**2022 ANNUAL SOCIAL AND ECONOMIC SUPPLEMENT**

**CPS FIELD REPRESENTATIVE / CATI INTERVIEWER**

**ITEMS BOOKLET**

**This document does not contain any Title 13 data or other Personally Identifiable Information. All data are fictitious and any resemblance to actual data is coincidental. Consistent with Field Division Policy, any names referenced in practice interviews or other exercises are not meant to refer to any actual businesses, schools, group quarters, or persons, especially any current or former Census Bureau employees.**

**Table of Contents**

[1 BASIC CPS ITEMS 3](#_Toc83912779)

[1.1 MOVER ITEMS 3](#_Toc83912780)

[1.2 FAMILY INCOME 3](#_Toc83912781)

[1.3 INCDKR 3](#_Toc83912782)

[2 INTRODUCTION and WORK EXPERIENCE 4](#_Toc83912783)

[3 EARNED INCOME 11](#_Toc83912784)

[4 INCOME SOURCES 24](#_Toc83912785)

[4.1 UNEMPLOYMENT AND WORKERS COMPENSATION (Source) 26](#_Toc83912786)

[4.2 SOCIAL SECURITY (Source) 28](#_Toc83912787)

[4.3 SOCIAL SECURITY FOR CHILDREN (Source) 29](#_Toc83912788)

[4.4 SUPPLEMENTAL SECURITY INCOME (SSI) (Source) 30](#_Toc83912789)

[4.5 SUPPLEMENTAL SECURITY INCOME FOR CHILDREN (SSI) (Source) 31](#_Toc83912790)

[4.6 DISABILITY INCOME (Source) 32](#_Toc83912791)

[4.7 VETERANS PAYMENTS (Source) 34](#_Toc83912792)

[4.8 SURVIVOR BENEFITS (Source) 35](#_Toc83912793)

[4.9 PUBLIC ASSISTANCE (Source) 36](#_Toc83912794)

[4.10 FOOD STAMPS/SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) (Source) 38](#_Toc83912795)

[4.11 PENSIONS (Source) 38](#_Toc83912796)

[4.12 ANNUITIES (Source) 40](#_Toc83912797)

[4.13 RETIREMENT ACCOUNTS (Source) 40](#_Toc83912798)

[4.14 INCOME-EARNING ACCOUNTS OUTSIDE OF RETIREMENT (Source) 41](#_Toc83912799)

[4.15 PROPERTY INCOME (Source) 45](#_Toc83912800)

[4.16 EDUCATION ASSISTANCE (Source) 45](#_Toc83912801)

[4.17 CHILD SUPPORT (Source) 46](#_Toc83912802)

[4.18 REGULAR FINANCIAL ASSISTANCE (Source) 47](#_Toc83912803)

[4.19 OTHER MONEY INCOME (Source) 47](#_Toc83912804)

[5 INCOME AMOUNTS 48](#_Toc83912805)

[5.1 UNEMPLOYMENT AND WORKER’S COMPENSATION (Amounts) 48](#_Toc83912806)

[5.2 SOCIAL SECURITY (Amounts) 56](#_Toc83912807)

[5.3 SOCIAL SECURITY DISABILITY (Amounts) 58](#_Toc83912808)

[5.4 SOCIAL SECURITY FOR CHILDREN (Amounts) 61](#_Toc83912809)

[5.5 SUPPLEMENTAL SECURITY INCOME (SSI) (Amounts) 63](#_Toc83912810)

[5.6 SUPPLEMENTAL SECURITY INCOME FOR CHILDREN (Amounts) 65](#_Toc83912811)

[5.7 DISABILITY INCOME (Amounts) 66](#_Toc83912812)

[5.8 VETERANS PAYMENTS (Amounts) 70](#_Toc83912813)

[5.9 SURVIVOR BENEFITS – Amounts 74](#_Toc83912814)

[5.10 PUBLIC ASSISTANCE (Amounts) 80](#_Toc83912815)

[5.11 FOOD STAMPS/SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) (Amounts) 82](#_Toc83912816)

[5.12 PENSIONS (Amounts) 84](#_Toc83912817)

[5.13 ANNUITIES (Amounts) 87](#_Toc83912818)

[5.14 WITHDRAWALS/DISTRIBUTIONS FROM RETIREMENT PLAN (Amounts) 89](#_Toc83912819)

[5.15 INTEREST/DIVIDENDS ON RETIREMENT ACCOUNTS (Amounts) 94](#_Toc83912820)

[5.16 INTEREST/DIVIDENDS ON NON-RETIREMENT ACCOUNTS (Amounts) 96](#_Toc83912821)

[5.17 PROPERTY INCOME (Amounts) 98](#_Toc83912822)

[5.18 EDUCATIONAL ASSISTANCE (Amounts) 101](#_Toc83912823)

[5.19 CHILD SUPPORT (Amounts) 103](#_Toc83912824)

[5.20 REGULAR FINANCIAL ASSISTANCE (Amounts) 105](#_Toc83912825)

[5.21 OTHER MONEY INCOME (Amounts) 107](#_Toc83912826)

[5.22 CONTRIBUTIONS TO RETIREMENT ACCOUNTS (Amounts) 109](#_Toc83912827)

[6 HEALTH INSURANCE 110](#_Toc83912828)

[6.1 INTRODUCTION TO HEALTH INSURANCE SECTION 110](#_Toc83912829)

[6.2 CURRENT COVERAGE 110](#_Toc83912830)

[6.3 TYPE OF COVERAGE 111](#_Toc83912831)

[6.4 MONTHS OF COVERAGE 117](#_Toc83912832)

[6.5 OTHER HOUSEHOLD MEMBERS 120](#_Toc83912833)

[6.6 ADDITIONAL PLANS 121](#_Toc83912834)

[6.7 EMPLOYER-SPONSORED INSURANCE OFFERS AND TAKEUP 122](#_Toc83912835)

[6.8 HEALTH STATUS 123](#_Toc83912836)

[6.9 MEDICAL EXPENDITURES 124](#_Toc83912837)

[7 EMPLOYER’S PENSION PLAN 125](#_Toc83912838)

[8 LOW INCOME ITEMS 126](#_Toc83912839)

[8.1 SCHOOL LUNCHES 126](#_Toc83912840)

[8.2 PUBLIC HOUSING 126](#_Toc83912841)

[8.3 WOMEN, INFANTS, AND CHILDREN NUTRITION PROGRAM (WIC) 127](#_Toc83912842)

[8.4 ENERGY ASSISTANCE 127](#_Toc83912843)

[9 MIGRATION 129](#_Toc83912844)

[9.1 1-YEAR MIGRATION 129](#_Toc83912845)

[10 SUPPLEMENTAL POVERTY MEASURE 134](#_Toc83912846)

[10.1 PROPERTY VALUE/PRESENCE OF MORTGAGE 134](#_Toc83912847)

[10.2 CHILD CARE 135](#_Toc83912848)

[10.3 CHILD SUPPORT PAID 136](#_Toc83912849)

[10.4 STIMULUS/ADVANCE CHILD TAX CREDIT PAYMENTS 138](#_Toc83912850)

[10.5 EMERGENCY BROADBAND DISCOUNT PROGRAM 138](#_Toc83912851)

# BASIC CPS ITEMS

## MOVER ITEMS

**HH32b**

**Did (you/name of reference person) live at this address during the week of November 19, 2021?**

1 Yes

2 No

**HH32d**

**Did any of the following household members live here during the week of**

**November 19, 2021?**

1. Yes
2. No

## FAMILY INCOME

**S\_FAMINC**

**Which category represents the total combined income of all members of this FAMILY during the past 12 months?**

**This includes money from jobs, net income from business, farm or rent, pensions, dividends, interest, social security payments and any other money income received by members of this family who are 15 years of age or older?**

1 Less than $5,000 9 30,000 to 34,999

2 5,000 to 7,499 10 35,000 to 39,999

3 7,500 to 9,999 11 40,000 to 49,999

4 10,000 to 12,499 12 50,000 to 59,999

5 12,500 to 14,999 13 60,000 to 74,999

6 15,000 to 19,999 14 75,000 to 99,999

7 20,000 to 24,999 15 100,000 to 149,000

8 25,000 to 29,999 16 150,000 to more

## INCDKR

**Is the combined income of all members of this FAMILY during the past 12 months above or below $75,000?**

1. Above
2. Below

# INTRODUCTION and WORK EXPERIENCE

**Pr\_incom**

?[F1] Importance of responding

 Wording of introduction is optional.

**The questions you just answered were about your job and economic status last week. The next set of questions ask about your job and economic status last year.**

1 Enter 1 to Continue

**Q29a**

**Did (name/you) work at a job or business at any time during 2021?**

1. Yes
2. No

**Q29b**

**Did (you/he/she) do any temporary, part-time, or seasonal work even**

**for a few days during 2021?**

 Include any Military Reserves or National Guard work.

1. Yes
2. No

**Q30**

**Even though (name/you) did not work in 2021, did (you/he/she) spend any time trying to find a job or on layoff?**

1. Yes
2. No

**Q31**

**How many different weeks (was/were) (name/you) looking for work or on layoff from a job?**

 (01-52) Number of weeks

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q32**

**What was the main reason (you/he/she) did not work in 2021?**

 Read categories if necessary

1. Ill, or disabled and unable to work
2. Retired
3. Taking care of home or family
4. Going to school
5. Could not find work
6. Doing something else

**Q33**

**During 2021 in how many weeks did (name/you) work even for a few hours?  
Include paid vacation and sick leave as work.**

 (01-52) Number of weeks

 Enter 97 if respondent can only answer in months

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q33mon**

 Enter number of months worked

(1-12)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q33ver**

**Then (name/you) worked about (number) weeks. Is that correct?**

1. Yes

2 No – back to Q33 and obtain estimate

**Q35**

**Did (name/you) lose any full weeks of work in 2021 because (you/he/she)**

**(were/was) on layoff from a job or lost a job?**

 Number of weeks worked in 2021: (number)

1. Yes

2 No

7 Mistake made in number of weeks worked last year - Specify in Q35SP

**Q35SP**

Specify mistake made in number of weeks worked last year

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q36**

**You said (name/you) worked about (number) (week/weeks).**

**How many OF THE REMAINING (number) WEEKS (was/were)  
(you/he/she) looking for work or on layoff from a job?**

Enter 0 for none

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q37**

**Were the (number) weeks (name/you) (was/were) looking for work or on layoff all in one stretch?**

1. Yes – one stretch
2. No – two stretches
3. No – 3 or more stretches

**Q38**

**What was the main reason (name/you) (was/were) not working or looking for work in the remaining weeks of 2021?**

 Read list only if respondent is having difficulty answering the question

1. Ill, or disabled and unable to work
2. Taking care of home or family
3. Going to school
4. Retired
5. No work available
6. Other   (Specify - Q38sp)

**Q38sp**

 Enter verbatim response

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q39**

**For how many employers did (name/you) work in 2021?  
If more than one at the same time, only count it as one employer.**

1. One
2. Two
3. Three or more

**Q41**

**In the (one week/weeks) that (name/you) worked, how many hours did (you/he/she) (work that week?/usually work per week?)**

 Enter number of hours

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q43**

**During 2021, were there one or more weeks in which (name/you) worked less than 35 hours?**

**Exclude time off with pay because of holidays, vacation, days off, or sickness.**

1. Yes
2. No

**Q44**

**In the weeks that (name/you) worked, how many weeks did (name/you) work less than 35 hours in 2021?**

 Number of weeks worked in 2021: (number)  
(Number of weeks was reported in item Q33)

(1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q45**

**What was the main reason (name/you) worked less than 35 hours per week?**

 Read list only if respondent is having difficulty answering the question

1. Could not find a full time job
2. Wanted to work part time or only able to work part time
3. Slack work or material shortage
4. Other reason

**Q46**

**What was (name's/your) longest job during 2021?**

**Was it:**

(IO1NAM:) (name of employer)

(IO1IND:) (kind of business or industry)

(IO1OCC:) (occupation)

(IO1DT:) (duties)

 CLASS OF WORKER: (PRIVATE/ FEDERAL GOVERNMENT/ STATE GOVERNMENT/ LOCAL GOVERNMENT/WORKING WITHOUT PAY IN FAMILY BUS./ SELF EMPLOYED--INCORPORATED/ SELF EMPLOYED--UNINCORPORATED)

1. Same as listed
2. Different job

**Q47a**

**For whom did (name/you) work (?/at) (blank/(your/his/her) (blank/longest job during 2021?))**

 Name of Company, business, organization or other employer

(blank/IO1NAM:) (entry)

The current employer is pre-filled in the Form Pane below. Press ENTER if Same)

(blank/If longest job last year is military job, enter Armed Forces)

(blank/ Enter N for no work done at all during 2021)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q47b**

**What kind of business or industry is this?**

For example: TV and radio manufacturing, retail shoe store, farm

(blank/IO1IND:) (entry)

The current business or industry type is pre-filled in the Form Pane below. Press ENTER if Same)

(blank/If longest job last year is military job, enter NA)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q47b1**

**Is this business or organization mainly manufacturing, retail trade, wholesale trade, or something else?**

(blank/IO1MFG:) (entry)

The current business or organization type is pre-filled in the Form Pane below. Press ENTER if Same)

(blank/If longest job last year is military job, enter 4)

1. Manufacturing
2. Retail trade
3. Wholesale trade
4. Something else

**Q47c**

**What kind of work (was/were) (you/he/she) doing?**

For example: Electrical Engineer, Stock Clerk, Typist

(blank/IO1OCC:) (entry)

The current occupation is pre-filled in the Form Pane below. Press ENTER if Same)

(blank/If longest job last year is military job, enter Armed Forces)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q47d1**

**What were (your/his/her) most important activities or duties?**

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

(blank/IO1DT:) (entry)

The current job description is pre-filled in the Form Pane below. Press ENTER if Same)

(blank/If longest job last year is military job, enter NA)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q47d2**

**What were (your/his/her) most important activities or duties?**

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

(blank/IO1DT:) (entry)

The current job description is pre-filled in the Form Pane below. Press ENTER if Same)

(blank/If longest job last year is military job, enter NA)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q47E1**

 Ask Only If Necessary

**(Were/Was) (you/he/she) employed by government, by a PRIVATE company, a nonprofit organization, or (was/were) (you/he/she) self-employed or working in a family business?**

1. Government
2. Private for profit company
3. Non profit organization including tax exempt and charitable organizations
4. Self employed
5. Working in family business

**Q47E1a**

**Would that be the federal, state, or local government?**

1. Federal
2. State
3. Local (county, city, township)

**Q47E1b**

**Was this business incorporated?**

1. Yes
2. No

**Q47E1c**

**(Were/Was) (you/name) the owner of the business?**

1. Yes
2. No

**Q4788**

**Counting all locations where (this employer/(name/you)) (operates/operate), what is the total number of persons who work for ((name's/your) employer)/name/you))?**

Read categories if necessary

1. under 10
2. 10-49
3. 50-99
4. 100-499
5. 500-999
6. 1,000+

# EARNED INCOME

The Earnings and Income question series include range follow-up questions presented anytime a respondent doesn’t know or refuses to provide an exact dollar amount for a source they (or someone in the household) indicates as having received. Follow-up questions allow respondents that do not feel comfortable giving exact dollar values to report an income range. There are three sets of categories used for the income range follow-up questions: high-range, mid-range, and low-range. The income range used in the follow-up range questions depends on the source of the income. See Attachment A to this items booklet for the three levels of income range follow up questions. See Attachment B for a table that displays the income source and the range level used for the follow-up questions.

**Q48aa**

**How much did (name/you) earn from this employer before taxes and other deductions during 2021?**

 Enter dollar amount

 Enter 0 for none

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48aarn1 Ask only if the respondent “Doesn’t know” or ‘Refused” Q48aa**

**Could you tell me if (name/you) earned**

**less than $45,000**

**between $45,000 and $60,000**

**or over $60,000**

**for the TOTAL yearly amount from this employer before taxes and other deductions during 2021?**

1. Less than $45,000
2. Between $45,000 and $60,000
3. Over $60,000

**Q48aarn2**

**Did (name/you) earn**

**less than $15,000**

**between $15,000 and $30,000**

**or over $30,000**

**from this employer during 2021?**

1. Less than $15,000
2. Between $15,000 and $30,000
3. Over $30,000

**Q48aap**

 Read if necessary

**Is this a weekly, every other week, twice a month, monthly, or yearly amount?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly

7 Yearly

**Q48a1**

**For how many (weekly/every other week/twice a month/monthly) pay periods did (name/you) earn (fill from Q48aa) from this employer in 2021?**

 (1-12/1-24/1-26/1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48aC2**

 Do not read to the respondent.

