

**Privacy Act Statement:**

**5 U.S.C. 552a(e)(3)**

The Consumer Financial Protection Bureau (Bureau) uses an outside firm to obtain the names and addresses of a national list of consumers to contact you for the purpose of participating in this survey. The information you provide through your responses will assist the Bureau in understanding people's experiences when money gets tight.

The Bureau will only receive de-identified information. Only your de-identified information will be combined with other data that the Bureau has collected in a way that you cannot be identified.

Information collected on behalf of the Bureau will be treated in accordance with the System of Records Notice ("SORN"), CFPB.022, Market and Consumer Research Records, <https://www.federalregister.gov/articles/2012/11/14/2012-27582/privacy-act-of-1974-as-amended>. Although the Bureau does not anticipate further disclosing the information provided, it may be disclosed as indicated in the Routine Uses described in the SORN. Direct identifying information will be kept private except as required by law. The Bureau may make an anonymous version of the survey data publicly available.

This collection of information is authorized by Pub. L. No. 111-203, Title X, Sections 1013 and 1022, codified at 12 U.S.C. §§ 5493 and 5512.

Participation in this study is voluntary. You may withdraw participation at any time.

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According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The OMB control number for this collection is 3170-0080. It expires on 11/30/2026. Comments regarding this collection of information, including the estimated response time, suggestions for improving the usefulness of the information, or suggestions for reducing the burden to respond to this collection should be submitted to the Consumer Financial Protection Bureau at [CFPB\\_PRA@cfpb.gov](mailto:CFPB_PRA@cfpb.gov).

# Making Ends Meet Survey – Potential Questions

**Note:** This list includes 154 questions, any or all of which could be part of the final instrument for either the follow up survey or the main survey. Ten of these questions are unlikely to be included and are separate from the remaining questions.

We may remove several of the questions for the version that we send to respondents to fit space constraints on the paper version of the survey and to ensure a readable and inviting layout. We may also move some questions from this instrument on to the follow-up survey that is part of this collection, and vice versa. Any changes of this nature that we make will not increase the burden hours associated with this collection.

Because we expect to remove and/or reorder questions, all references to particular questions or sections within the instrument (such as those in instructions to skip specific questions) are shown with placeholders.

## A. Your general financial situation

### 1. How well do these statements describe you or your situation?

	This statement describes my situation ...				
	Completely	Very well	Somewhat	Very little	Not at all
I know how to make complex financial decisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am comfortable using English to perform financial transactions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am just getting by financially	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I am concerned that the money I have or will save won't last	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Because of my money situation, I feel like I will never have the things I want in life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

### 2. How often do these statements apply to you?

	This statement applies to me ...				
	Always	Often	Sometimes	Rarely	Never
I have money left over at the end of the month	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My finances control my life	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## B. Your work

3. **What is your current work status?** Please mark all that apply including for your spouse or partner if you have one.

	You	Spouse/Partner
Self-employed	<input type="checkbox"/>	<input type="checkbox"/>
Work full time	<input type="checkbox"/>	<input type="checkbox"/>
Work part time	<input type="checkbox"/>	<input type="checkbox"/>
Retired	<input type="checkbox"/>	<input type="checkbox"/>
Temporarily laid off or on leave	<input type="checkbox"/>	<input type="checkbox"/>
Unemployed	<input type="checkbox"/>	<input type="checkbox"/>
Not working for pay (homemaker, student, disabled, etc.)	<input type="checkbox"/>	<input type="checkbox"/>

4. **In the past 12 months, how often did you typically work from home?**

- Never in the past 12 months
- Occasionally
- 1-2 days per week
- 3-4 days per week
- 5 or more days per week

5. **Do you own your own business?**

- Yes
- No (Skip to Question XX)

6. **Is this business your primary income source?**

- Yes
- No

7. **Do you have a separate line of credit or credit card for the business?**

- Yes
- No

## C. Your household and its finances

8. **Do you have a spouse or partner whom you share finances with?**
- Yes
  - No
9. **Do you have any children, parents, relatives, or other dependents whom you share your finances with or who are financially dependent on you?**
- Yes
  - No

*The next questions are about your household. By household, we mean you and anyone whom you share your finances with.*

*If you answered Yes to **Question XX, Question XX, or both**, answer the following questions for both you and the people you share your finances with.*

