WORDING	FINAL WORDING
Did <(Name)/you> receive any retirement, survivor, or disability pensions DURING THE PAST 12 MONTHS? Yes No What was the amount? (Do not include Social Security.)	Did (you/ name) receive any pension income from a previous employer or union, (other than Social Security or VA benefits) DURING THE PAST 12 MONTHS? PLEASE DO NOT INCLUDE ANNUITIES OR DISTRIBUTIONS OR WITHDRAWALS FROM IRAs, 401(k)s, OR SIMILAR ACCOUNTS! Yes No What type of pension did (you/name) have DURING THE PAST 12 MONTHS? Did (you/name) have a READ EACH CATEGORY! Enter all that apply, separate using the space bar or a comma. Probe for all sources, anything else? Company Pension Union Pension Federal Government Pension U.S. Military Pension U.S. Military Pension U.S. Military Pension U.S. Railroad Retirement Other What was the source of (your/name's) pension income? Specify other source of pension income Enter "Other Pension" if the answer is "Don't Know" How much did (name/you) receive in [(ACCOUNT TYPE) FILL FROM PENTYPE or PENOTH)]DURING THE PAST 12 MONTHS? Enter dollar amount ****repeat for first and second pension type reported****

Did (you/ name) receive any income from an annuity DURING THE PAST 12 MONTHS? No How much did (name/you) receive in annuities DURING THE PAST 12 MONTHS? **Enter dollar amount** Did (you/ name) have any retirement accounts such as a 401(k), 403(b), IRA, or other account designed specifically for retirement savings **DURING** THE PAST 12 MONTHS? Yes No What type of retirement account (did you/ NAME) have? Did (you/he/she) have a ... **READ EACH CATEGORY!** Enter all that apply, separate using the space bar or a comma. Probe for all sources, anything else? 401(k) 403(b) Roth IRA KEOGH plan ("KEE-OH") SEP plan (Simplified Employee Pension) Another type of retirement account What was the source of (name's/your) retirement account? Specify other source of retirement account Enter "Other Retirement Account" if the answer is "Don't Know" Did (you/NAME) withdraw any money or receive a distribution from (your/his/her) [(ACCOUNT TYPE) FILL IN FROM RETTYPE or RETOTH] account **DURING THE PAST 12 MONTHS?** (IF AGE 70+ ADD: including distributions you may have been required to take?) Yes No

How much was (name's/your) withdrawal or distribution from [(ACCOUNT TYPE) FILL FROM RETTYPE or RETOTH)] DURING THE PAST 12 MONTHS? Enter dollar amount Did [you/name] re-invest or "roll over" any of the money into an IRA or some other kind of retirement plan DURING THE PAST 12 MONTHS? Yes No How much did (you/name) re-invest or "roll over" into an IRA or some other kind of retirement plan DURING THE PAST 12 MONTHS? Enter dollar amount Do/Does (you/name) plan to re-invest or roll over any of the money? Yes No
Yes No How much did (you/name) re-invest or "roll over" into an IRA or some other kind of retirement plan DURING THE PAST 12 MONTHS? Enter dollar amount Do/Does (you/name) plan to re-invest or roll over any of the money? Yes
dollar amount ————— Do/Does (you/name) plan to re-invest or roll over any of the money? Yes
Yes
How much do/does (you/name) plan to re-invest or "roll over" into an IRA or some other kind of retirement plan? Enter dollar amount
****repeat for first and second retirement account type reported****