 The annual rate appears out of range. The total annual earnings entered is (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q48aV**

**According to my calculations (name/you) earned (total) altogether from this employer in 2021 before deductions. Does that sound about right?**

1. Yes
2. No

**Q48a2**

**What is your best estimate of (name's/your) correct total amount of earnings from this employer during 2021 before deductions?**

 PREVIOUS ENTRIES: Q48aa: (amount)

Q48aap: (periodicity)

Q48a1: (number of pay periods)

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48a3**

**Does this amount include all tips, bonuses, overtime pay, or commissions (name/you) may have received from this employer in 2021?**

1. Yes
2. No

**Q48aad**

**How much did (name/you) earn in tips, bonuses, overtime pay, or commissions from this employer in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48aadrn1 Ask only if the respondent “Doesn’t know” or “Refused” Q48aad**

**Could you tell me if (name/you) earned**

**less than $1,000**

**between $1,000 and $3,000**

**or over $3,000**

**in tips, bonuses, overtime pay, or commissions from this employer during 2021?**

1. Less than $1,000
2. Between $1,000 and $3,000
3. Over $3,000

**Q48aadrn2**

**Did (name/you) earn**

**less than $100**

**between $100 and $500**

**or over $500**

**in tips, bonuses, overtime pay, or commissions from this employer during 2021?**

1. Less than $100
2. Between $100 and $500
3. Over $500

**Q48b**

**What were (name's/your) net earnings from this business/farm after expenses during 2021?**

 If response is "Broke Even" then enter 1

 If response is “none” or if respondent does not own a business or farm, then enter "0"

 If response is "Lost Money" press Enter

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48b\_char**

 Enter “L” for Lost Money

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48BL**

 Enter amount of money lost in 2021

 Enter annual amount only

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48brn1 Ask only if the respondent “Doesn’t know” or “Refused” Q48b.**

**Could you please tell me if (name/you) earned**

**less than $45,000**

**between $45,000 and $60,000**

**or over $60,000**

**for the TOTAL yearly amount from this business/farm after expenses during 2021?**

1. Less than $45,000
2. Between $45,000 and $60,000
3. Over $60,000

**Q48brn2**

**Did (name/you) earn**

**less than $15,000**

**between $15,000 and $30,000**

**or over $30,000**

**from this business/farm after expenses during 2021?**

1. Less than $15,000
2. Between $15,000 and $30,000
3. Over $30,000

**Q48bp**

**Is this a weekly, every other week, twice a month, monthly, quarterly, or yearly amount?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly
5. Quarterly
6. Yearly

**Q48B1A**

 Do not read to the respondent.

 The annual rate appears out of range. The total annual business loss entered is (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q48B1B**

 Do not read to the respondent.

 The annual rate appears out of range. The total annual business income entered is (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q48b2**

**What is your best estimate of (name's/your) ANNUAL net earnings from this business/farm after expenses in 2021?**

 PREVIOUS ENTRIES:  Q48b : (amount)

Q48bp: (periodicity)

 Enter dollar amount

**Q48b2L**

**What is your best estimate of (name's/your) ANNUAL net LOSS from this business/farm after expenses in 2021?**

 PREVIOUS ENTRIES:  Q48bL: (amount)

Q48bp: (periodicity)

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48b3**

**What were (name's/your) net earnings from this business/farm during the FIRST quarter of 2021?**

 If response is "Broke Even" then enter 1

 Enter "0" for None

 If response is “Lost Money” press enter

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48b3\_char**

 Enter "L" for Lost Money

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48B3L**

 Enter amount of money lost in the first quarter of 2021.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48b4**

**What were (name's/your) net earnings from this business/farm during the SECOND quarter of 2021?**

 If response is "Broke Even" then enter 1

 Enter "0" for None

 If response is "Lost Money" press enter

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48b4\_char**

 Enter "L" for Lost Money

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48B4L**

 Enter amount of money lost in the second quarter of 2021.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48b5**

**What were (name's/your) net earnings from this business/farm during the THIRD quarter of 2021?**

 If response is "Broke Even" then enter 1

 Enter "0" for None

 If response is "Lost Money" press enter

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48b5\_char**

 Enter "L" for Lost Money

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48B5L**

 Enter amount of money lost in the third quarter of 2021.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48b6**

**What were (name's/your) net earnings from this business/farm during the FOURTH quarter of 2021?**

 If response is "Broke Even" then enter 1

 Enter "0" for None

 If response is "Lost Money" press enter

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48b6\_char**

 Enter "L" for Lost Money

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48B6L**

 Enter amount of money lost in the fourth quarter of 2021.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48b7**

**Does this amount include all tips, bonuses, overtime pay, or commissions (name/you) may have received from this business in 2021?**

1. Yes
2. No

**Q48bad**

**How much did (name/you) earn in tips, bonuses, overtime pay, or commissions**

**in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q48badrn1 Ask only if the respondent “Doesn’t know” or “Refused” Q48bad.**

**Could you tell me if (name/you) earned**

**less than $1,000**

**between $1,000 and $3,000**

**or over $3,000**

**in tips, bonuses, overtime pay, or commissions from this business during 2021?**

1. Less than $1,000
2. Between $1,000 and $3,000
3. Over $3,000

**Q48badrn2**

**Did (name/you) earn**

**less than $100**

**between $100 and $500**

**or over $500**

**in tips, bonuses, overtime pay, or commissions during 2021?**

1. Less than $100
2. Between $100 and $500
3. Over $500

**Q49a**

**Did (name/you) earn money from any other work (you/he/she) did during 2021?**

1. Yes
2. No

**Q49b1d**

**How much did (name/you) earn from all other employers before taxes and other deductions during 2021?**

 Enter dollar amount

 Enter “0” for None

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q49b1drn1 Ask only if the respondent “Doesn’t know” or “Refused” Q48b1d.**

**Could you please tell me if (name/you) earned**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**from all other employers before taxes and other deductions during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q49b1drn2**

**Did (name/you) earn**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**from all other employers before taxes and other deductions during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q49b1p**

 Read if necessary

**Is this a weekly, every other week, twice a month, monthly, or yearly amount?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly

7 Yearly

**Q49B11**

**For how many (weekly/every other week/twice a month/monthly) pay periods did (name/you) earn (fill from Q49b1d) from all other employers in 2021?**

 (1-12/1-24/1-26/1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q49B1C**

 Do not read to the respondent.

 The total annual earnings entered from all other employers is (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q49B1V**

**According to my calculations (name/you) earned (total) altogether from all other employers in 2021.**  **Does that sound about right?**

1. Yes
2. No

**Q49B12**

**What is your best estimate of (name's/your) correct total amount of earnings from all other employers during 2021?**

 PREVIOUS ENTRIES:  Q49b1d: (amount)

Q49b1p: (periodicity)

Q49b11: (number of pay periods)

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q49b13**

**Does this amount include all tips, bonuses, overtime pay, or commissions (name/you) may have received from all other employers in 2021?**

1. Yes
2. No

**Q49B1A**

**How much did (name/you) earn in tips, bonuses, overtime pay, or commissions from all other employers in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q49B1ARN1 Ask only if the respondent “Doesn’t know” or “Refused” Q49B1A.**

**Could you tell me if (name/you) earned**

**less than $1,000**

**between $1,000 and $3,000**

**or over $3,000**

**in tips, bonuses, overtime pay, or commissions from all other employers in 2021?**

1. Less than $1,000 (proceed to **Q49B1ARN2**)
2. Between $1,000 and $3,000
3. Over $3,000

**Q49B1ARN2**

**Did (name/you) earn**

**less than $100**

**between $100 and $500**

**or over $500**

**in tips, bonuses, overtime pay, or commissions from all other employers in 2021?**

1. Less than $100
2. Between $100 and $500
3. Over $500

**Q49b2**

**How much did (name/you) earn from (blank/any other businesses of) (your/his/her) (own/own business) after expenses?**

 If response is "Broke Even" then enter 1

 Enter "0" for None

 If response is "Lost Money" press enter

 Enter annual amount only

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q49b2rn1 Ask only if the respondent “Doesn’t know” or “Refused” Q49b2**

**Could you tell me if (name/you) earned**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**from (blank/any other businesses of) (your/his/her) (own/own business) after expenses?**

1. Less than $10,000 (proceed to **Q49b2rn2**)
2. Between $10,000 and $20,000
3. Over $20,000

**Q49b2rn2**

**Could you tell me if (name/you) earned**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**from (blank/any other businesses of) (your/his/her) (own/own business) after expenses?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q49b2\_char**

 Enter "L" for Lost Money

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q49b3**

  Enter annual amount lost only

\_\_\_\_\_\_\_\_\_\_\_\_

**Q49b4**

**How much did (name/you) earn from (your/his/her) farm after expenses?**

 If response is "Broke Even" then enter 1

 Enter "0" for None

 If response is "Lost money" press enter

 Enter annual amount only

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q49b4rn1 Ask only if the respondent “Doesn’t know” or “Refused” Q49b4.**

**Could you tell me if (name/you) earned**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**from (your/his/her) farm after expenses?**

1. Less than $10,000 (proceed to **Q49b4rn2**)
2. Between $10,000 and $20,000
3. Over $20,000

**Q49b4rn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**from (your/his/her) farm after expenses?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q49b4\_char**

 Enter "L" for Lost Money

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q49b5**

 Enter annual amount lost only

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# INCOME SOURCES

In the ASEC income section, the order of the questions changes based on the household composition (Low-income, Householder or Spouse Aged 62 or Older, or Default); see chart on the following page. All low-income transfer program questions are asked in each interview regardless of household family income.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Default** | | **Low Income** | | **Householder or Spouse**  **62 Years +** | |
| Earnings- Person Level | | Earnings- Person Level | | Earnings- Person Level | |
| 1 | Unemployment/Workers Compensation | 1 | Unemployment/Workers Compensation | 1 | Unemployment/Workers Compensation |
| 2 | Social Security/SS for Children | 7 | Public Assistance / TANF | 2 | Social Security/SS for Children |
| 3 | Supplemental Security Income (SSI)/SSI Children | 8 | Food Stamps (SNAP) | 3 | Supplemental Security Income (SSI)/SSI Children |
| 4 | Disability | 2 | Social Security/SS for Children | 4 | Disability |
| 5 | Veterans | 3 | Supplemental Security Income (SSI)/SSI Children | 5 | Veterans |
| 6 | Survivor Benefits | 4 | Disability | 6 | Survivor Benefits |
| 7 | Public Assistance / TANF | 5 | Veterans | 9 | Pensions |
| 8 | Food Stamps (SNAP) | 6 | Survivor Benefits | 10 | Annuities |
| 9 | Pensions | 9 | Pensions | 11 | Retirement Accounts (within) –Withdrawals or distributions |
| 10 | Annuities | 10 | Annuities | 12 | Other Income Earning Assets (outside of retirement) |
| 11 | Retirement Accounts (within) – Withdrawals or distributions | 11 | Retirement Accounts (within) – Withdrawals or distributions | 13 | Property Income |
| 12 | Other Income Earning Assets (outside of retirement) | 12 | Other Income Earning Assets (outside of retirement) | 7 | Public Assistance / TANF |
| 13 | Property Income | 13 | Property Income | 8 | Food Stamps (SNAP) |
| 14 | Education Assistance | 14 | Education Assistance | 14 | Education Assistance |
| 15 | Child Support | 15 | Child Support | 15 | Child Support |
| 16 | Financial Assistance from friends or relatives | 16 | Financial Assistance from friends or relatives | 16 | Financial Assistance from friends or relatives |
| 17 | Other Income | 17 | Other Income | 17 | Other Income |
| \* | Health Insurance | | | | |
| 18 | Employers Pension Plan | | | | |
| 19 | School Lunches- no amount collection | | | | |
| 20 | Public Housing- no amount collection | | | | |
| 21 | WIC- no amount collection | | | | |
| 22 | Energy Assistance | | | | |

## UNEMPLOYMENT AND WORKERS COMPENSATION (Source)

**Q51A1**

**At any time during 2021 did (you/anyone in the household) receive any State or Federal unemployment compensation?**

 Do NOT include federal stimulus payments due to the Coronavirus pandemic.

1 Yes

2 No

**Q51A1b**

 Read only if necessary

**Who received State or Federal unemployment compensation?**

* Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**Q51A2**

**At any time during 2021 did (you/anyone in the household) receive any Supplemental Unemployment Benefits (SUB)?**

 Do NOT include federal stimulus payments due to the Coronavirus pandemic.

1 Yes

2 No

**Q51A2b**

 Read only if necessary

**Who received Supplemental Unemployment Benefits?**

* Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**Q51A3**

**At any time during 2021 did (you/anyone in the household) receive any Union Unemployment or Strike Benefits?**

 Do NOT include federal stimulus payments due to the Coronavirus pandemic.

1 Yes

2 No

**Q51A3b**

 Read only if necessary

**Who received Union Unemployment or Strike Benefits?**

* Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**Q52A**

**During 2021 did (you/anyone in the household) receive any Worker’s Compensation payments or other payments as a result of a job related injury or illness?**

* **Exclude sick pay and/or disability retirement**.
* Do NOT include federal stimulus payments due to the Coronavirus pandemic.

1 Yes

2 No

**Q52Ab**

 Read only if necessary

**Who received Worker’s Compensation or payments as a result of a job related injury or illness?**

* Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

* Exclude those who received sick pay and/or disability retirement.

**Q52b**

**What was the source of (your/name’s) payments?**

1 State Worker's Compensation

2 Employer or employer's insurance worker’s compensation

3 Own insurance worker’s compensation

4 Other

**Q52Cs1**

* Specify other source from workers compensation/insurance
* Enter "Worker’s Compensation" if the answer is "Don't Know"

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## SOCIAL SECURITY (Source)

**Q56a**

**During 2021 did (you/ anyone in this household) receive any Social Security payments from the U.S. Government?**

1 Yes

2 No

**Q56b**

 Read only if necessary

**Who received Social Security payments either for themselves or as combined payments with other family members?**

* Enter Line Number Of Parent Or Guardian For Payments Made To Children Under Age 15
* Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone else?

**SSR**

**What were the reasons (name/you) (was/were) getting Social Security in 2021?**

 Mark all that apply, separate using the space bar or a comma.

 Probe: Any Other Reason?

1. Retired
2. Disabled
3. Widowed
4. Spouse
5. Surviving child
6. Dependent child
7. On behalf of surviving, dependent, or disabled children
8. Other

**SSRs**

 Specify other reason

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SSC**

**Which children under age 19 were receiving Social Security in 2021?**

 Probe: Anyone Else?

 Enter all that apply, separate by commas.

https://adb.dsd.census.gov/lib/ckeditor/plugins/diamond/small_diamond.gif Enter 96 for All People  https://adb.dsd.census.gov/lib/ckeditor/plugins/diamond/small_diamond.gif Enter 0 for None

**SSCR**

**What were the reasons (Child’s name/the children) (was/were) getting Social Security in 2021?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Any Other Reason?

1. Disabled child/children
2. Surviving child/children
3. Dependent child/children
4. Other

**SSDIa1**

**Did (name/you) receive (your/his/her) first Social Security Disability payment in 2021?**

1. Yes
2. No

## SOCIAL SECURITY FOR CHILDREN (Source)

**Q56f**

**Did anyone in this household receive any Social Security income in 2021 that we have not already counted on behalf of children in this household?**

 Includes all children under 19 years of age

1 Yes

2 No

**Q56g**

Read only if necessary

**Who received these Social Security payments?**

 Enter line number of parent or guardian  
 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**CSS**

**Which children under age 19 were receiving Social Security in 2021?**

 Probe: Anyone Else?

 Enter all that apply, separate using the space bar or a comma.

 Enter 0 if none listed

 Enter 96 for all persons

**CRSS**

**What were the reasons (Child's name/the children) (was/were) getting Social Security in 2021?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Any Other Reason?

1. Disabled child/children
2. Surviving child/children
3. Dependent child/children
4. Other

## SUPPLEMENTAL SECURITY INCOME (SSI) (Source)

**Q57a**

**During 2021 did (you/ anyone in this household) receive:**

**any SSI payments, that is, Supplemental Security Income?**

 Note: SSI are assistance payments to low-income aged, blind and disabled persons, and come from state or local welfare offices, the Federal government, or both.