10. **What was your household's annual gross income (before taxes) in 2023 from all sources (wages, tips, child support, alimony, investment or rental income, retirement, Social Security, unemployment insurance and government benefits such as rental assistance)?**
- \$20,000 or less
  - \$20,001 to \$35,000
  - \$35,001 to \$50,000
  - \$50,001 to \$65,000
  - \$65,001 to \$80,000
  - \$80,001 to \$100,000
  - \$100,001 to \$125,000
  - \$125,001 to \$175,000
  - \$175,001 to \$250,000
  - \$250,001 or more
11. **Which best describes your household's income from month to month?**
- Income is about the same each month
  - Income varies somewhat from month to month
  - Income varies a lot from month to month
12. **In the last 12 months, has the amount of money your household has in checking and savings gone up, stayed about the same, or gone down?**
- Gone up
  - About the same
  - Gone down
13. **In the last 12 months, how have your normal household expenses like food, clothing, rent, or other bills that you pay regularly changed?**
- Gone up
  - About the same
  - Gone down
14. **In the past 12 months, how often has your household received financial assistance from family or friends who are not in your household?**
- Never
  - Once
  - 2-4 times
  - 5 or more times
15. **In the past 12 months, how often has your household provided financial assistance to family or friends who are not in your household?**
- Never
  - Once
  - 2-4 times
  - 5 or more times

**16. In the past year, did your household receive benefits from any of the following government programs?**

	Yes	No
Temporary Assistance for Needy Families (TANF)	<input type="checkbox"/>	<input type="checkbox"/>
Supplemental Nutrition Assistance Program (SNAP, food stamps, or WIC)	<input type="checkbox"/>	<input type="checkbox"/>
Earned Income Tax Credit (EITC)	<input type="checkbox"/>	<input type="checkbox"/>
Housing or rental assistance (such as Section 8 housing vouchers or public housing placement)	<input type="checkbox"/>	<input type="checkbox"/>
Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI)	<input type="checkbox"/>	<input type="checkbox"/>
Medicaid	<input type="checkbox"/>	<input type="checkbox"/>
Low-Income Home Energy Assistance Program (LIHEAP)	<input type="checkbox"/>	<input type="checkbox"/>
Other (Specify)	<input type="checkbox"/>	<input type="checkbox"/>

**17. Do you or anyone in your household currently have a checking or savings account?** *Please include any accounts you can access to pay for things, such as money market or prepaid accounts.*

- Yes
- No (Skip to Question XX)

**18. Altogether, about how much money does your household have right now in all of its checking and savings accounts?**

- \$0
- Less than \$100
- \$101 to \$500
- \$501 to \$1,000
- \$1,001 to \$5,000
- \$5,001 to \$10,000
- \$10,001 to \$20,000
- \$20,001 or more

**19. In the past 12 months, did you open a new checking or savings account?**

- Yes, a new checking account
- Yes, a new savings account
- Yes, both a new savings and a new checking account
- No (Skip to Question XX)

**20. Did you open a new account for any of the following reasons?**

	Yes	No
I did not have any bank accounts before, and felt that I wanted or needed one	<input type="checkbox"/>	<input type="checkbox"/>
I did not have enough money to need a bank account before, but now I do	<input type="checkbox"/>	<input type="checkbox"/>
The new account had a better interest rate	<input type="checkbox"/>	<input type="checkbox"/>
There were fewer fees associated with the new account	<input type="checkbox"/>	<input type="checkbox"/>
For budgeting, to track spending, or for another family member	<input type="checkbox"/>	<input type="checkbox"/>
There was an offer or bonus for opening a new account	<input type="checkbox"/>	<input type="checkbox"/>
My financial institution closed my previous account	<input type="checkbox"/>	<input type="checkbox"/>
Some other reason (Specify)	<input type="checkbox"/>	<input type="checkbox"/>

**21. Is your new account at an online-only bank?**

- Yes
- No

**22. If your household lost its main source of income, about how long could you cover expenses by, for example, borrowing, using savings, selling assets, or seeking help from family or friends?**

- Less than two weeks
- About one month
- About two months
- Three to six months
- More than six months

**23. In the past 12 months, have you or anyone in your household used any of the following payment or money transfer methods, even once?**

	Yes	No
Checks	<input type="checkbox"/>	<input type="checkbox"/>
Prepaid cards	<input type="checkbox"/>	<input type="checkbox"/>
Remittances (international money transfer)	<input type="checkbox"/>	<input type="checkbox"/>
Peer-to-peer payment apps (such as Venmo, Zelle, or CashApp)	<input type="checkbox"/>	<input type="checkbox"/>
Virtual currencies (such as bitcoin or Ethereum)	<input type="checkbox"/>	<input type="checkbox"/>
Check cashing services	<input type="checkbox"/>	<input type="checkbox"/>