1 Yes

2 No

**Q57b**

 Read only if necessary

**Who received SSI?**

 Supplemental Security Income

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**SSIR**

**What were the reasons (name/you) (was/were) getting Supplemental Security Income in 2021?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Any Other Reason?

1. Disabled
2. Blind
3. On behalf of a disabled child
4. On behalf of a blind child
5. Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## SUPPLEMENTAL SECURITY INCOME FOR CHILDREN (SSI) (Source)

**Q57d**

**Did anyone in this household receive any Supplemental Security Income in 2021 that we have not already counted on behalf of children in this household?**

 Includes all children under 18 years of age

 SSI previously reported will appear here

LN  Name  Amount for Q57C amount

1 Yes

2 No

**Q57e**

 Read only if necessary

**Who received these Supplemental Security Income payments?**

 Enter line number of parent or guardian

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**RSSI**

**What were the reasons (name/you) (was/were) getting Supplemental Security Income on behalf of children in 2021?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Any Other Reason?

1. On behalf of a disabled child/children
2. On behalf of a blind child/children
3. Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CSSI**

**Which children under age 18 were receiving Supplemental Security Income**

**in 2021?**

 Probe: Anyone Else?

 Enter all that apply, separate using the space bar or a comma.

 Enter 0 if none listed

 Enter 96 for all persons

## 4.6 DISABILITY INCOME (Source)

**Q59AR**

**At any time in 2021 (did you/did anyone in the household) have a disability or health problem which prevented (you/them) from working, even for a short time, or which limited the work (you/they) could do?**

1. Yes
2. No

**Q59b**

 Read only if necessary

**Who is that?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**Q60a**

**(Did you/Is there anyone in this household who) ever (retire or leave/ retired or left) a job for health reasons?**

1. Yes
2. No

**Q60b**

 Read only if necessary

**Who is that?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**Q61b**

**Did (you/name) receive any income in 2021 as a result of (your/his/her) health problem (other than Social Security Disability/other than VA benefits/ other than Social Security Disability or VA Benefits)?**

( If amount was reported previously as compensation from a job related injury or illness, then enter <2>. Amount previously reported in Q52CT was (amount).)

 Do not include Veterans’ payments.

1. Yes
2. No

**Q61C**

**What was the source of this income?**

 Asking About: (name) (blank/- -CURRENT RESPONDENT)

 Enter all that apply, separate using the space bar or a comma.

 Probe: Any other income related to this health condition or disability?

1. Worker’s compensation
2. Company or union disability
3. Federal Government (CIVIL SERVICE) disability
4. U.S. Military retirement disability
5. State or Local government employee disability
6. U.S. Railroad retirement disability
7. Accident or disability insurance
8. Black Lung miner’s disability
9. State temporary sickness
10. Other or don’t know – Specify – Enter last

**Q61Cs1**

 Specify other source from health problem or disability

 Enter "Other Health Problem/Disability" if the answer is "Don't Know"

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## VETERANS PAYMENTS (Source)

**Q60A88**

**At any time during 2021 did (you/anyone in this household) receive:**

**Any Veterans’ (VA) payments?**

 Include assistance received by children of veterans

1. Yes
2. No

**Q60b\_88**

 Read only if necessary

**Who received Veterans’ (VA) payments either for themselves or as combined payments with other family members?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**Q60C8**

**What type of Veterans' payment did (name/you) receive?**

 Read list only if respondent is having difficulty answering the question.

 Enter all that apply, separate using the space bar or a comma.

 Probe: Any Other Payments?

1. Service-connected disability compensation
2. Survivor Benefits
3. Veterans’ Pension
4. Educational assistance (including assistance received by children of veterans)
5. Other Veterans’ payments \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q60D88**

**(Are/Is) (name/you) required to fill out an annual income questionnaire for the Department of Veterans' Affairs?**

1. Yes
2. No

## SURVIVOR BENEFITS (Source)

**Q58a**

**Did (you/ anyone in this household) receive any survivor benefits in 2021 such as**

**widow’s pensions, estates, trusts, insurance annuities, or any other survivor benefits**

**(other than Social Security/ other than VA benefits/ other than Social Security or**

**VA benefits)?**

1. Yes
2. No

**Q58b**

Read only if necessary

**Who received this income?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**Q58C**

**What was the source of this income?**

 Asking About: (name/name- -CURRENT RESPONDENT)

 Read list if respondent is having difficulty answering the question

 Enter all that apply, separate using the space bar or a comma.

 Probe: Any Other Source?

2 Company or union survivor pension (INCLUDE PROFIT SHARING)

1. Federal Government survivor (CIVIL SERVICE) pension
2. U.S. Military retirement survivor pension
3. State or Local government survivor pension
4. U.S. Railroad retirement survivor pension
5. Worker's compensation survivor pension
6. Black Lung survivor pension
7. Regular payments from estates or trusts
8. Regular payments from annuities or paid-up insurance policies

11 Other or don't know (SPECIFY) - ENTER LAST

**Q58Cs1**

 Specify other source of income as survivor or widow

 Enter "Survivor Benefits" if the answer is "Don't Know"

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## PUBLIC ASSISTANCE (Source)

**Q59A88**

**At any time during 2021, even for one month, did (you/ anyone in this household) receive any CASH assistance from a state or county welfare program such as**

**(State Program Name)?**

 Do NOT include federal stimulus payments due to the Coronavirus pandemic.

Include cash from: Don’t include:

Welfare or welfare to work Food stamps (SNAP)

TANF SSI

AFDC/Aid to Families Energy assistance

General Assistance WIC

Diversion payments School meals

Refugee Cash Childcare

Gen Assist Indian Affairs Education Assistance

1. Yes
2. No

**Q59A89**

**Just to be sure, in 2021, did anyone receive CASH assistance from a state or county welfare program, on behalf of CHILDREN in the household?**

 Do NOT include federal stimulus payments due to the Coronavirus pandemic.

1. Yes
2. No

**Q59b\_88**

**Who received this CASH assistance?**

 Enter line number

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**Q59C8r**

**From what type of program did (name/you) receive the CASH assistance? Was it a welfare or welfare to-work program such as (STATE PROGRAM NAME), General Assistance, Emergency Assistance, Diversion payments or some other program?**

* Enter all that apply, separate using the space bar or a comma.
* Probe: Any Other Program?
* If respondent mentions any of the following categories:

Food Stamps

SSI

Energy Assistance

School Meals

Transportation

Child Care

Rental

Educational Assistance

Note this, but explain: “Right now we are interested in CASH assistance”. Seek answers using the accepted categories

 Do NOT include federal stimulus payments due to the Coronavirus pandemic.

1. (State Program Name)/Temporary Assistance to Needy Families (TANF)/ welfare/AFDC
2. General Assistance
3. Emergency Assistance/short-term cash assistance
4. Diversion Payments
5. Refugee Cash and Medical Assistance program
6. General Assistance from Bureau of Indian Affairs, or Tribal Administered General Assistance
7. Some other program (specify)

**Q59C8s**

**What was the name of the other program?**

 Specify other source of cash assistance

 Enter "Cash" if the answer is "Don't Know"

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## FOOD STAMPS/SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) (Source)

**Q87r**

**At any time during 2021, did (you/ anyone in this household) receive benefits from SNAP (the Supplemental Nutritional Assistance Program) or the Food Stamp program, or use a SNAP or food stamp benefit card?**

* Do not include WIC benefits.

1 Yes

2 No

**Q87ar**

**At any time during 2021, even for one month, did (you/ anyone in this household) receive any food assistance from (State Program name)?**

 Do not include WIC benefits.

 Include SNAP (Supplemental Nutrition Assistance Program)

1 Yes

2 No

**Q88**

**Which of the people now living here were covered by that food assistance**

**during 2021?**

 List all household members covered by food assistance regardless of age

 Enter all that apply, separate using the space bar or a comma.

 Enter 96 for All

 Enter 0 for None

 Probe: Anyone else?

## PENSIONS (Source)

**Q62Ar**

**During 2021 did (you/ anyone in this household) receive any pension income from a previous employer or union, (other than Social Security/ other VA benefits/ other than Social Security or VA benefits)?**

 **PLEASE DO NOT INCLUDE DISTRIBUTIONS OR WITHDRAWALS FROM IRAs, 401(k)s, OR SIMILAR ACCOUNTS!**

1 Yes

2 No

**Q62b**

 Read only if necessary

**Who received pension income?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

Enter persons line number (1-16)

**Q62Cr**

**What was the source of (your/ NAME’s) pension income? Did (you/he/she) have a pension from a:**

 READ EACH CATEGORY.

 Enter all that apply, separate using the space bar or a comma.

1. Company
2. Union
3. Federal Government
4. State Government
5. Local Government
6. U.S. Military
7. Some other source

**Q62DR**

**What was the source of (name's/your) other pension income?**

Enter all that apply

Probe as needed: Who received this source?

Probe: Any Other pension income?

1. U.S. Railroad Retirement pension
2. Other source (specify) or “don’t know”

**Q62Cs1**

 Specify other source of pension income

 Enter "Other Pension" if the answer is "Don't Know"

## ANNUITIES (Source)

**Q96Ar**

**During 2021 did (you/ anyone in this household) receive any income from an annuity?**

1 Yes

2 No

**Q96Br**

 Read only if necessary

**Who received annuity income?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

## RETIREMENT ACCOUNTS (Source)

**Q97Ar**

**At any time during 2021 did (you/ anyone in this household) have any retirement accounts such as a 401(k), 403(b), IRA, or other account designed specifically for retirement savings?**

1 Yes

2 No

**Q97Br**

 Read only if necessary

**Who had such a retirement account?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**Q97Cr**

**What type of retirement account did (you/ NAME) have? Did (you/he/she) have…**

* READ EACH CATEGORY

 Enter all that apply, separate using the space bar or a comma.

|  |  |
| --- | --- |
| 1. 401(k) | 5. KEOGH plan (“KEE-OH”) |
| 1. 403(b) | 6. SEP plan (Simplified Employee Pension) |
| 1. Roth IRA | 7. another type of retirement account |
| 1. Regular IRA |  |

**Q97Dr**

**What was the source of (name's/your) retirement income?**

 Enter other source of retirement income

 Enter “Other Retirement” if the answer is “Don’t Know”

**Q98Ar(1-7)**

**Did (you/NAME) withdraw any money or receive a distribution from (your/his/her) [ACCOUNT TYPE\_ FILL IN FROM Q97CR or Q97DR] in 2021 (, including any distributions (you/he/she) may have been required to take)?**

1 Yes

2 No

## INCOME-EARNING ACCOUNTS OUTSIDE OF RETIREMENT (Source)

**Q99ARa**

**Now I will ask about assets that may have paid interest or dividends in 2021 outside of the retirement accounts.**

**At any time during 2021, did (you/anyone in this household):**

**Have money in an interest-earning checking account?**

1 Yes

2 No

**Q99Ba**

* Ask only if necessary

Which members of this household ages 15 and over had an interest-earning checking account?

* Include each person in cases of joint accounts or ownership
* Enter all that apply, separate using the space bar or a comma
* Probe: Anyone else?

**Q99ARb**

**At any time during 2021, did (you/anyone in this household):**

**Have money in a savings account?**

1 Yes

2 No

**Q99Bb**

* Ask only if necessary

Which members of this household ages 15 and over had savings accounts?

* Include each person in cases of joint accounts or ownership
* Enter all that apply, separate using the space bar or a comma
* Probe: Anyone else?

**Q99ARc**

**At any time during 2021, did (you/anyone in this household):**

**Have money in a money market fund?**

1 Yes

2 No

**Q99Bc**

* Ask only if necessary

Which members of this household ages 15 and over had a money market fund?

* Include each person in cases of joint accounts or ownership
* Enter all that apply, separate using the space bar or a comma
* Probe: Anyone else?

**Q99ARd**

**At any time during 2021, did (you/anyone in this household):**

**Have money in CDs (certificates of deposit)?**

1 Yes

2 No

**Q99Bd**

* Ask only if necessary

Which members of this household ages 15 and over had CDs (certificates of deposit)?

* Include each person in cases of joint accounts or ownership
* Enter all that apply, separate using the space bar or a comma
* Probe: Anyone else?

**Q99ARe**

**At any time during 2021, did (you/anyone in this household):**

**Have money in savings bonds?**

1 Yes

2 No

**Q99Be**

* Ask only if necessary

Which members of this household ages 15 and over had savings bonds?

* Include each person in cases of joint accounts or ownership
* Enter all that apply, separate using the space bar or a comma
* Probe: Anyone else?

**Q99ARf**

**At any time during 2021, did (you/anyone in this household):**

**Have money in shares of stock in corporations or mutual funds?**

1 Yes

2 No

**Q99Bf**

* Ask only if necessary

Which members of this household ages 15 and over had shares of stock in corporations or mutual funds?

* Include each person in cases of joint accounts or ownership
* Enter all that apply, separate using the space bar or a comma
* Probe: Anyone else?

**Q99ARg**

**At any time during 2021, did (you/anyone in this household):**

**Have money in any other savings or investments that pay interest or dividends?**

1 Yes

2 No

**Q99Bg**

* Ask only if necessary

Which members of this household ages 15 and over had any other savings or investments that paid interest or dividends?

* Include each person in cases of joint accounts or ownership
* Enter all that apply, separate using the space bar or a comma
* Probe: Anyone else?

**CAPGDIS**

**Did (you/NAME) receive any capital gains from (your/his/her) shares of stocks or mutual funds in 2021?**

1 Yes

2 No

**Q99BR**

**What was the source of (name's/your) savings or investments that pay interest or dividends?**

* Enter other source of interest or dividend income

## PROPERTY INCOME (Source)

**Q65A1**

**During 2021 did (you/ anyone in this household):**

**Own any land, business property, apartments, or houses which were rented to others?**

1. Yes
2. No

**Q65A2**

**At any time during 2021 did (you/ anyone in this household):**

**Receive income from royalties or from roomers or boarders?**

**(exclude amounts paid by relatives)**

1. Yes
2. No

**Q65A3**

**At any time during 2021 did (you/ anyone in this household):**

**Receive income from estates or trusts?**

**(exclude estates or trusts already reported)**

1. Yes
2. No

**Q65b**

Ask only if necessary

**Who received this (income/rent) ?**

* (Amount previously reported in Q48b was (amount))
* Include each in cases of joint ownership. For self-employed persons, determine if income was already included
* Enter all that apply, separate using the space bar or a comma.
* Probe: Anyone Else?

## EDUCATION ASSISTANCE (Source)

**Q66a**

**During 2021 did (you/anyone in this household) attend school beyond the high school level including a college, university, or other schools?**

(include vocational, business, or trade schools)

1. Yes
2. No

**Q66b**

**Did (you/ anyone in this household) receive any educational assistance for tuition, fees, books, or living expenses during 2021?**

 Exclude loans, assistance from household members, and VA educational benefits

1. Yes
2. No

**Q66c**

 Ask only if necessary

**Which member received assistance?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**Q66d**

**What type of assistance did (name/you) receive?**

 Exclude assistance from household members

 Enter all that apply, separate using the space bar or a comma.

 Probe: Any other assistance?

1. Pell Grant
2. Assistance from a welfare or social service office
3. Some other government assistance
4. Scholarships, grants, etc.
5. Other assistance (employers, friends, etc.)

## CHILD SUPPORT (Source)

**Q70a**

**During 2021 did (you/anyone in this household) receive:**

**Any child support payments?**

1. Yes
2. No

**Q70b**

* Read only if necessary

**Who received these payments?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

## REGULAR FINANCIAL ASSISTANCE (Source)

**Q72a**

**(Any other/Any) regular financial assistance from friends or relatives not living in this household?**

 Do not include loans

1. Yes
2. No

**Q72b**

 Read only if necessary

**Who received this assistance?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

## OTHER MONEY INCOME (Source)

**Q73A1R**

**During 2021 did (you/ anyone in this household) receive cash income not already covered such as income from:**

**foster child care, alimony, jury duty, armed forces reserves, severance pay, hobbies, or any other source?**

 Do NOT include federal stimulus payments due to the Coronavirus pandemic.

1. Yes
2. No

**Q73A1b**

Ask only if necessary

**Who received this income?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone Else?

**Q73A1Rc1**

**What was the source of this income?**

* Asking about: (name/you – Current respondent)
* Do not read answer list to respondent

1 Alaska Permanent Fund Dividend

2 Other sources or don’t know – Specify

**Q73A1Rc**

* Specify other source of income
* Asking about: (name/you – Current respondent)

# INCOME AMOUNTS

**AMTINTRO**

**Now I will ask you about the amount of income you (and others in this household) received from various sources in 2021.**

## UNEMPLOYMENT AND WORKER’S COMPENSATION (Amounts)

**Q51A1p**

**What is the easiest way for you to tell us (name's/your) State or Federal**

**unemployment compensation; weekly, every other week, twice a month, monthly, or**

**yearly?**

1 Weekly

2 Every other week (bi-weekly)

3 Twice a month

4 Monthly

7 Yearly

**Q51A11**

**How much did (name/you) receive (weekly/every other week/ twice a**

**month/monthly) in State or Federal unemployment compensation during 2021?**

 Do NOT include federal stimulus payments due to the Coronavirus pandemic.

Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q51A11r1**

**Could you please tell me if (name/you) received:**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**in State or Federal unemployment compensation during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q51A11r2**

**Did (name/you) receive:**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in State or Federal unemployment compensation during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q51A1C**

Do not read to the respondent.

The annual rate appears out of range. The total State or Federal unemployment

compensation received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to

Suppress. If No, press enter and correct entry.

**Q51A12**

**How many (weekly/every other week/ twice a month/monthly) payments did**

**(name/you) receive from State or Federal unemployment compensation during 2021?**

(1-12/1-24/1-26/1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q51A13**

**According to my calculations (name/you) received (total) altogether from State or Federal unemployment compensation during 2021. Does that sound about right?**

1 Yes

2 No

**Q51A14**

**What is your best estimate of the correct total amount (name/you) received from State or Federal unemployment compensation during 2021?**

PREVIOUS ENTRIES: Q51A11: (amount)

Q51A1p: (periodicity)

Q51A12: (number of pay periods)

Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q51A2p**

**What is the easiest way for you to tell us (name's/your) Supplemental**

**Unemployment Benefits; weekly, every other week, twice a month, monthly, or**

**yearly?**

1 Weekly

2 Every other week (bi-weekly)

3 Twice a month

4 Monthly

7 Yearly

**Q51A21**

**How much did (name/you) receive (weekly/every other week/twice a month/monthly) in Supplemental Unemployment Benefits during 2021?**

 Do NOT include federal stimulus payments due to the Coronavirus pandemic.

Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q51A21r1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**in Supplemental Unemployment Benefits during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q51A21r2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in Supplemental Unemployment Benefits during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q51A2C**

Do not read to the respondent.

The annual rate appears out of range. The total Supplemental Unemployment Benefits

received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q51A22**

**How many (weekly/every other week/twice a month/ monthly) payments did**

**(name/you) receive from Supplemental Unemployment Benefits during 2021?**

(1-12/1-24/1-26/1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q51A23**

**According to my calculations (name/you) received (total) altogether from Supplemental Unemployment Benefits during 2021. Does that sound about right?**

1 Yes

2 No

**Q51A24**

**What is your best estimate of the correct total amount (name/you) received from Supplemental Unemployment Benefits during 2021?**

PREVIOUS ENTRIES: Q51A21: (amount)

Q51A2p: (periodicity)

Q51A22: (number of pay periods)

Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q51A3p**

**What is the easiest way for you to tell us (name's/your) Union Unemployment or Strike Benefits; weekly, every other week, twice a month, monthly, or yearly?**

1 Weekly

2 Every other week (bi-weekly)

3 Twice a month

4 Monthly

7 Yearly

**Q51A31**

**How much did (name/you) receive (weekly/every other week/ twice a month/monthly) in Union Unemployment or Strike Benefits during 2021?**

 Do NOT include federal stimulus payments due to the Coronavirus pandemic.

Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q51A31r1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**in Union Unemployment or Strike Benefits during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q51A31r2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in Union Unemployment or Strike Benefits during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**C251A3**

Do not read to the respondent.

The annual rate appears out of range. The total Union Unemployment or Strike Benefits

received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q51A32**

**How many (weekly/every other week/ twice a month/ monthly) payments did**

**(name/you) receive from Union Unemployment or Strike Benefits during 2021?**

(1-12/1-24/1-26/1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q51A33**

**According to my calculations (name/you) received (total) altogether from Union Unemployment or Strike Benefits during 2021. Does that sound about right?**

1 Yes

2 No

**Q51A34**

**What is your best estimate of the correct total amount (name/you) received from Union Unemployment or Strike Benefits during 2021?**

PREVIOUS ENTRIES: Q51A31: (amount)

Q51A3p: (periodicity)

Q51A32: (number of pay periods)

Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q52cp**

**What is the easiest way for you to tell us (your/name’s) Worker’s Compensation: weekly, every other week, twice a month, monthly, or yearly?**

1 Weekly

2 Every other week

3 Twice a month

4 Monthly

7 Yearly

**Q52c1**

**How much did (name/you) receive (weekly/every other week/twice a month/monthly) in Worker’s Compensation during 2021?**

 Do NOT include federal stimulus payments due to the Coronavirus pandemic.

Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q52cr1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**in Worker’s Compensation during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q52cr2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in Worker’s Compensation during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q52cC2**

Do not read to the respondent.

The annual rate appears out of range. The total worker's compensation received in 2021

was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and

correct entry.

**Q52c2**

**How many (weekly/every other week/twice a month/monthly) payments did**

**(name/you) receive from Worker’s Compensation during 2021?**

(1-12/1-24/1-26/1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q52c3**

**Then (name/you) received (total) altogether from Worker’s Compensation during 2021. Does that sound about right?**

1 Yes

2 No

**Q52c4**

**What is your best estimate of the correct total amount (name/you)**

**received from Worker’s Compensation during 2021?**

PREVIOUS ENTRIES: Q52c1: (amount)

Q52cp: (periodicity)

Q52c2: (number of pay periods)

Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## SOCIAL SECURITY (Amounts)

**Q56dp**

**What is the easiest way for you to tell us (name's/your) Social Security payment; monthly, quarterly, or yearly?**

4 Monthly

5 Quarterly

7 Yearly

**Q56d**

**How much did (name/you) receive (monthly/quarterly) in Social Security payments in 2021?**

* Enter dollar amount

* (If already included in amount reported for another household member, press Enter)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q56d\_Char**

Enter <A> for Already included

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q56drn1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**for the TOTAL amount (you/name) received in Social Security payments in 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q56drn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in Social Security payments in 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q56d2**

**For how many (months/quarters) did (name/you) receive Social Security in 2021?** (1-4; 1-12)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q56d3**

**Is this $(amount from Q56d/amount from Q56d1) before or after any monthly Medicare deduction?**

1 After Deduction

2 Before Deduction

**Q56md**

If Q56d3 = 1 then ask:

**How much were (name’s/your) monthly Medicare deductions?**

If Q56d3 = 2 then ask:

**How much were (name’s/your) monthly payments for Medicare?**

Include Medicare Advantage, Part B, and Part D premiums.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q56dC2**

Do not read to the respondent.

The annual rate appears out of range. The total Social Security received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q56d5**

**According to my calculations (name/you) received $(total) altogether from Social Security in 2021.** **Does that sound about right?**

1 Yes

2 No

**Q56d6**

**What is your best estimate of the correct amount (name/you) received in Social Security during 2021?**PREVIOUS ENTRIES:  Q56d: (amount)  
 Q56dp: (periodicity)  
  Q56d2: (number of pay periods)

Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## SOCIAL SECURITY DISABILITY (Amounts)

**Q562dp**

**What is the easiest way for you to tell us (name's/your) Social Security Disability payment; monthly, quarterly, or yearly?**

4 Monthly

5 Quarterly

7 Yearly

**Q562d**

**How much did (name/you) receive (monthly/quarterly) in Social Security Disability payments in 2021?**

 Enter dollar amount

 (If already included in amount reported for another household member, press Enter)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q562d\_Char**

Enter <A> for Already included

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q562d2**

**For how many (months/quarters) did (name/you) receive Social Security Disability in 2021?** (1-4; 1-12)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q562drn1**

**Could you tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**in Social Security Disability payments in 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q562drn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in Social Security Disability payments in 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q562d3**

**Is this $(amount from Q562d) before or after any monthly Medicare deductions?**

            1      After Deduction

            2      Before Deduction

**Q562md**

If Q562d3 = 1 then ask:

**How much were all of (name’s/your) monthly Medicare deductions?**

If Q562d3 = 2 then ask:

**How much were (name’s/your) monthly payments for Medicare?**

Include Medicare Advantage, Part B, and part D premiums.

**Q562dC2**

Do not read to the respondent.

The annual rate appears out of range. The total Social Security received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**BACKPAY1**

**During 2021, did (name/you) receive an initial Social Security Disability payment that was larger than the usual payment that we haven’t accounted for yet?**

Sometimes the initial payment from Social Security Disability is larger than the usual monthly payments to make up for the delay in receiving the first payment.

1. Yes
2. No

**BACKPAY2**

**How much was that initial disability payment?**

**Q562d5**

**According to my calculations (name/you) received $(total) altogether from Social Security Disability in 2021.** **Does that sound about right?**

1 Yes

2 No

**Q562d6**

**What is your best estimate of the correct amount (name/you) received in Social Security Disability during 2021?**

PREVIOUS ENTRIES: Q562d: (amount)  
Q562dp: (periodicity)  
Q562d2: (number of pay periods)  
BACKPAY2: (amount)

Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## SOCIAL SECURITY FOR CHILDREN (Amounts)

**Q56ip**

**What is the easiest way for you to tell us (name's/your) Social Security payment for children in this household; monthly, quarterly, or yearly?**

4 Monthly

5 Quarterly

7 Yearly

**Q56i**

**How much did (name/you) receive (monthly/quarterly) in Social Security payments for children in this household in 2021?**

 Enter dollar amount

(If already included in amount reported for another household member, press Enter)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q56i\_Char**

 Enter A for Already included

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q56irn1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**for the TOTAL amount (name/you) received in Social Security payments for children in this household in 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q56irn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in Social Security payments for children in this household in 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q56i2**

**For how many (months/quarters) did (name/you) receive Social Security in 2021?**

 (1-4; 1-12)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q56iC2**

 Do not read to the respondent.

 The annual rate appears out of range. The total Social Security received for children in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q56i4**

**According to my calculations (name/you) received $(total) altogether for children in this household from Social Security in 2021.** **Does that sound about right?**

1 Yes

2 No

**Q56i5**

**What is your best estimate of the correct amount (name/you) received in Social Security for children in this household during 2021?**

  Previous entries: (amount)  
  Q56ip: (periodicity)  
 Q56i2: (number of pay periods)  
   
 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## SUPPLEMENTAL SECURITY INCOME (SSI) (Amounts)

**Q57cp**

**What is the easiest way for you to tell us (name's/your) Supplemental Security Income payment; monthly, quarterly, or yearly?**

4 Monthly

5 Quarterly

7 Yearly

**Q57c**

**How much did (name/you) receive (monthly/quarterly) in Supplemental Security Income payments in 2021?**

Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q57crn1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**for the TOTAL amount (name/you) received in Supplemental Security Income payments in 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q57crn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in Supplemental Security Income payments in 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q57c2**

**For how many (months/quarters) did (name/you) receive Supplemental Security Income in 2021?**

 (1-4; 1-12)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q57cC2**

 Do not read to the respondent.

 The annual rate appears out of range. The total Supplemental Security Income received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q57c4**

**According to my calculations (name/you) received $(total) altogether from Supplemental Security Income in 2021.** **Does that sound about right?**

1 Yes

2 No

**Q57c5**

**What is your best estimate of the correct amount (name/you) received in Supplemental Security Income during 2021?**

 Previous entries: (amount)

Q57cp: (periodicity)  
 Q57c2: (number of pay periods)

 Enter Dollar Amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## SUPPLEMENTAL SECURITY INCOME FOR CHILDREN (Amounts)

**Q57ip**

**What is the easiest way for you to tell us the Supplemental Security   
Income (name/you) received on behalf of children?**

4 Monthly

5 Quarterly

7 Yearly

**Q57i**

**How much did (name/you) receive (monthly/quarterly) in Supplemental Security Income on behalf of children in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q57irn1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**for the TOTAL amount (name/you) received in Supplemental Security Income payments in 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q57irn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in Supplemental Security Income in 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q57i2**

**For how many (months/quarters) did (name/you) receive Supplemental Security Income on behalf of children in 2021?**

 (1-4; 1-12)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q57iC2**

 Do not read to the respondent.

 The annual rate appears out of range. The total Supplemental Security Income received on behalf of children in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q57i4**

**According to my calculations (name/you) received $(total) altogether from Supplemental Security Income on behalf of children in 2021.**

**Does that sound about right?**

1 Yes

2 No

**Q57i5**

**What is your best estimate of the correct amount (name/you) received in Supplemental Security Income on behalf of children during 2021?**

PREVIOUS ENTRIES: (amount)  
 Q57ip: (periodicity)  
 Q57i2: (number of pay periods)

  Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## DISABILITY INCOME (Amounts)

**Q61E1P**

**What is the easiest way for you to tell us (name's/your) (fill first answer from Q61C or Q61Cs1) payments; weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly

7 Yearly

**Q61E1**

**How much did (name/you) receive (weekly/ every other week/ twice a month/ monthly) before deductions in (fill first answer from Q61C or Q61Cs1) payments in 2021?**

* Enter dollar amount
* Do not include Veterans’ payments.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q61e1rn1**

**Could you please tell me if (name/you) received:**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**for the TOTAL amount (name/you) received in (fill first answer from Q61Cr or Q61Cs1) during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q61e1rn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in (fill first answer from Q61C or Q61Cs1) during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q61E12**

**How many (weekly/ every other week/ twice a month/ monthly) payments did  
(name/you) receive in (fill first answer from Q61C or Q61Cs1) payments in 2021?**

 Disability income source #1 (1-12; 1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q61E1C**

 Do not read to the respondent.

 The annual rate appears out of range. The total (fill from first answer in Q61c or Q61cs1) payments received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q61E13**

**According to my calculations (name/you) received $(total) altogether from  
(fill first answer from Q61C or Q61Cs1) payments in 2021. Does that sound about right?**

1 Yes

2 No

**Q61E14**

**What is your best estimate of the correct amount (name/you) received from (fill first answer from Q61C or Q61Cs1) payments during 2021?**

 PREVIOUS ENTRIES:  (amount)  
 Q61E1P: (periodicity)  
 Q61E12: (number of pay periods)  
 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q61E2P**

**What is the easiest way for you to tell us (name's/your) (fill second answer from Q61C or Q61Cs1) payments; weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly

7 Yearly

**Q61E2**

**How much did (name/you) receive (weekly/every other week/ twice a month/ monthly) before deductions in (fill second answer from Q61C or Q61Cs1)  
payments in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q61e2rn1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**for the TOTAL amount (name/you) received in (fill second answer from Q61C or Q61Cs1) during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q61e2rn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in (fill second answer from Q61C or Q61Cs1) during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q61E22**

**How many (weekly/every other week/ twice a month/ monthly) payments did (name/you) receive in (fill second answer from Q61C or Q61Cs1) payments in 2021?**

 Disability income payment source #2 (1-12; 1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q61E2C**

 Do not read to the respondent.

 The annual rate appears out of range. The total (fill from second answer in Q61c or Q61cs1) payments received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q61E23**

**According to my calculations (name/you) received $(total) altogether**

**from (fill second answer from Q61C or Q61Cs1) payments in 2021.** **Does that**

**sound about right?**

1 Yes

2 No

**Q61E24**

**What is your best estimate of the correct amount (name/you) received from (fill second answer from Q61C or Q61Cs1) payments during 2021?**

 PREVIOUS ENTRIES:  (amount)  
 Q61E2P: (periodicity)  
 Q61E22: (number of pay periods)

  Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## VETERANS PAYMENTS (Amounts)

**Q60V1P**

**What is the easiest way for you to tell us (name's/your) (fill from first answer in Q60c8); weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly

7 Yearly

**Q60V1**

**How much did (name/you) receive (weekly/every other week/ twice a month/monthly) before deductions in (fill from first answer in Q60c8) in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q60v1rn1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**for the TOTAL amount (name/you) received in (fill from first answer in Q60c8) during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q60v1rn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in (fill from first answer in Q60c8) payments during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q60V12**

**How many (weekly/every other week/ twice a month/monthly) payments did (name/you) receive in (fill from first answer in Q60c8) in 2021?**

(1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q60V1C**

 Do not read to the respondent.