**24. Does anyone in your household have any stocks, bonds, or mutual funds outside of retirement accounts?**

- Yes
- No

**25. Whether or not your household is currently saving for retirement, does anyone in your household have an IRA, 401(k) account, pension plan, or other retirement account?**

- Yes
- No

**26. Thinking about your non-retirement accounts and any cash savings, about how much money does your household currently have that could be used for unexpected expenses or emergencies?**

\$ \_\_\_\_\_ .00

## D. Housing

27. Did you consider flood or fire risk when you last decided where to live?

- Yes
- No

28. Do you or anyone in your household rent out a property you own for income?

- Yes
- No

29. Do you or someone in your household own your current residence?

- Yes
- No

If you or someone in your household owns your current residence, respond to **Questions XX-XX**, and **Questions XX-XX** if applicable.

30. About how much does your household spend on your mortgage (including property taxes and homeowners insurance) each month?

\$ \_\_\_\_\_ .00

31. Has your household had a homeowners insurance policy cancelled in the past 12 months?

- Yes, the insurance company cancelled it
- Yes, we cancelled it ourselves
- No

32. Does your household currently have homeowners insurance?

- Yes
- No (Skip to **Question XX**)

If nobody in your household owns your current residence, respond to **Questions XX-XX**, and **Questions XX-XX** if applicable.

In the past year, have you . . .

	Yes	No
Been threatened with eviction?	<input type="checkbox"/>	<input type="checkbox"/>
Been given an eviction notice?	<input type="checkbox"/>	<input type="checkbox"/>
Moved because of rent increases?	<input type="checkbox"/>	<input type="checkbox"/>
Moved because your lease was not renewed?	<input type="checkbox"/>	<input type="checkbox"/>
Experienced a rent increase that strained your budget?	<input type="checkbox"/>	<input type="checkbox"/>

33. Do you rent your current residence?

- Yes
- No (Skip to **Question XX**)

34. About how much does your household spend on rent each month?

\$ \_\_\_\_\_ .00

35. In the past year, how often did you not pay or were late with the rent payment?

- Never (Skip to Question XX)
- 1 time
- 2-3 times
- More than 3 times

36. Are you current on your rent payments?

- Yes
- No

## E. Household events

37. In the past 12 months, has your household experienced a significant unexpected expense from any of the following?

	No	Yes	If yes, about how much was the cost?
A major out-of-pocket medical or dental expense	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
An unplanned gift or loan to a family member or friend outside your household	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
A major vehicle repair or replacement	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
A major house or appliance repair	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
A computer or mobile phone repair or replacement	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Legal expenses, taxes, or fines	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Increase in childcare or dependent care expenses	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Moving costs	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Some other major unexpected expense	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00

38. In the past 12 months, has your household experienced a significant drop in income from any of the following?

	No	Yes	If yes, about how much income did you lose because of this circumstance over the past 12 months?
Period of unemployment or furlough	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Reduction in work hours	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Reduction in wages at your job	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Changed to a lower-paying job	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Loss of government benefits	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Worked less because of illness or injury	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Worked less to care for others who were sick or injured	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Worked less or stopped working to take care of children	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Lost rental income from a property you own	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Loss of revenue from a business you own	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Loss of income due to a natural disaster	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00
Other significant drop in income	<input type="checkbox"/>	<input type="checkbox"/>	\$ _____ .00



**39. In the past 12 months, have any of the following happened to your household?**

	Yes	No
Someone in your household got married	<input type="checkbox"/>	<input type="checkbox"/>
Someone in your household divorced or separated	<input type="checkbox"/>	<input type="checkbox"/>
Someone in your household had a major illness or injury	<input type="checkbox"/>	<input type="checkbox"/>
Someone in your household died	<input type="checkbox"/>	<input type="checkbox"/>
Someone was born, adopted, or moved into your household	<input type="checkbox"/>	<input type="checkbox"/>
Someone left your household	<input type="checkbox"/>	<input type="checkbox"/>
Someone in your household retired	<input type="checkbox"/>	<input type="checkbox"/>
Natural disaster affected your home, employer, or business	<input type="checkbox"/>	<input type="checkbox"/>
You moved to a new residence	<input type="checkbox"/>	<input type="checkbox"/>
A car was repossessed	<input type="checkbox"/>	<input type="checkbox"/>
Someone in your household was arrested, charged with a crime, or held in jail or prison	<input type="checkbox"/>	<input type="checkbox"/>
You started a new business	<input type="checkbox"/>	<input type="checkbox"/>
You closed a business you owned	<input type="checkbox"/>	<input type="checkbox"/>