 The annual rate appears out of range. The total (fill from first answer in Q60c8) received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q60V13**

**According to my calculations (name/you) received $(total) altogether from (fill from first answer in Q60c8) in 2021.** **Does that sound about right?**

1 Yes

2 No

**Q60V14**

**What is your best estimate of the correct amount (name/you) received in Veteran's benefits during 2021?**

 PREVIOUS ENTRIES:  Q60V1:  (amount)

Q60V1P: (periodicity)

Q60V12: (number of pay periods)

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q60V2P**

**What is the easiest way for you to tell us (name's/your) (fill from second answer in Q60c8); weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly

7 Yearly

**Q60V2**

**How much did (name/you) receive (weekly/every other week/ twice a month/monthly) before deductions in (fill from second answer in Q60c8) in 2021?**

Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q60v2rn1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**for the TOTAL amount (name/you) received in (fill from second answer in Q60c8) payments during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q60v2rn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in (fill from second answer in Q60c8) payments during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q60V22**

**How many (weekly/every other week/ twice a month/monthly) payments did (name/you) receive in (fill from second answer in Q60c8) in 2021?**

(1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q60V2C**

 Do not read to the respondent.

 The annual rate appears out of range. The total (fill from second answer in Q60c8) received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q60V23**

**According to my calculations (name/you) received $(total) altogether from**

**(fill from second answer in Q60c8) in 2021. Does that sound about right?**

1 Yes

2 No

**Q60V24**

**What is your best estimate of the correct amount (name/you) received in**

**(fill from second answer in Q60c8) during 2021?**

 PREVIOUS ENTRIES:  Q60V2:  (amount)

Q60V2P: (periodicity)

Q60V22: (number of pay periods)

 Enter dollar amount  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## SURVIVOR BENEFITS – Amounts

**Q58E1P**

**What is the easiest way for you to tell us (name's/your) (fill from first answer**

**in Q58C or Q58Cs1) payments?**

**Weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly

7 Yearly

**Q58E1**

**How much did (name/you) receive (weekly/every other week/twice a month/**

**monthly) from (your/his/her) (fill from first answer in Q58C or Q58Cs1) in 2021?**

Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q58e1rn1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**for the TOTAL amount (name/you) received from (your/his/her) (fill from first answer in Q58C or Q58Cs1) payments during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q58e1rn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**from (you/his/her) (fill from first answer in Q58C or Q58Cs1) payments during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q58E12**

**How many (weekly/every other week/twice a month/monthly) payments did**

**(name/you) receive in (fill from first answer in Q58C or Q58Cs1) in 2021?**

 (1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q58E1C**

 Do not read to the respondent.

 The annual rate appears out of range. The total (fill from first answer in Q58C or Q58Cs1) received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q58E13**

**According to my calculations (name/you) received $(total) altogether from   
(fill from first answer in Q58C or Q58Cs1) in 2021. Does that sound about right?**

1 Yes

2 No

**Q58E14**

**What is your best estimate of the correct amount (name/you) received from (your/his/her) (fill from first answer in Q58C or Q58Cs1) payments during 2021?**

PREVIOUS ENTRIES:  Q58E1: (amount)  
 Q58E1P: (periodicity)  
 Q58E12: (number of pay periods)  
 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q58E2P**

**What is the easiest way for you to tell us (name's/your) (fill from second answer in Q58C or Q58Cs1) payments?**

**Weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly

7 Yearly

**Q58E2**

**How much did (name/you) receive (weekly/every other week/twice a month/ monthly) in (fill from second answer in Q58C or Q58Cs1) in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q58e2rn1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**for the TOTAL amount (name/you) received from (your/his/her) (fill from second answer in Q58C or Q58Cs1) payments during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q58e2rn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**from (your/his/her) (fill from second answer in Q58C or Q58Cs1) payments during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q58E22**

**How many (weekly/every other week/twice a month/monthly) payments did (name/you) receive from (your/his/her) (fill from second answer in Q58C or Q58Cs1) in 2021?**

 (1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q58E2C**

 Do not read to the respondent.

 The annual rate appears out of range. The total (fill from second answer in Q58C or Q58Cs1) received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q58E23**

**According to my calculations (name/you) received $(total) altogether from (your/his/her) (fill from second answer in Q58C or Q58Cs1) payments in 2021.**

**Does that sound about right?**

1 Yes

2 No

**Q58E24**

**What is your best estimate of the correct amount (name/you) received from (your/his/her) (fill from second answer in Q58C or Q58Cs1) payments during 2021?**

 PREVIOUS ENTRIES: Q58E2: (amount)

Q58E2P: (periodicity)

Q58E22: (number of pay periods)

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q58E3P**

**What is the easiest way for you to tell us (name's/your) (fill from third answer in Q58C or Q58Cs1); weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly

7 Yearly

**Q58E3**

**How much did (name/you) receive (weekly/every other week/twice a month/ monthly) in (fill from third answer in Q58C or Q58Cs1) in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q58e3rn1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**for the TOTAL amount (name/you) received from (your/his/her) (fill from third answer in Q58C or Q58Cs1) payments during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q58e3rn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**from (your/his/her) (fill from third answer in Q58C or Q58Cs1) payments during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q58E32**

**How many (weekly/every other week/ twice a month/ monthly) payments did (name/you) receive from (your/his/her) (fill from third answer in Q58C or Q58Cs1) in 2021?**

 (1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q58E3C**

 Do not read to the respondent.

 The annual rate appears out of range. The total (fill from third answer in Q58C or Q58Cs1) received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q58E33**

**According to my calculations (name/you) received (total) altogether from (your/his/her) (fill from third answer in Q58C or Q58Cs1) payments in 2021. Does that sound about right?**

1 Yes

2 No

**Q58E34**

**What is your best estimate of the correct amount (name/you) received from (your/his/her) (fill from third answer in Q58C or Q58Cs1) payments during 2021?**

PREVIOUS ENTRIES: Q58E3: (amount)  
 Q58E3P: (periodicity)  
 Q58E32: (number of pay periods)

Enter dollar amount  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## PUBLIC ASSISTANCE (Amounts)

**Q59ep**

**What is the easiest way for you to tell us (name's/your) TOTAL CASH assistance payments from (fill from Q59C8r); Is it weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly

7 Yearly

**Q59e**

**During 2021, how much TOTAL CASH assistance did (name/you) receive (per week/every other week/twice a month/monthly): (fill from Q59C8r)?**

 Do NOT include federal stimulus payments due to the Coronavirus pandemic.

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_

**Q59ern1**

**Could you tell me if (name/you) received**

**less than $1,000**

**between $1,000 and $3,000**

**or over $3,000**

**in TOTAL CASH assistance payments in 2021?**

1. Less than $1,000
2. Between $1,000 and $3,000
3. Over $3000

**Q59ern2**

**Did (name/you) receive**

**less than $100**

**between $100 and $500**

**or over $500**

**in TOTAL CASH assistance payments in 2021?**

1. Less than $100
2. Between $100 and $500
3. Over $500

**Q59e2**

**How many (weekly/every other week/ twice a month/ monthly) cash assistance payments did (name/you) receive in 2021?**

 (1-12/1-24/1-26/1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q59eC2**

 Do not read to the respondent.

 The annual rate appears out of range. The total cash assistance received in 2021 was $(amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q59e3**

**According to my calculations (name/you) received $(total) altogether in cash assistance from a state or county program in 2021.** **Does that sound about right?**

1 Yes

2 No

**Q59e4**

**What is your best estimate of the correct amount of cash assistance  
(name/you) received during 2021?**

 PREVIOUS ENTRIES:  Q59e: (amount)

Q59ep: (periodicity)

Q59e2: (number of pay periods)

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q59f**

**Was the cash assistance for adults AND children in the household, or JUST children?**

1. Both adults AND children
2. Children only
3. Adults only

**Q59g**

**(Who/Which children) in your household was the cash assistance for?**

 Probe: Anyone Else?

 Enter all that apply, separate using the space bar or a comma.

 Enter 0 if none listed

 Enter 96 for all persons

## FOOD STAMPS/SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP) (Amounts)

**Q90p**

**What is the easiest way for you to tell us the value of the food assistance:**

**monthly or yearly?**

1. Monthly
2. Yearly
3. Already included with TANF/AFDC payment

**Q90**

**What is the (monthly) value of the food assistance received in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q90rn1**

**Could you tell me if the value of food assistance received in 2021 was**

**less than $1,000**

**between $1,000 and $3,000**

**or over $3,000**

1. Less than $1,000
2. Between $1,000 and $3,000
3. Over $3000

**Q90rn2**

**Was the value**

**less than $100**

**between $100 and $500**

**or over $500**

**in food assistance in 2021?**

1. Less than $100
2. Between $100 and $500
3. Over $500

**Q902**

**How many months was food assistance received in 2021?**

 (1-12)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q90C2**

 Do not read to the respondent.

 The annual rate appears out of range. The total food assistance payments received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q903**

**According to my calculations $(total) was received altogether from food assistance in 2021. Does that sound about right?**

1 Yes

2 No

**Q904**

**What is your best estimate of the correct amount of food assistance received**

**during 2021?**

 PREVIOUS ENTRIES: Q90: (amount)  
  Q90p: (periodicity)  
 Q902: (number of pay periods)

 Enter dollar amount   
 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## PENSIONS (Amounts)

**Q62E1PR**

**What is the easiest way for you to tell us (name's/your) (first answer fill-in from Q62CR/Q62cS1); weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly

7 Yearly

**Q62E1R**

**How much did (name/you) receive (weekly/every other week/ twice a month/ monthly) in (first answer fill-in from Q62CR/Q62cS1) in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q62E1rn1**

**Could you tell me if (you/name) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**in (first answer fill-in from Q62CR/Q62cS1) in 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q62E1rn2**

**Did (you/name) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in (first answer fill-in from Q62CR/Q62cS1) in 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q62E12R**

**How many (weekly/every other week/ twice a month/ monthly) payments did (name/you) receive in (first answer fill-in from Q62CR/Q62cS1) in 2021?**

 Pension/Retirement #1 (1-12; 1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q62E1CR**

 Do not read to the respondent.

 The annual rate appears out of range. The total (fill from first answer in Q62CR/Q62cS1) payments received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q62E13R**

**According to my calculations (name/you) received (total) dollars altogether from (first answer fill-in from Q62CR/Q62cS1) in 2021. Does that sound about right?**

1 Yes

2 No

**Q62E14R**

**What is your best estimate of the correct amount (name/you) received in (first answer fill-in from Q62CR/Q62cS1) during 2021?**

PREVIOUS ENTRIES: Q62E1: (amount)  
 Q62E1P: (periodicity)  
  Q62E12: (number of pay periods)  
 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q62E2PR**

**What is the easiest way for you to tell us (name's/your) (second answer fill-in from Q62CR/Q62cS1); weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly

7 Yearly

**Q62E2R**

**How much did (name/you) receive (weekly/every other week/ twice a month/ monthly) in (second answer fill-in from Q62CR/Q62cS1) in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q62E2rn1**

**Could you please tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**in (second answer fill-in from Q62CR/Q62cS1) payments in 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q62E2rn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in (second answer fill-in from Q62CR/Q62cS1) in 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q62E22R**

**How many (weekly/every other week/ twice a month/ monthly) payments did (name/you) receive in (second answer fill-in from Q62CR/Q62cS1) in 2021?**

 Pension/Retirement #1 (1-12; 1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q62E2CR**

 Do not read to the respondent.

 The annual rate appears out of range. The total (fill from second answer in Q62CR/Q62cS1) payments received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q62E23R**

**According to my calculations (name/you) received $(total) dollars altogether from (second answer fill-in from Q62CR/Q62cS1) in 2021. Does that sound about right?**

1 Yes

2 No

**Q62E24R**

**What is your best estimate of the correct amount (name/you) received in (second answer fill-in from Q62CR/Q62cS1) during 2021?**

PREVIOUS ENTRIES: Q62E1: (amount)  
 Q62E1P: (periodicity)  
  Q62E12: (number of pay periods)

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## ANNUITIES (Amounts)

**ANNNEW1**

**What is the easiest way for you to tell us (name/your) annuity income; weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly

7 Yearly

**ANNNEW2**

**How much did (name/you) receive (weekly/every other week/twice a month/ monthly) in annuities in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ANNNEWrn1**

**Could you tell me if (name/you) received**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**in annuity payments in 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**ANNNEWrn2**

**Did (name/you) receive**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in annuity payments in 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**ANNNEW3**

**How many (weekly/every other week/ twice a month/monthly) payments did (name/you) receive in 2021?**

  (1-12; 1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ANNNEW4**

**According to my calculations (name/you) received $(total) dollars altogether from annuities in 2021. Does that sound about right?**

1 Yes

2 No

**ANNNEW5**

**What is your best estimate of the correct amount (name/you) received in annuities in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## WITHDRAWALS/DISTRIBUTIONS FROM RETIREMENT PLAN (Amounts)

**DISTNEW1**

**What is the easiest way for you to tell us the amount of money withdrawn or distributed from (name’s/your) (1st account type fill-in from Q97CR or Q97DR) in 2021: monthly, quarterly, every 6 months, or yearly?**

4 Monthly

5 Quarterly

6 Every 6 months

7 Yearly

**DISTNEW2**

**How much was (name's/your) withdrawal or distribution (weekly/every other week/ twice a month/ monthly) from (1st account type fill-in from Q97CR or Q97DR) in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DISTNEW3**

**How many (monthly/quarterly) withdrawals did (name/you) make or distributions did (name/you) receive in 2021 from the (1st account type fill-in from Q97CR or Q97DR)?**

https://spider.dsd.census.gov/lib/ckeditor/plugins/diamond/small_diamond.gif Valid entries are 1-12 if monthly; 1-4 if quarterly; 1-2 if every six months

**DISTNEWrn1**

**Could you please tell me if (name’s/your) withdrawal or distribution was**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**from (your/his/her) (1st account type fill-in from Q97CR or Q97DR) in 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**DISTNEWrn2**

**Was (name’s/your) withdrawal or distribution**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**from (your/his/her) (1st account type fill-in from Q97CR or Q97DR) in 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**DISTNEW4**

**According to my calculations (name/you) withdrew or received a distribution of $(total) altogether from the (1st account type fill-in from Q97CR or Q97DR) in 2021. Does that sound about right?**

1 Yes

2 No

**DISTNEW5**

**What is your best estimate of the correct amount (name/you) withdrew or the distribution received from the (1st account type fill-in from Q97CR or Q97DR) during 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ROLLA**

**Did (you/name) re-invest or "roll over" any of the money into an IRA or some other kind of retirement plan?**

1 Yes

2 No

**ROLLAMTA**

**How much did (you/name) re-invest or “roll over” into an IRA or some other kind of retirement plan in 2021?**

* Enter dollar amount
* Dollar amount should not exceed amount of withdrawals reported.
* Amount of withdrawals reported: $(amount)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ROLLB**

**(Do/Does) (you/name) plan to re-invest or roll over any of the money?**

1. Yes
2. No

**ROLLAMTB**

**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
* Dollar amount should not exceed amount of withdrawals reported.
* Amount of withdrawals reported: $(amount)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DISTNEW6**

**What is the easiest way for you to tell us the amount of money withdrawn or distributed from (name’s/your) (2nd account type fill-in from Q97CR or Q97DR) in 2021: monthly, quarterly, every 6 months, or yearly?**

4 Monthly

5 Quarterly

6 Every 6 months

7 Yearly

**DISTNEW7**

**How much was (name's/your) withdrawal or distribution (weekly/every other week/ twice a month/ monthly) from (your/his/her) (2nd account type fill-in from Q97CR or Q97DR) in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DISTNEW8**

**How many (monthly/quarterly) withdrawals did (name/you) make or distributions did (name/you) receive in 2021 from the (2nd account type fill-in from Q97CR or Q97DR)?**

(1-12), (1-4), (1-2)

**DISTNEWrn3**

**Could you please tell me if (name’s/your) withdrawal or distribution was**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**from (your/his/her) (2nd account type fill-in from Q97CR or Q97DR) in 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**DISTNEWrn4**

**Was (name’s/your) withdrawal or distribution**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**from (your/his/her) (2nd account type fill-in from Q97CR or Q97DR) in 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**DISTNEW9**

**According to my calculations (name/you) withdrew or received a distribution of $(total) altogether from the (2nd account type fill-in from Q97CR or Q97DR) in 22021. Does that sound about right?**