**F. Difficulty paying bills or expenses**

**40. Do you expect to have difficulty paying for a bill or expense in the next 12 months?**

- Yes
- No

**41. In the past year, were you late on a loan payment of any kind?** *Include payments for things like credit cards, buy-now-pay-later purchases, student loan payments, mortgage payments, and any other form of credit.*

- Yes
- No

**42. At any time in the past 12 months have you or your household had difficulty paying for a bill or expense?**

- Yes
- No (Skip to question XX)

**43. How often did you have trouble in the last 12 months?**

- Only once in the last 12 months
- 2 times
- 3 or 4 times
- 5 to 12 times
- More than 12 times

**44. When was the most recent time that you or your household had difficulty paying a bill or expense?**

- In the last month
- 1-3 months ago
- 4-6 months ago
- 7-12 months ago

**45. Thinking back to the most recent time you had difficulty, was there an event or expense that caused this difficulty?**

- Yes
- No

**46. What was that event or expense? Select all that apply.**

- Medical expenses or fees
- Loss of income from illness
- Loss of job
- Other loss of income
- Home repair
- Auto repair
- Taxes or fees
- Legal bills
- Death or funeral costs
- Helping children, parents, or other family members
- Student loan, school, or tuition costs
- Moving costs
- Fraud or theft
- Gambling losses
- Other (specify)

**47. Thinking back to the most recent time you had difficulty, which of the following did you have difficulty paying for? Paying for one major expense may make it harder to pay other bills or expenses, so please mark yes for everything you had difficulty paying for.**

	Yes	No
A medical expense	<input type="checkbox"/>	<input type="checkbox"/>
A car or vehicle repair	<input type="checkbox"/>	<input type="checkbox"/>
A home repair	<input type="checkbox"/>	<input type="checkbox"/>
Food	<input type="checkbox"/>	<input type="checkbox"/>
Mortgage or rent	<input type="checkbox"/>	<input type="checkbox"/>
Utilities	<input type="checkbox"/>	<input type="checkbox"/>
Taxes, fees, or legal bills	<input type="checkbox"/>	<input type="checkbox"/>
Death or funeral costs	<input type="checkbox"/>	<input type="checkbox"/>
Student loan, school, or tuition costs	<input type="checkbox"/>	<input type="checkbox"/>
Childcare	<input type="checkbox"/>	<input type="checkbox"/>
Other regular household expenses	<input type="checkbox"/>	<input type="checkbox"/>
Some other expense	<input type="checkbox"/>	<input type="checkbox"/>

**48. Which of the following did you do when you had difficulty paying the most recent bill or expense? Select all that apply.**

- Did not pay for all of this expense
- Negotiated a lower or delayed payment for this expense
- Used non-retirement savings or investments
- Used retirement savings
- Sold or pawned something
- Cut back on other expenses
- Paid another bill late or skipped a payment
- Increased income, for example, by working overtime or taking an extra job
- Donated plasma or blood for money
- Used a credit card and paid it off over time
- Borrowed money from friends or family
- Took out or used a home equity line of credit
- Took out a loan from a bank, credit union, or other financial institution
- Took out a cash advance from your employer
- Took out a payday or auto title loan
- Other

**49. Thinking back to the most recent time you had difficulty, did you miss a payment for any of the following?**

*Select all that apply.*

- Mortgage
- Credit card bill
- Student loan
- Auto loan
- Payday loan
- Auto title loan
- Personal loan from a bank or other financial services provider
- Loan from a family member, friend, or acquaintance
- Buy-now-pay-later payments
- Cash advance from your employer
- Rent
- Other (Specify)

**50. Getting enough food can also be a problem for some people. In the last 7 days, which of these statements best describes the food eaten in your household?**

- Enough of the kinds of food (I/we) wanted to eat
- Enough, but not always the kinds of food (I/we) wanted to eat
- Sometimes not enough to eat
- Often not enough to eat

**51. In the last 7 days, how difficult has it been for your household to pay for usual household expenses, including but not limited to food, rent or mortgage, car payments, medical expenses, student loans, and so on?**

- Not at all difficult
- A little difficult
- Somewhat difficult
- Very difficult