1 Yes

2 No

**DISTNEW10**

**What is your best estimate of the correct amount (name/you) withdrew or the distribution received from the (2nd account type fill-in from Q97CR or Q97DR) during 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ROLLC**

**Did (you/name) re-invest or "roll over" any of the money into an IRA or some other kind of retirement plan?**

1 Yes

2 No

**ROLLAMTC**

**How much did (you/name) re-invest or “roll over” into an IRA or some other kind of retirement plan in 2021?**

* Enter dollar amount
* Dollar amount should not exceed amount of withdrawals reported.
* Amount of withdrawals reported: $(amount)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ROLLD**

**(Do/Does) (you/name) plan to re-invest or roll over any of the money?**

1 Yes

2 No

**ROLLAMTD**

**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
* Dollar amount should not exceed amount of withdrawals reported.
* Amount of withdrawals reported: $(amount)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## INTEREST/DIVIDENDS ON RETIREMENT ACCOUNTS (Amounts)

**RETIRENEW1**

**Within the (1st account type fill-in from Q97CR/Q97DR) account, how much did (name/you) earn in interest or dividends during 2021? Please include small amounts reinvested or credited to the account.**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_

**RETIRENEWrn1**

**Could you tell me if (name/you) earned**

**less than $1,000**

**between $1,000 and $3,000**

**or over $3,000**

**in interest or dividends from (your/his/her) (1st account type fill-in from Q97CR/Q97DR) during 2021?**

1. Less than $1,000
2. Between $1,000 and $3,000
3. Over $3,000

**RETIRENEWrn2**

**Did (name/you) earn**

**less than $100**

**between $100 and $500**

**or over $500**

**in interest or dividends from (your/his/her) (1st account type fill-in from Q97CR/Q97DR) during 2021?**

1. Less than $100
2. Between $100 and $500
3. Over $500

**RETIRENEW2**

**The Census Bureau can estimate the amount earned in this account based on the size of the account. So can you tell me how much money was in (name’s/your) (1st account type fill-in from Q97CR/Q97DR) account at the end of 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_

**RETIRENEW3**

**Within the (2nd account type fill-in from Q97CR/Q97DR) account, how much did (name/you) earn in interest or dividends during 2021? Please include small amounts reinvested or credited to the account.**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_

**RETIRENEWrn3**

**Could you tell me if (name/you) earned**

**less than $1,000**

**between $1,000 and $3,000**

**or over $3,000**

**in interest or dividends from (your/his/her) (2nd account type fill-in from Q97CR/Q97DR) during 2021?**

1. Less than $1,000
2. Between $1,000 and $3,000
3. Over $3,000

**RETIRENEWrn4**

**Did (name/you) earn**

**less than $100**

**between $100 and $500**

**or over $500**

**in interest or dividends from (your/his/her) (2nd account type fill-in from Q97CR/Q97DR) during 2021?**

1. Less than $100
2. Between $100 and $500
3. Over $500

## INTEREST/DIVIDENDS ON NON-RETIREMENT ACCOUNTS (Amounts)

**NONRETIRENEW(1-7)1**

**How much did (you/name) receive in (interest/dividends) from [fill-in from Q99AR or Q99BR] during 2021, including even small amounts reinvested or credited to accounts?**

 If a joint account please split interest income in half for each person.

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_

**NONRETIRENEW(1-7)rn1**

**Could you tell me if (you/name) received:**

**less than $1,000**

**between $1,000 and $3,000**

**or over $3,000**

**in (interest/dividends) from [fill-in from Q99AR or Q99BR] during 2021?**

1. Less than $1,000
2. Between $1,000 and $3,000
3. Over $3,000

**NONRETIRENEW(1-7)rn2**

**Did (you/name) receive:**

**less than $100**

**between $100 and $500**

**or over $500**

**in (interest/dividends) from [fill-in from Q99AR or Q99BR] during 2021?**

1. Less than $100
2. Between $100 and $500
3. Over $500

**NONRETIRENEW(1-7)2**

**The Census Bureau can estimate the amount earned in this account based on the size of the account. How much money did (you/name) have in [fill-in from Q99AR or Q99BR] at the end of 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q63(c-i)p**

 Read if necessary

**Is this a weekly, every other week, twice a month, monthly, quarterly, every 6 months, or yearly amount?**

1 Weekly

2 Every other week

3 Twice a month

4 Monthly

5 Quarterly

6 Every 6 months

7 Yearly

**Q63(c-i)2**

**How many (weekly/ every other week/ twice a month/ monthly/ quarterly/ every 6 months) payments did (you/name) receive in interest/dividend income in 2021 from [fill-in from Q99AR or Q99BR]?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q63(c-i)3**

**According to my calculations (you/name) received $(total) from interest/dividend income from [fill-in from Q99AR or Q99BR] in 2021. Does that sound about right?**

1 Yes

2 No

**Q63(c-i)4**

**What is your best estimate of the correct amount (you/NAME) received from interest payments during 2021?**

PREVIOUS ENTRIES: Q63(c-i): (amount)  
 Q63(c-i)p: (periodicity)  
 Q63(c-i)2: (number of pay periods)

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CAPGDAMT**

**How much did (you/name) receive in capital gains in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CAPGDAMTrn1**

**Could you tell me if (name/you) received:**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**in capital gains during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**CAPGDAMTrn2**

**Did (name/you) receive:**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in capital gains distributions during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

## PROPERTY INCOME (Amounts)

**Q65c**

**How much did (name/you) receive in income from rent (, roomers or boarders, estates, trusts, or royalties/, roomers or boarders, or royalties/, estates or trusts fill from Q65A1-3) AFTER EXPENSES during 2021?**

* Separate amounts for joint ownership
* If response is "Broke Even" then enter 1.
* Enter dollar amount
* If already included in amount reported for another household member, press Enter
* If response is "None" or "Lost Money" press <Enter> key

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q65c\_Char**

 Enter "A" for Already included

 Enter "L" for Lost Money

 Enter "X" for None

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q65cL**

 Enter amount of money lost in 2021.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q65crn1**

**Could you please tell me if (name/you) received:**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**for the TOTAL amount (name/you) received in income from rent (roomers or boarders, estates, trusts, or royalties/, roomers or boarders, or royalties/, estates or trusts fill from Q65A1-3) AFTER EXPENSES during 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q65crn2**

**Did (name/you) receive:**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in income from rent (roomers or boarders, estates, trusts, or royalties/, roomers or boarders, or royalties/, estates or trusts fill from Q65A1-3) AFTER EXPENSES during 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q65cp**

**Is this a weekly, every other week, twice a month, monthly, quarterly, or yearly amount?**

1. Weekly
2. Every other week
3. Twice a month
4. Monthly
5. Quarterly

7 Yearly

**Q65c2**

**What is your best estimate of (name's/your) ANNUAL net income from rent (roomers or boarders, estates, trusts, or royalties/, roomers or boarders, or royalties/, estates or trusts) AFTER EXPENSES in 2021?**

 PREVIOUS ENTRIES:  Q65c: (amount)  
  Q65cp: (periodicity)

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q65cC2**

 Do not read to the respondent.

 The annual rate appears out of range. The total income received from rent (roomers or boarders, estates, trusts, or royalties) was (amount) in 2021. Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q65c2L**

**What is your best estimate of (name’s/your) ANNUAL LOSS from rent (roomers or boarders, estates, trusts, or royalties/, roomers or boarders, or royalties/, estates or trusts fill from Q65A1-3) AFTER EXPENSES in 2021?**

 PREVIOUS ENTRIES:  Q65cL: (amount)  
  Q65cp: (periodicity)

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## EDUCATIONAL ASSISTANCE (Amounts)

**Q69F88**

**How much did (name/you) receive in Pell Grants during 2021?**

 Enter annual amount only

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q69Frn1**

**Could you please tell me if (name/you) received:**

**less than $1,000**

**between $1,000 and $3,000**

**or over $3,000**

**for the TOTAL amount (name/you) received in Pell Grants during 2021?**

1. Less than $1,000
2. Between $1,000 and $3,000
3. Over $3,000

**Q69Frn2**

**Did (name/you) receive:**

**less than $100**

**between $100 and $500**

**or over $500**

**in Pell Grants during 2021?**

1. Less than $100
2. Between $100 and $500
3. Over $500

**Q66HP**

**What is the easiest way for you to tell us (name's/your) (other/blank) educational assistance during 2021; weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week (bi-weekly)
3. Twice a month
4. Monthly

7 Yearly

**Q66H**

**(Aside from the Pell Grant assistance, how/How) much did (name/you) receive (weekly/every other week/ twice a month/ monthly) in educational assistance during 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q66H2**

**How many (weekly/every other week/ twice a month/ monthly) payments did (name/you) receive in educational assistance in 2021?**

 (1-12/1-24/1-26/1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q66Hrn1**

**Could you please tell me if (name/you) received:**

**less than $1,000**

**between $1,000 and $3,000**

**or over $3,000**

**for the TOTAL amount (name/you) received in educational assistance during 2021?**

1. Less than $1,000
2. Between $1,000 and $3,000
3. Over $3,000

**Q66Hrn2**

**Did (name/you) receive:**

**less than $100**

**between $100 and $500**

**or over $500**

**in educational assistance during 2021?**

1. Less than $100
2. Between $100 and $500
3. Over $500

**Q66HC2**

 Do not read to the respondent.

 The annual rate appears out of range. The total educational assistance received in 2021 was (amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q66H3**

**According to my calculations (name/you) received $(total) altogether from educational assistance in 2021.** **Does that sound about right?**

1 Yes

2 No

**Q66H4**

**What is your best estimate of the correct amount (name/you) received from educational assistance during 2021?**

 Previous entries: Q66h: (amount)

Q66hp: (periodicity)  
  Q66h2: (number of pay periods)

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## CHILD SUPPORT (Amounts)

**Q70cp**

**What is the easiest way for you to tell us (name's/your) child support payments;** **weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week (bi-weekly)
3. Twice a month
4. Monthly

7 Yearly

**Q70c**

**How much did (name/you) receive (weekly/ every other week/ twice a month/ monthly) in child support payments in 2021?**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q70c2**

**How many (weekly/every other week/ twice a month/ monthly) child support payments did (name/you) receive in 2021?**

 (1-12/1-24/1-26/1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q70c1rn1**

**Could you please tell me if (name/you) received:**

**less than $10,000**

**between $10,000 and $20,000**

**or over $20,000**

**for the TOTAL amount (name/you) received in child support payments in 2021?**

1. Less than $10,000
2. Between $10,000 and $20,000
3. Over $20,000

**Q70c1rn2**

**Did (name/you) receive:**

**less than $1,000**

**between $1,000 and $5,000**

**or over $5,000**

**in child support payments in 2021?**

1. Less than $1,000
2. Between $1,000 and $5,000
3. Over $5,000

**Q70cC2**

 Do not read to the respondent.

 The annual rate appears out of range. The total child support payments received in 2021 was $(amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q70c3**

**According to my calculations (name/you) received $(total) altogether from child support payments in 2021.** **Does that sound about right?**

1 Yes

2 No

**Q70c4**

**What is your best estimate of the correct amount (name/you) received from child support payments during 2021?**

 PREVIOUS ENTRIES: Q70c: (amount)  
  Q70cp: (periodicity)  
  Q70c2: (number of pay periods)

 Enter dollar amount   
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## REGULAR FINANCIAL ASSISTANCE (Amounts)

**Q72cp**

**What is the easiest way for you to tell us (name's/your) regular financial assistance; weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week (bi-weekly)
3. Twice a month
4. Monthly

7 Yearly

**Q72c**

**How much did (name/you) receive (weekly/every other week/twice a month/ monthly) in regular financial assistance in 2021?**

  Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q72c2**

**How many (weekly/every other week/twice a month/monthly) payments did (name/you) receive in regular financial assistance in 2021?**

 (1-12/1-24/1-26/1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q72crn1**

**Could you please tell me if (name/you) received:**

**less than $1,000**

**between $1,000 and $3,000**

**or over $3,000**

**in regular financial assistance in 2021?**

1. Less than $1,000
2. Between $1,000 and $3,000
3. Over $3,000

**Q72crn2**

**Did (name/you) receive**

**less than $100**

**between $100 and $500**

**or over $500**

**in regular financial assistance in 2021?**

1. Less than $100
2. Between $100 and $500
3. Over $500

**Q72cC2**

 Do not read to the respondent.

 The annual rate appears out of range. The total regular financial assistance payments received in 2021 was $(amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q72c3**

**According to my calculations (name/you) received $(total) altogether from regular financial assistance in 2021.** **Does that sound about right?**

1 Yes

2 No

**Q72c4**

**What is your best estimate of the correct amount (name/you) received from regular financial assistance during 2021?**

PREVIOUS ENTRIES:  Q72c: (amount)  
Q72cp: (periodicity)  
Q72c2: (number of pay periods)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## OTHER MONEY INCOME (Amounts)

**Q731P**

**What is the easiest way for you to tell us (name's/your) income from (fill from Q73A1Rc);**

**weekly, every other week, twice a month, monthly, or yearly?**

1. Weekly
2. Every other week (bi-weekly)
3. Twice a month
4. Monthly

7 Yearly

**Q731**

**How much did (name/you) receive (weekly/every other week/twice a month/ monthly) in income from (fill from Q73A1Rc) during 2021?**

 Do NOT include federal stimulus payments due to the Coronavirus pandemic.

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q7312**

**How many (weekly/every other week/twice a month/monthly) payments did (name/you) receive in income from (fill from Q73A1Rc) during 2021?**

 (1-12/1-24/1-26/1-52)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q73rn1**

**Could you please tell me if (name/you) received:**

**less than $1,000**

**between $1,000 and $3,000**

**or over $3,000**

**in income from (Alaska Permanent Fund Dividend/fill-in from Q73a1Rc)?**

1. Less than $1,000
2. Between $1,000 and $3,000
3. Over $3,000

**Q73rn2**

**Did (name/you) receive:**

**less than $100**

**between $100 and $500**

**or over $500**

**in income from (Alaska Permanent Fund Dividend/fill-in from Q73a1Rc)?**

1. Less than $100
2. Between $100 and $500
3. Over $500

**Q731C2**

 Do not read to the respondent.

 The annual rate appears out of range. The total income from (fill from Q73A1Rc)in 2021 was $(amount). Is this a correct entry? If Yes, enter "S" to Suppress. If No, press enter and correct entry.

**Q7313**

**According to my calculations (name/you) received $(total) altogether from (Alaska Permanent Fund Dividend/fill-in from Q73a1Rc) in 2021.**

**Does that sound about right?**

1 Yes

2 No

**Q7314**

**What is your best estimate of the correct amount (name/you) received in income from (Alaska Permanent Fund Dividend/fill-in from Q73a1Rc) in 2021?**

 PREVIOUS ENTRIES: Q731: (amount)  
Q731P: (periodicity)  
Q7312: (number of pay periods)

 Enter dollar amount   
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## CONTRIBUTIONS TO RETIREMENT ACCOUNTS (Amounts)

**CONTRIB1**

**Earlier we recorded that (you/name) (have/has) a retirement account, such as a 401(k), 403(b), IRA, or other account designed specifically for retirement savings.**

**Did (you/he/she) contribute any money to (your/his/her) plan(s), for example, through payroll deductions?**

**(Do not include amounts reinvested or “rolled over” from other retirement accounts.)**

1 Yes

2 No

**CONTRIB2**

**How much did (you/he/she) contribute to (your/his/her) account(s) in 2021?**

 Total contributions to all accounts.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# HEALTH INSURANCE

## INTRODUCTION TO HEALTH INSURANCE SECTION

**HINTRO**

**These next questions are about health coverage between January 1, 2021 and now.**

 Press 1 to Continue

1 Enter 1 to Continue

**PINTRO**

**(First/Next) I'm going to ask about (name's/your) health coverage.**

 Press 1 to Continue

1 Enter 1 to Continue

**FHINTRO**

**Next, I'm going to ask about (name's/your) health coverage.**

 Press 1 to Continue

## CURRENT COVERAGE

**MCARE1**

?[F1]

**Medicare is health insurance for people 65 years and older and people under 65 with disabilities. (Is/Are) (name/you) NOW covered by Medicare?**

 Code Medicare Parts A, B, and C and Medicare Advantage as "Yes"

1 Yes

2 No

**ANYCOV**

**(Does/Do) (name/you) NOW have any type of health plan or health coverage?**

1 Yes

2 No

**MEDI**

?[F1]

**(Are/Is/Was/Were) (name/you) covered by Medicaid, Medical Assistance, or (CHIP/or Medicare)?**

1 Yes

2 No

**OTHGOVT**

**(Is/Are) (name/you) NOW covered by a state or government assistance program that helps pay for healthcare, such as: State Medicaid, CHIP, Exchange/Portal, or other State Health program?**

 Stop reading list if respondent says "YES"

1 Yes

2 No

**VET**

**(Is/Are) (name/you) NOW covered by Veteran's Administration (VA) care?**

1 Yes

2 No

**VERIFY**

**I recorded that (name/you) (is/are) not currently covered by a health plan. Is that correct?**

1 Yes, is NOT covered

2 No, is covered

## TYPE OF COVERAGE

**SRCEGEN**

?[F1]

 ASK OR VERIFY

**For the coverage (name/you) (has/have/had) NOW, (do/does/did) (he/she/you) get it through a job, the government or state, or some other way?**

|  |  |  |
| --- | --- | --- |
| **1. JOB** | **2. GOVERNMENT OR STATE** | **3. OTHER WAY** |
| Former job/Retiree | Medical Assistance | Privately purchased |
| Union | Medicaid | Parent or spouse |
| Spouse/parent's job | Medicare (Parts A+B; Part C) | Medicare Supplements |
| Job with the government | Medicare Advantage | Exchange plan/Marketplace |
| COBRA | State-provided health coverage | Group or association |
| TRICARE/TRICARE For Life | VA Care/CHAMPVA/other military | School |

 IF RESPONDENT CHOOSES MORE THAN ONE: Let's talk about one plan at a

time. Which would you like to tell me about first?