**52. Which one of the following statements best describes your access to transportation in the past 30 days?**

- Enough transportation to meet your needs
- Enough transportation, but not always the kinds you want to use
- Sometimes not enough transportation to meet your needs
- Often not enough transportation to meet your needs
- Always not enough transportation to meet your needs

## G. Betting

53. Have you placed a bet on a sporting event or outcome in the last year?

- Yes
- No (Skip to Question XX)

54. Did you use a mobile phone to place a bet?

- Yes
- No

55. How frequently did you take part in sports betting in the past year?

- Once
- A few times
- Monthly
- Weekly
- A few times a week
- Daily

56. In the past year, how much money did you wager for a typical bet?

- Less than \$10
- Between \$11 and \$20
- Between \$21 and \$50
- Between \$51 and \$100
- Between \$101 to \$250
- More than \$250

57. In the past year, what was your largest loss in a single day?

- Less than \$10
- Between \$11 and \$50
- Between \$51 and \$100
- Between \$101 and \$250
- Between \$251 and \$500
- More than \$500

58. Did you gamble at a casino in the last year?

- Yes
- No

59. Did you gamble online or on your phone on something other than a sporting event in the last year?

- Yes
- No

## H. Medical insurance and debt

60. Do you have health insurance (through an employer, purchased independently, or from a government program like Medicare or Medicaid)?

- Yes
- No

61. Are you currently covered by any of the following types of health insurance or health coverage plans?

	Yes	No
Insurance through a current or former employer or union (through yourself or another family member)	<input type="checkbox"/>	<input type="checkbox"/>
Insurance purchased directly from an insurance company, including marketplace coverage (through yourself or another family member)	<input type="checkbox"/>	<input type="checkbox"/>
Medicare, for people 65 and older, or people with certain disabilities	<input type="checkbox"/>	<input type="checkbox"/>
Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability	<input type="checkbox"/>	<input type="checkbox"/>
TRICARE or other military health care	<input type="checkbox"/>	<input type="checkbox"/>
VA (including those who have ever used or enrolled for VA health care)	<input type="checkbox"/>	<input type="checkbox"/>
Indian Health Service	<input type="checkbox"/>	<input type="checkbox"/>
Other (Specify)	<input type="checkbox"/>	<input type="checkbox"/>

62. Does everyone else in your household have health insurance?

- Yes
- No

63. Do you or your household have any medical or dental bills that are past due or that you are unable to pay?
- Yes
  - No
64. Do you or your household have any medical or dental bills that you are paying off over time directly to the provider?
- Yes
  - No
65. Do you or your household owe money because you took out a loan or used a credit card to pay medical or dental bills?
- Yes
  - No
66. Do you have a credit card that only lets you pay for medical or dental expenses with it? Please *do not* include debit cards for prepaid accounts like a Health Savings Account (HSA) or Flexible Spending Account (FSA).
- Yes
  - No
67. In the past year, have you been contacted by someone other than your medical or dental provider to collect a past-due medical or dental bill?
- Yes
  - No (Skip to Question XX)
68. In the past year, how many different bills has someone other than your medical or dental provider tried to collect from you?
- 1 bill
  - 2-4 bills
  - 5 or more bills
69. In the past year, how often has someone other than your medical or dental provider tried to collect a past-due medical or dental bill from you?
- More than once per week
  - Weekly
  - A few times per month
  - Monthly
  - Once every few months
  - Only once
70. In the past month, about how much in past-due medical or dental bills has someone other than your medical or dental provider tried to collect from you?
- \$\_\_\_\_\_.
71. When were you most recently contacted by someone other than your medical or dental provider to collect a past-due medical or dental bill?
- Less than a month ago
  - 1 to 3 months ago
  - 4 to 6 months ago
  - 7 to 12 months ago
72. The most recent time you were contacted, about how much was the bill?
- \$\_\_\_\_\_.
73. The most recent time you were contacted, did you dispute the bill?
- Yes
  - No

## I. Experiences with Credit

74. Without looking it up, what is your approximate credit score? It is okay if you have to guess.
- My credit score is (enter a number ranging from 300 to 850): [Enter number]
75. When was the last time you checked your credit score or credit report?
- Never
  - At least one year ago
  - Within the last year

**76. How do you think your credit score has changed over the last year?**

- Gone up
- Stayed about the same
- Gone down

**77. What sources of information do you use to make decisions about borrowing, credit, savings, or investments?**

**Select all that apply**

- Family or friends
- Financial planner, advisor, or broker
- Internet, web service or application
- Banker, lawyer or accountant
- Book/magazine/newspaper/mail
- Podcasts, radio, or television
- Conferences, workshops, or other events
- Social media (TikTok, YouTube, Reddit, etc)

**78. Which social media sites did you use to find information to make decisions about borrowing, credit, savings, or investments? Select all that apply**

- TikTok
- Twitter/X
- Facebook
- WhatsApp
- YouTube
- Instagram
- Snapchat
- Reddit
- Discord
- Other (Specify)

**79. Have you applied for any type of credit or loan in the past year?**

- Yes
- No (Skip to Question XX)

**80. In the past year, were you turned down for a loan or not given as much credit as you applied for?**

- Yes
- No (Skip to Question XX)

**81. Did you then apply somewhere else?**

- Yes
- No

**82. Thinking back to the most recent credit or loan you applied for, what factors did you consider when choosing what to apply for?**

- Fees
- Interest rates
- Rewards (such as cash back, bonus points, or miles)
- Monthly payment
- Likelihood of qualifying
- Reputation
- Recommendation from family or friends
- Other (Specify)

**83. In the past year, did you think of applying for credit or a loan but changed your mind because you thought you might be turned down?**

- Yes
- No

**84. In the past year, did you think of applying for credit or a loan but changed your mind for any of the following reasons?**

	Ye s	N o
Interest rates were too high		
I decided that I was able to afford what I wanted without credit		
I decided that I didn't want to go into debt		
I did not trust any of the lenders I found		
I did not understand the details of the credit or loans I was considering		
Some other reason (Specify)		

**85. Did you refinance any loans in the past year?**

- Yes
- No

**86. Have you taken out a pawn shop loan in the past 12 months?**

- Yes
- No

**87. Have you taken out an auto title loan in the past 12 months?** *An auto title loan uses the car's value to borrow money for a short period of time.*

- Yes
- No

**88. Have you used earned wage access in the past 12 months?** *Earned wage access allows workers access to a portion of their paycheck before payday. It is also called on-demand pay, instant pay, or a paycheck advance.*

- Yes, through a service or app connected to my employer
- Yes, through an app not connected to my employer
- No (Skip to Question XX)

**89. If yes, did you pay a fee or tip to access the money?**

- Yes
- No (Skip to Question XX)

**90. Did you pay the fee or tip so that you could access the money quickly?**

- Yes
- No

**91. Have you taken out a payday loan in the past 12 months or continued to owe money on a previous payday loan?** *A payday loan is a loan that you must repay, make a payment on, or rollover on your next payday.*

- Yes
- No (Skip to Question XX)

**92. Have you rolled over a payday loan in the last 12 months?**

- Yes
- No

**93. In the past year, how many times have you purchased something using a "buy now, pay later" option, in which you did not pay for the full price at the time of purchase, but rather paid in four or fewer interest-free installments?** *Some retailers offer these payment plans through companies such as Affirm, Afterpay, and Klarna.*

- Never in the past year
- 1-2 times
- 3-6 times
- More than 6 times

**94. Do you have an auto loan?**

- Yes
- No (Skip to Question XX)

**95. Did you get the auto loan through the dealer or by going to a lender yourself?**

- Through the dealer
- By going to a lender myself
- Don't know

**96. In the past year, did a credit card company unexpectedly cancel your credit card or reduce your credit card limit?**

- Yes
- No

**97. Do you currently have a credit card?**

- Yes
- No (Skip to Question XX)

**98. In the past 12 months, have you incurred a late fee on any of your credit cards?**

- Yes
- No

**99. Did you have an unpaid balance on any of your cards after making your last payment?**

- Yes
- No (Skip to Question XX)

**100. Do you think you will pay the full balance in the next year?**

- Yes
- No

**101. Do you have autopay set up for the credit card you use most regularly?** *Autopay has an amount automatically deducted from your bank account to pay your credit card bill.*

- Yes
- No (Skip to Question XX)

**102. How is your autopay set up?**

- To pay the minimum payment
- To pay the full statement balance
- To pay some other amount

**103. In the past 12 months, how many overdraft fees have you or others in your household been charged?** *An overdraft fee occurs when your account balance is less than a payment, but your bank covers the transaction and charges you a fee.*

- Not in the past 12 months
- 1-3 fees
- 4-10 fees
- More than 10 fees

**104. In the past 12 months, how many insufficient funds fees have you or others in your household been charged?** *An insufficient funds fee occurs when your account balance is less than a payment, and your bank denies the payment and charges you a fee.*