[https://spider.dsd.census.gov/lib/ckeditor/plugins/diamond/small_diamond.gif If respondent is not covered, go back to VERIFY and select "Yes"]

1 Job (current or former)

2 Government or State

3 Some other way

**SRCEDEPDIR**

 ASK OR VERIFY

**(Does/Do/Did) (name/you) get that coverage through a parent or spouse, (does/do/did) (he/she/you) buy it (himself/herself/yourself), or (does/did/do) (he/she/you) get it some other way?**

|  |  |  |
| --- | --- | --- |
| **1. PARENT OR SPOUSE** | **2. BUY IT DIRECTLY** | **3. SOME OTHER WAY** |
| Parent | Buy it | Former employer |
| Spouse | Parent or spouse buys it | Group or association |
|  | Medicare Supplement | Indian Health Service |
|  |  | School |

1 Parent or spouse

2 Buy it

3 Some other way

**SRCEOTH**

 ASK OR VERIFY

**(Does/Do/Did) (name/you) get it through a former employer, a union, a group or association, the Indian Health Service, a school, or some other way?**

1 Former employer

2 Union

3 Group or association

4 Indian Health Service

5 School

6 Some other way

**JOBCOV**

(**Is/Was) that coverage related to a JOB with the government or state?**

 READ IF NECESSARY: Include coverage through FORMER employers and unions,

and COBRA plans.

1 Yes

2 No

**MILPLAN**

 ASK OR VERIFY

**(Is/Was) that plan related to military service in any way?**

 Examples of military plans include:

- VA Care

- TRICARE

- TRICARE for Life

- CHAMPVA

- Other military care

1 Yes

2 No

**GOVTYPE**

?[F1]

 ASK OR VERIFY

**(Is/Was) that coverage Medicaid, CHIP, Medicare, a plan through the military, or some other program?**

 Code Medicare Parts A, B, and C and Medicare Advantage as "Medicare"

 IF RESPONDENT CHOOSES MORE THAN ONE: Let's talk about one plan at a time. Which would you like to tell me about first?

1 Medicaid or Medical Assistance

2 CHIP

3 Medicare

4 Military

5 Other

**MILTYPE**

 ASK OR VERIFY

**(Is/Was) that plan through TRICARE, TRICARE for Life, CHAMPVA, VA Care, military health care, or something else?**

1 TRICARE

2 TRICARE for Life

3 CHAMPVA

4 Veterans Administration (VA) care

5 Military health care

6 Other

**POLHOLDER**

 ASK OR VERIFY

**Whose name (is/was) the policy in? (Who (is/was) the policyholder?)**

1-16 Name on roster

17 Someone living outside the household

Enter persons line number (1-16), or 17 for person not in the household

**SRCEPTSP**

 ASK OR VERIFY

**(Do/Did) they get that coverage through their job, (do/did) they buy it themselves, or (do/did) they get it some other way?**

1 Job (current or former)

2 Buy it

3 Some other way

**GOVPLAN**

 ASK OR VERIFY

**What do you call the program?**

 IF RESPONDENT ANSWERS WITH INSURANCE COMPANY NAME: OK, so

that would be the plan name. What do you call the program? Some examples of

programs in (state) are [read full list below].

1 Medicaid

2 Medical Assistance

3 Indian Health Service (IHS)

4-12 State Medicaid Programs Names

13-15 State Exchange Programs Names

16 Plan through State Exchange Portal

17 Other government plan

18 Other (please specify)

**MISCSPEC**

Please Specify

Write in plan name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PORTAL**

 ASK OR VERIFY

**(Is/Was) that coverage through (State Exchange Portal Name), which may also be known as (State Exchange Program Name 1, Name 2, Name 3)?**

1 Yes

2 No

**EXCHTYPE**

 ASK OR VERIFY

**What do you call it – State Exchange Program (Portal, Name 1, Name 2, Name 3)?**

1-4 State Exchange Programs Names

**HIPAID**

**(Does/Did) (your/policyholder name's/the policyholder’s) employer or union pay for all, part, or none of the health insurance premium?**

 Report here employer's contribution to employee's health insurance premiums, not the

employee's medical bills.

1 All

2 Part

3 None

**SHOP**

**Small businesses can offer health coverage to their employees through (State Exchange SHOP Portal Name). (Is/Was) the coverage at all related to (State Exchange SHOP Portal Name), (such as State SHOP Name 1, Name 2, Name 3)?**

1 Yes

2 No

**POLHOLDER2**

 ASK OR VERIFY

**Whose name (is/was) the policy in? (Who [is/was] the policyholder?)**

1-16 Name on roster

17 Someone living outside the household

Enter persons line number (1-16), or 17 for person not in the household

**PREMYN**

**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 costs.

1 Yes

2 No

**PREMSUBS**

**Is the cost of the premium subsidized based on (your/family) income?**

 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 costs.

 Subsidized health coverage is insurance with a reduced premium.  Low and middle

income families are eligible to receive tax credits that allow them to pay lower

premiums for insurance bought through healthcare exchanges or marketplaces.

1 Yes

2 No

## MONTHS OF COVERAGE

**BEFORAFT**

**Did (name's/your) coverage from (plan type) start before January 1, 2021?**

 READ IF NECESSARY: Your best estimate is fine.

 (READ IF NECESSARY:  If (policyholder) switched employers or plans through

(your/their) employer, consider it the same plan.)

https://spider.dsd.census.gov/lib/ckeditor/plugins/diamond/small_diamond.gif (READ IF NECESSARY: If (policyholder) switched plans that (you/he/she)

(buy/buys), consider it the same plan.)

1 Yes

2 No

**MNTHBEG1/2**

**In which month did (that/this) coverage start?**

 READ IF NECESSARY: Your best estimate is fine.

 (READ IF NECESSARY:  If (policyholder) switched employers or plans through

(your/their) employer, consider it the same plan.)

https://spider.dsd.census.gov/lib/ckeditor/plugins/diamond/small_diamond.gif (READ IF NECESSARY: If (policyholder) switched plans that (you/he/she)

(buy/buys), consider it the same plan.)

 This question refers to (plan type).

1 January

2 February

3 March

4 April

5 May

6 June

7 July

8 August

9 September

10 October

11 November

12 December

**YEARBEG**

 ASK OR VERIFY

**Which year was that?**

 (READ IF NECESSARY:  If (policyholder) switched employers or plans through

(your/their) employer, consider it the same plan.)

https://spider.dsd.census.gov/lib/ckeditor/plugins/diamond/small_diamond.gif (READ IF NECESSARY: If (policyholder) switched plans that (you/he/she)

(buy/buys), consider it the same plan.)

 This question refers to (plan type).

1 2021

2 2022

**CNTCOV**

**Has it been continuous since (beginning month)?**

 (READ IF NECESSARY:  If (policyholder) switched employers or plans through

(your/their) employer, consider it the same plan.)

https://spider.dsd.census.gov/lib/ckeditor/plugins/diamond/small_diamond.gif (READ IF NECESSARY: If (policyholder) switched plans that (you/he/she)

(buy/buys), consider it the same plan.)

 READ IF NECESSARY: If the gap in coverage was less than 3 weeks, consider the

coverage "continuous."

 This question refers to (plan type).

1 Yes

2 No

**SPELLADD**

**I have recorded that (name/you) (was/were) covered by (plan type) in (months of coverage). Were there any OTHER months between January 2021 and now that (name/you) (was/were) also covered by (plan type)?**

1 Yes

2 No

**ANYTHIS**

**Which months (was/were) (name/you) covered by (plan type) THIS year -- in 2022?**

1 January 2022

2 February 2022

3 March 2022

4 April 2022

20 All months of 2022

21 No months of 2022

**ANYLAST**

**Which months (was/were) (name/you) covered by (plan type) LAST year -- in 2021?**

1 January

2 February

3 March

4 April

5 May

6 June

7 July

8 August

9 September

10 October

11 November

12 December

20 All months from January 2021 until December 2021

21 No months from January 2021 until December 2021

**WMNTHS**

**Which months between January 2021 and now (was/were) (name/you) covered by (plan type)?**

1 January 2021

2 February 2021

3 March 2021

4 April 2021

5 May 2021

6 June 2021

7 July 2021

8 August 2021

9 September 2021

10 October 2021

11 November 2021

12 December 2021

13 January 2022

14 February 2022

15 March 2022

16 April 2022

20 All months from January 2021 until now

21 No months from January 2021 until now

## OTHER HOUSEHOLD MEMBERS

**OTHMEMB**

**Between January 1, 2021 and now, was anyone in the household other than (name/you) ALSO covered by (plan type)?**

1 Yes

2 No

**COVWHO**

**Who else was covered? Who else was covered by (plan type)?**

 PROBE: Anyone else?

0 No one listed

1-16 Person 1 through 16’s name

96 All persons listed

**SAMEMNTHS**

**(Was/Were) (name/names) also covered from January 2021 until now?**

 This question refers to (plan type)

1 All also covered from January 2021 until now

2 None covered from January 2021 until now

**MNTHS\_P(1-16)M**

**Which months between January 2021 and now was (NAME) covered? [How about (NAME)?]**

 This question refers to (plan type)

1 January 2021

2 February 2021

3 March 2021

4 April 2021

5 May 2021

6 June 2021

7 July 2021

8 August 2021

9 September 2021

10 October 2021

11 November 2021

12 December 2021

13 January 2022

14 February 2022

15 March 2022

16 April 2022

20 All months from January 2021 until now

21 No months from January 2021 until now

**OTHOUT**

**Does that plan cover anyone living outside this household?**

 This question refers to (plan type)

1 Yes

2 No

**OTHWHO**

**How old are they -- under 19, 19-25, or older than 25?**

 Mark all that apply

1 Under 19

2 19-25 years old

3 Older than 25

## ADDITIONAL PLANS

**ADDGAP**

**So far, I have recorded that (name/you) (was/were) NOT covered in (months of no coverage). (Was/Were) (name/you) covered by any type of health plan or health coverage in (those months/that month)?**

 READ IF NECESSARY: Do not include plans that cover only one type of care, such

as dental or vision plans.

1 Yes

2 No

**ADDOTH**

Other than (plan type[s]), (was/were) (name/you) covered by any other type of health plan or health coverage AT ANY TIME between January 1, 2021 and now?

 READ IF NECESSARY: Do not include plans that cover only one type of care, such

as dental or vision plans.

1 Yes

2 No

## EMPLOYER-SPONSORED INSURANCE OFFERS AND TAKEUP

**ESIINTRO**

**Earlier I recorded that (name/you) (is/are) employed but (does/do) not have health coverage through (his/her/your) job.**

1 Enter 1 to continue

**OFFER**

**Does (employer name) offer a health insurance plan to any of its employees?**

1 Yes

2 No

**COULD**

**Could (name/you) be in this plan if (he/she/you) wanted to?**

1 Yes

2 No

**WNTAKE**

**Why (aren't/isn't) (you/he/she) in this plan?**

 Choose all that apply

1 Covered by another plan

2 Traded health insurance for higher pay

3 Too expensive

4 Don't need health insurance

5 Have a pre-existing condition

6 Haven't yet worked for this employer long enough to be covered

7 Contract or temporary employees not allowed in plan

8 Other/specify

**WNTAKESPEC**

**Please specify other reason why not in the plan**

**WNELIG**

**Why not? Why can't (name/you) be in this plan if (he/she/you) wanted to?**

 Choose all that apply

1 Don't work enough hours per week or weeks per year

2 Contract or temporary employees not allowed in plan

3 Haven't yet worked for this employer long enough to be covered

4 Have a pre-existing condition

5 Too expensive

6 Other/specify

**WNELIGSPEC**

**Please specify other reason why not eligible.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## HEALTH STATUS

**HealthStatus\_Intro**

**An important factor in evaluating a person's or family's health insurance situation is their current health status and/or the current health status of other family members.**

Enter 1 to Continue

**HealthStatus**

**Would you say (name's/your) health in general is excellent, very good, good, fair, or poor?**

1 Excellent

2 Very good

3 Good

4 Fair

5 Poor

## MEDICAL EXPENDITURES

**MedExp\_Intro**

**Next I would like to ask about out-of-pocket medical expenses during 2021.**

 Press 1 to Continue

1. Enter 1 to continue

**HIPREM**

**[Earlier I recorded that (your/name’s) employer or union did not pay for (your/his/her) entire health insurance premium.] Last year, how much did (you/name) pay out-of-pocket for ALL health insurance premiums [covering (yourself/himself/herself) or others in the household]? Include both comprehensive and supplemental plans (such as vision and dental insurance).**

**[What about (you/name)?]**

**[DO NOT include the $(amount reported) per month from Medicare deductions from (Social Security/ Social Security Disability/ Social Security and Social Security Disability) payments mentioned earlier.]**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MEDAMT**

?[F1]

**Last year, how much was paid out-of-pocket for (your/name’s) OWN medical care, such as copays for doctor and dentist visits, diagnostic tests, prescription medicine, glasses and contacts, and medical supplies?**  
  
**[What about (you/name)? Last year, how much was paid out-of-pocket for (your/name’s) OWN medical care, such as copays for doctor and dentist visits, diagnostic tests, prescription medicine, glasses and contacts, and medical supplies?]**

**Include any amount paid out-of-pocket on (your/his/her) behalf by anyone in this household.**

 Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**OTCMEDAMT**

**Last year, how much was paid out-of-pocket for (your/name’s) non-prescription healthcare products such as vitamins, allergy and cold medicine, pain relievers, quit smoking aids, AND anything else not yet reported?  
  
[What about (you/name)? Last year, how much was paid out-of-pocket for (your/name’s) non-prescription healthcare products such as vitamins, allergy and cold medicine, pain relievers, quit smoking aids, AND anything else not yet reported?]**

**Include any amount paid out-of-pocket on (your/his/her) behalf by anyone in this household.**

 Enter dollar amount

 If unsure of the amount, a best guess is acceptable.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# EMPLOYER’S PENSION PLAN

**Q74a**

**Other than Social Security did (the/any) employer or union that (name/you) worked for in 2021 have a pension or other type of retirement plan for any of its employees?**

1. Yes
2. No

**Q74b**

**(Were/Was) (name/you) included in that plan?**

1. Yes
2. No

# LOW INCOME ITEMS

## SCHOOL LUNCHES

**Q80**

**During 2021 which of the children ages 5 to 18 in this household usually ate a complete lunch offered at school?**

 “Usually” refers to days where school was being held in person, such as during the pre-pandemic period or in areas where schools remained open.

 Probe: Anyone else?

 Enter all that apply, separate using the space bar or a comma.

 Enter 96 for All

 Enter 0 for None

**Q83**

**During 2021 which of the children in this household received free or reduced priced lunches because they qualified for the Federal School Lunch Program or their school provided free lunches to all students?**

 Probe: Anyone else?

 Enter all that apply, separate using the space bar or a comma.