- Not in the past 12 months
- 1-3 fees
- More than 4 fees

**105. Do you currently have any student loans?** *Include any loans that you took out for someone else's education in addition to any loans you have taken out for your own education.*

- Yes
- No à Skip to **Question XX**

**106. About how much are you paying on all of your student loans each month?**

\$ \_\_\_\_\_ .00

**107. What type of student loans do you have?**

- Private student loans only
- Federal student loans only
- Both private and federal student loans

**108. Have you started making payments on your federal student loans after the pandemic pause for federal student loan repayment?**

- Yes, before October 2023
- Yes, in October 2023
- Yes, in November or December 2023
- Yes, in January 2024 or later
- I haven't started making payments yet



**109. Has anyone else ever made payments on the student loans you took out (for your own or someone else's education)?**

- No, I have made all the payments
- Yes, but I've made more than half of the payments
- Yes, but I've made about half of the payments
- Yes, but I've made less than half of the payments
- Yes, and I have not made any payments
- Not applicable, I have never had a student loan

**110. Have you ever helped repay a student loan someone else took out for their education?** *Select all that apply.*

- Yes, for a spouse or partner
- Yes, for a child or grandchild
- Yes, for someone else not listed above
- No

## **J. Credit repair**

**111. In the past year, have you paid a company or service to try to help repair your credit or improve your credit score?**

- Yes
- No (Skip to Question XX)

**112. Was there a specific reason you wanted to improve your credit or credit score?**

- Yes
- No (Skip to Question XX)

**113. What was the reason for trying to improve your credit or credit score?** *Select all that apply*

- Qualify for a mortgage
- Qualify for a credit card
- Qualify for an auto loan
- Rent an apartment
- For a job
- Get better terms on a loan or credit card
- Refinance existing loans
- Access credit for my business
- General credit health
- Other specify:

**114. Who did you pay to help repair your credit?** *Select all that apply*

- Credit repair services, where you pay a company that provides dispute templates or promises to fix your credit or improve your credit score by disputing items on your credit report
- Credit counseling, where a nonprofit or professional advises you on managing your money and debts
- Debt consolidation loans, where you pay a company to combine your debts into one loan that you pay off in installments
- Debt relief or settlement companies, that say they can renegotiate, settle, or in some way change the terms of a person's debt to a creditor or debt collector.
- Other specify:

**115. In your experience paying for a credit repair service, approximately how much did you spend in total trying to fix your credit?**

- Less than \$250
- \$251 to \$500
- \$501 to \$750
- \$751 to \$1,000
- More than \$1,000

**116. In your experience paying for a credit repair service, were you required to make any payments before you saw results?**

- Yes
- No

**117. How successful was the company or service you paid in improving your credit?**

- Very successful
- Somewhat successful
- Not successful at all
- I'm still in the process (i.e., no results yet)
- I don't know

**118. In the past year, have you disputed an item on your credit report by contacting a credit bureau?**

- Yes
- No (Skip to Question XX)

**119. If yes, was it removed?**

- Yes
- No

## K. Scams and Fraud

**120. In the past year, have you lost money to any of the following type(s) of fraud or scams? Include any instances where the money or property was eventually recovered or refunded.**

	Yes	No
Theft, misuse, or financial exploitation by a known or trusted person		
Credit or debit card fraud or unauthorized use		
Imposter scams (where scammers impersonate tech support, government, businesses, charities, or family members)		
Phishing scams (where scammers steal your password or other personal information)		
Investment scams (including fake cryptocurrency investments)		
Prize, sweepstakes, or lottery scams		
Fake business or job opportunity		
Online shopping scams		
Identity theft		
Social media scams		
Some other type of fraud or scam (please specify):		

**121. In the past year, how many times have you lost money to a fraud or scam?**

- Never (Skip to Question XX)
- One time
- Two or three times
- More than three times

**122. For the most recent fraud or scam, did you ultimately lose any money?**

- I lost money, but all of it was recovered or refunded.
- I lost money, and most of it was recovered or refunded.
- I lost money, and some of it was recovered or refunded.
- I lost money, and none of it was recovered or refunded.
- I did not lose any money to the most recent fraud or scam

**123. Approximately how much money did you lose before any of it was recovered?**

a. \_\_\_\_\_

**124. For the most recent fraud or scam you lost money to, what service or product was involved?**

- Credit card
- Debit card
- Peer to Peer payment service (such as Zelle, PayPal, or Venmo)
- Bank wire transfer or payment
- Personal check
- Cashier's check or money order
- Cash withdrawal (from an ATM or a branch)
- Loan
- Cryptocurrency
- Other service or product (please specify): \_\_\_\_\_