 Enter 96 for All

 Enter 0 for None

**ECVDPEBT**

**During 2021, did you or anyone in this household receive a school meal debit, pandemic EBT, or P-EBT card?**

1. Yes
2. No

## PUBLIC HOUSING

**Q85**

**Is this public housing, that is, is it owned by a local housing authority or other public agency?**

1. Yes
2. No

**Q86**

**Are you paying lower rent because the Federal, State, or local government is paying part of the cost?**

1. Yes
2. No

## WOMEN, INFANTS, AND CHILDREN NUTRITION PROGRAM (WIC)

**SWRWIC**

**At any time during 2021, (was/were) (you/ anyone in this household) on WIC, the Women, Infants, and Children Nutrition Program?**

1. Yes
2. No

**SWRW**

**Who received WIC for themselves or on behalf of a child?**

 Enter all that apply, separate using the space bar or a comma.

 Probe: Anyone else?

## ENERGY ASSISTANCE

**Q93**

**The government has an energy assistance program which helps pay heating and cooling costs. This assistance can be received directly by the household or it can be paid directly to the electric company, gas company, or fuel dealer.**

**In 2021, (did you/did this household) receive assistance of this type from the federal, state, or local government?**

1. Yes
2. No

**Q93pr1**

**Do you remember receiving an additional or unexpected check that was sent during the year to help pay heating or cooling costs?**

1. Yes
2. No

**Q93pr2**

**Was it used to pay heating costs?**

1. Yes
2. No

**Q94**

**Altogether, how much energy assistance has been received in 2021?**

 Enter annual amount only

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q94rn1**

**Could you tell me if you received:**

**less than $1,000**

**between $1,000 and $3,000**

**or over $3,000**

**in energy assistance during 2021?**

1. Less than $1,000
2. Between $1,000 and $3,000
3. Over $3000

**Q94rn2**

**Did you receive:**

**less than $100**

**between $100 and $500**

**or over $500**

**in energy assistance during 2021?**

1. Less than $100
2. Between $100 and $500
3. Over $500

# MIGRATION

## 1-YEAR MIGRATION

**MIGSAM**

**(Were/Was) (you/reference person's name) living in this house (or apartment) one year ago?**

1 Yes, this house (apt)

2 No, different house in U.S.

3 No, outside the U.S.

**MIGPLC**

**Where did (reference person's name/you) live one year ago?**

 Name of city/town/post office

 Current: (city)  
 Enter correct city/town/post office or press ENTER for SAME

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MIGSTA**

**Where did (reference person's name/you) live one year ago?**

 Name of State

 Current: (state)   
 Enter W for person living on a ship at sea  
 Enter correct State or press ENTER for SAME

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MIGZIP**

**Where did (reference person's name/you) live one year ago?**

  Zip Code  
 Current: (zip)  
  Enter correct Zip Code or press ENTER for SAME  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MIGCLM**

**Did (reference person's name/you) live inside the city limits of (place name)?**

1. Yes, inside city limits
2. No, outside city limits or post office name only

**MIGCOU**

**What (county/parish) is (place name) in?**

 Enter "IND CITY" if an independent city, not a county

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**S\_MIGCN1**

**What country did (reference person's name/you) live in one year ago?**

**MI1RES**

**What was (your/name’s) main reason for moving to this house (apartment)?**

 The answer categories are separated into the following groups:

FAMILY-RELATED REASONS\* 1-3

EMPLOYMENT-RELATED REASONS 5-9

HOUSING-RELATED REASONS 10-15

OTHER REASONS 4, 16-20

\*Family-related reasons only include family as defined by the Census Bureau. Family consists of people who are related by birth, marriage, or adoption.

1. change in marital status
2. to establish own household
3. other family reason (specify)
4. relationship with unmarried partner (boy/girlfriend, fiancé, etc.)
5. new job or job transfer
6. to look for work or lost job
7. to be closer to work/easier commute
8. retired
9. other job-related reason (specify)
10. wanted to own home, not rent
11. wanted newer/better/larger house or apartment
12. wanted better neighborhood/less crime
13. cheaper housing
14. foreclosure/eviction
15. other housing reason (specify)
16. to attend or leave college
17. change of climate
18. health reasons
19. natural disaster (hurricane, tornado, etc.)
20. other reason (specify)

**MI1s**

**What was the reason for moving?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MIGALL**

**There are (number) other persons in this household ages 1 year or over.   
Did (all of these persons/this person) live with (reference person's name/you)** **(in this house/in City, State/outside the U.S.) one year ago?**

1. Yes, all lived with (reference person's name/you)
2. No, some or all did not live with (reference person's name/you)

**MIGM**

**Which of the other members of this household did NOT live with (reference person's name/you) one year ago?**

  PROBE: Anyone else?

* Enter all that apply, separate using the space bar or a comma.
* Enter Line Number(s)

**NXTSAM**

**Did (name/you) live in this house (apartment) one year ago?**

1. Yes , this house
2. No, different house in U.S.
3. No, outside the U.S.

**NXTPLC**

**Where did (name/you) live one year ago?**

 Name of city/town/post office

 Current: (city) Enter correct city/town/post office or

 Press ENTER for SAME

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NXTSTA**

**Where did (name/you) live one year ago?**

 Name of State  
   Current: (state)  
   Enter correct State or press ENTER for SAME  
\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NXTZIP**

**Where did (name/you) live one year ago?**

 Zip Code Current: (zip)

 Enter correct zip code or

 Press ENTER for SAME

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**NXTCLM**

**Did (name/you) live inside the city limits of (place name)?**

1. Yes, inside city limits
2. No, outside city limits or post office name only

**NXTCOU**

**What (county/parish) is (place name) in?**

Enter "IND CITY" if an independent city, not a county

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**S\_NXTCN1**

**What country did (name/you) live in one year ago?**

**NX1RES**

**What was (name’s/your) main reason for moving to this house (apartment)?**

 The answer categories are separated into the following groups:

FAMILY-RELATED REASONS\* 1-3

EMPLOYMENT-RELATED REASONS 5-9

HOUSING-RELATED REASONS 10-15

OTHER REASONS 4, 16-20

\*Family-related reasons only include family as defined by the Census Bureau. Family are people who are related by birth, marriage, or adoption.

1. change in marital status
2. to establish own household
3. other family reason (specify)
4. relationship with unmarried partner (boy/girlfriend, fiancé, etc.)
5. new job or job transfer
6. to look for work or lost job
7. to be closer to work/easier commute
8. retired
9. other job-related reason (specify)
10. wanted to own home, not rent
11. wanted newer/better/larger house or apartment
12. wanted better neighborhood/less crime
13. cheaper housing
14. foreclosure/eviction
15. other housing reason (specify)
16. to attend or leave college
17. change of climate
18. health reasons
19. natural disaster (hurricane, tornado, etc.)
20. other reason (specify)

**NX1OTH**

**What was the reason for moving?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**SUNITS**

 Ask if necessary

**How many housing units are in your building?**

1. Only one
2. Two
3. Three or four
4. Five to nine
5. Ten or more

# SUPPLEMENTAL POVERTY MEASURE

## PROPERTY VALUE/PRESENCE OF MORTGAGE

**VALPROP**

**About how much do you think this (house and lot/apartment/mobile home)  
would sell for if it were for sale?** Enter dollar amount

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**VALPROPR**

**Could you tell me if you think this (house and lot/apartment/mobile home) would sell for:**

**less than $100,000**

**between $100,000 and $250,000**

**between $250,000 and $500,000**

**or $500,000 or more?**

1. Less than $100,000
2. Between $100,000 and $250,000
3. Between $250,000 and $500,000
4. $500,000 or more

**MORTYN**

**Not counting home equity loans, do you or any other member of this household have a mortgage, deed of trust, contract to purchase, or similar debt on THIS property?**

1 Yes

2 No

**SMORTYN**

**Do you or any member of this household have a second mortgage or a home equity loan on THIS property?**

1 Yes, home equity loan.

2 Yes, second mortgage.

3 Yes, second mortgage and home equity loan.

4 No

## CHILD CARE

**Q95**

**Now we want to ask about some of your expenses for children.**

**Did (you/ anyone in this household) PAY for the care of (your/their) (child/children) while (you/they) worked in 2021?**

* Include: All child care expenses including preschool and nursery school expenses,  
  before and after school care, and summer care.
* Do not include: cost of kindergarten or grade/elementary school.

1. Yes
2. No

**Q95A**

**Which children needed care while their parents worked?**

* + Enter all that apply, separate using the space bar or a comma.
  + Probe: Anyone else?
  + Enter 96 for All persons
  + Enter 0 if none

**CCFREQ**

**What is the easiest way for you to tell us how much was paid for child care while (you/they) worked in 2021: weekly, every other week, twice a month, monthly, or yearly?**

1 Weekly

2 Every other week

3 Twice a month

4 Monthly

7 Yearly

**CCAMT**

**How much was paid (weekly/every other week/twice a month/monthly) for child care?**

 Include child care payments made for all children in the household.

 For example, if there are two adults in the household with childcare  
expenses use the total paid by both adults.  Do not try to separate   
the payments. Record one total for the entire household.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CCNUMPAY**

**How many (weekly/every other week/twice a month/monthly) payments did (you/they) make during 2021?**

(1-52), (1-26), (1-24), (1-12)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CCTOT**

**Then (you/they) paid $(amount) altogether in child care while (you/they) worked during 2021.  Does that sound about right?**

1 Yes

2 No

**CCEST**

**What is your best estimate of the correct amount (you/they) paid for child care while (you/they) worked in 2021?**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## CHILD SUPPORT PAID

**CSPCHILD**

**(Do you/Does anyone in this household) have any children who lived elsewhere with their other parent or guardian at anytime during 2021?**

1 Yes

2 No

**CSPWHO**

**Who had children who lived elsewhere? Anyone else?** Enter line number Enter all that apply, separate using the space bar or a comma.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CSPREQ**

**In 2021, did (name/you) pay any child support for children living elsewhere with their other parent or guardian?**

1 Yes

2 No

**CSPAMT**

**How much child support did (name/you) pay in 2021?**

* Enter dollar amount
* COUNT ALL FORMS OF CHILD SUPPORTS PAYMENTS, INCLUDING:

…PAYMENTS MADE DIRECTLY TO THE OTHER PARENT/GUARDIAN;

…PAYMENTS MADE THROUGH A COURT OR AGENCY; AND

…PAYMENTS WITHHELD FROM THIS PERSON'S PAYCHECK

## STIMULUS/ADVANCE CHILD TAX CREDIT PAYMENTS

**ECVD\_EIP**

**During 2021, have you or anyone in your household received a “stimulus payment,” that is the coronavirus (COVID-19) related Economic Impact Payment from the Federal Government?**

* Do not include refunds on annual income taxes, unemployment compensation, or payments from an employer

1 Yes

2 No

**ECTC**

**In the spring of 2021, as part of the American Rescue Plan, the child tax credit was expanded and the IRS was instructed to pay out the benefit to parents, monthly, starting in July 2021. Since July, have you or anyone in your household received an Advance Child Tax Credit payment from the Federal Government?**

1 Yes

2 No

* Please report “yes” if you received the payment as a paper check or as a direct deposit.

## EMERGENCY BROADBAND DISCOUNT PROGRAM

**EBDP**

**At any time during 2021, did you or anyone in this household receive benefits from the Emergency Broadband Discount Program or any other program that provided reduced price WIFI, broadband, or other home internet services?**

1 Yes

2 No

**EBDP\_MNTH**

**How many months did (you/anyone in this household) receive these benefits in 2021?**

 (1-12)

**Attachment A. Income Range Follow-up Questions**

The three levels of income range follow-up questions are:

1. High-range income follow-up brackets:
   * + - Less than $45,000
       - Between $45,000 and $60,000
       - $60,000 or more

If the respondent selects the lowest bracket (Less than $45,000), then the following ranges will be presented to the respondent:

* + - Less than $15,000
    - Between $15,000 and $30,000
    - $30,000 or more

1. Mid-range income follow-up questions:

* Less than $10,000
* Between $10,000 and $20,000
* $20,000 or more

If the respondent selects the lowest bracket (Less than $10,000), then the following ranges will be presented to the respondent:

* + - Less than $1,000
    - Between $1,000 and $5,000
    - $5,000 or more

1. Low-range income follow-up questions:

* Less than $1,000
* Between $1,000 and $3,000
* $3,000 or more

If the respondent selects the lowest bracket (Less than $1,000), then the following ranges will be presented to the respondent:

* + - Less than $100
    - Between $100 and $500
    - $500 or more

**Attachment B. Income Source and Follow-Up Question Range Level**

The following table displays the income source and range level used in the follow-up range questions.

| Source Screen | Income Source | Range Screen | Range Level |
| --- | --- | --- | --- |
| Q48AA | Earnings from Longest Job | PUQ48AARN1 | High |
| Q48AAD | Longest Job: tips, bonuses, etc. | PUQ48AADRN1 | Low |
| Q48B | Earnings from Business/ Farm | PUQ48BRN1 | High |
| Q48BAD | Business/ Farm: tips, bonuses, etc. | PUQ48BADRN1 | Low |
| Q49B1D | Earnings from All Other Employers | PUQ49B1DRN1 | Mid |
| Q49B1A | All Other Employers: tips, bonuses, etc. | PUQ49B1ARN1 | Low |
| Q49B2 | Earnings from Any Other Business | PUQ49B2RN1 | Mid |
| Q49B4 | Earnings from Any Other Farm | PUQ49B4RN1 | Mid |
| Q51A1 | State or Federal Unemployment Compensation | PUQ51A11R1 | Mid |
| Q51A2 | Supplemental Unemployment Benefits | PUQ51A21R1 | Mid |
| Q51A3 | Union Unemployment or Strike Benefits | PUQ51A31R1 | Mid |
| Q52A | Worker's Compensation | PUQ52CR1 | Mid |
| Q56A | Social Security | PUQ656DRN1 | Mid |
| Q56F | Social Security for Children | PUQ56IRN1 | Mid |
| Q57A | Supplemental Security Income (SSI) | PUQ57CRN1 | Mid |
| Q57D | SSI for Children | PUQ57IRN1C | Mid |
| Q59AR | Disability Income (source 1)  Disability Income (source 2) | PUQ61E1RN1  PUQ61E2RN1 | Mid |
| Q60A88 | Veteran's Payments (source 1)  Veteran's Payments (source 2) | PUQ60V1RN1  PUQ60V2RN1 | Mid |
| Q58A | Survivor Benefits (source 1)  Survivor Benefits (source 2)  Survivor Benefits (source 3) | PUQ58E1RN1  PUQ58E2RN1  PUQ58E3RN1 | Mid |
| Q59A88, Q59A89 | Public Assistance/ TANF | PUQ59ERN1 | Low |
| Q87R, Q87AR | Food Assistance/ SNAP | HUQ90RN1 | Low |
| Q62AR | Pensions (source 1)  Pensions (source 2) | PUQ62E1RN1  PUQ62E2RN1 | Mid |
| Q96AR | Annuities | PUANNEWRN1 | Mid |
| Q98Ar | Retirement Withdrawals/Distributions (source 1)  Retirement Withdrawals/Distributions (source 2) | PUDSTNEWR1  PUDSTNEWR3 | Mid |
| Q97Cr | Retirement Interest (source 1)  Retirement Interest (source 2) | PURETNEWRN1  PURETNEWRN3 | Low |
| Q99ARa | Checking Account Interest | PUQ63C1B | Low |
| Q99ARb | Savings Account Interest | PUQ63D1B | Low |
| Q99ARc | Money Market Account Interest | PUQ63e1B | Low |
| Q99ARd | CD Interest | PUQ63f1B | Low |
| Q99ARe | Saving Bonds Interest | PUQ63g1b | Low |
| Q99ARe | Stock Dividends | PUQ63h1b | Low |
| Q99ARg | Any Other Interest | PUQ63i1b | Low |
| CAPGDIS | Nonretirement Interest | PUCAPGDAMTRN1 | Mid |
| Q65A1, Q65A2, Q65A3 | Property Income | PUQ65CRN1 | Mid |
| Q66B | Pell Grant  Other Education Assistance | PUQ69FRN1  PUQ66HRN1 | Low |
| Q70A | Child Support | PUQ70C1RN1 | Mid |
| Q72A | Regular Financial Assistance | PUQ72CRN1 | Low |
| Q73A1 | Other Money Income | PUQ73RN1 | Low |
| Q93 | Energy Assistance | HUQ94RN1 | Low |