**125. Did you report the fraud or scam that you lost money to most recently to any of the following? *Select all that apply***

- Your bank or financial institution
- Your credit card company
- One or more credit bureau (Equifax, Experian, TransUnion)
- Local law enforcement (such as a police department or sheriff's office)
- A federal agency, such as the Federal Trade Commission (FTC), the Consumer Financial Protection Bureau (CFPB), or the Federal Bureau of Investigations (FBI)
- Better Business Bureau
- Some other entity (please specify):
- I did not report the fraud or scam

**126. Did anyone help you resolve your problem? *Select all that apply.***

- I did not receive help
- A financial professional or lawyer that you hired
- Family
- Law enforcement
- Bank or financial institution
- Community organization
- Other state or local agency
- A federal agency
- Other, please specify:

## L. You and your household

**127. Would you say your health in general is ...?**

- Excellent
- Very Good
- Good
- Fair
- Poor

**128. What is your current marital status?**

- Married
- Never married, living with a partner
- Never married, not living with a partner
- Separated
- Divorced
- Widowed

**129. Besides you and your spouse/partner, how many other adults over 18 live in your household?**

- No others
- 1 other
- 2 or more

**130. How many children live in your household?**

- No children
- 1
- 2 or more

**131. Are these children currently covered by Medicaid, the Children's Health Insurance Program (CHIP), or any kind of government health insurance plan for those with low incomes or a disability?**

- Yes
- No

**132. What is your race and/or ethnicity?** *Select all that apply. Note, you may report more than one group.*

- American Indian or Alaska Native
- Asian
- Hispanic or Latino
- Black or African American
- Middle Eastern or North African
- Native Hawaiian or Pacific Islander
- White

**133. Were you born in the United States?**

- Yes
- No

**134. What is your highest level of education?**

- Less than a high school degree
- High school degree
- Technical or vocational degree
- Some college, but no degree
- Two-year college degree
- Four-year college degree
- Postgraduate degree (for example, MA, PhD, JD, MBA, MD)

**135. Are you currently attending school?**

- Yes, full time
- Yes, part time
- No

**136. Did either of your parents complete a four-year college degree?**

- Yes
- No

**137. What is your current military status?**

	You	Spouse/ partner
No military service	<input type="checkbox"/>	<input type="checkbox"/>
On active duty	<input type="checkbox"/>	<input type="checkbox"/>
Reserve or National Guard	<input type="checkbox"/>	<input type="checkbox"/>
Veteran or retired	<input type="checkbox"/>	<input type="checkbox"/>

**138. What is your gender?** *Please mark all that apply.*

- Male
- Female
- Non-binary
- Prefer not to answer

**139. Do you consider yourself to be?**

- Straight or heterosexual
- Gay, lesbian, or homosexual
- Bisexual
- Other or don't know
- Prefer not to answer

## M. Perspectives

140. Suppose you won a prize and could decide when you would get the amount. Would you rather get:
- \$1000 in one month or
  - \$1050 in six months
141. Suppose you won a prize and could decide when you would get the amount. Would you rather get:
- \$1000 in one month or
  - \$1100 in six months
142. Suppose you won a prize and could decide when you would get the amount. Would you rather get:
- \$1000 in one month or
  - \$1150 in six months

In some of the following questions, we will ask you to think about the percent chance of something happening in the future. Your answers can range from 0 to 100, where 0 means there is absolutely no chance, and 100 means that it is absolutely certain.

For example, numbers like:

- 2 and 5 percent may indicate "almost no chance"
- 18 percent or so may mean "not much chance"
- 47 or 52 percent chance may be a "pretty even chance"
- 83 percent or so may mean a "very good chance"
- 95 or 98 percent chance may be "almost certain"

### 143. How likely is it that...

You move to a new residence in the next year	_____ %
Your credit score will go <u>down</u> by more than 20 points in the next year?	_____ %
Your household will experience a significant income drop from a period of unemployment or furlough in the next year?	_____ %
You will experience a major out-of-pocket medical or dental expense in the next year?	_____ %
You will experience a major vehicle repair or replacement expense in the next year?	_____ %
How likely is it that you will experience an unexpected major house or appliance repair or replacement in the next year?	_____ %

We have provided the space below if you wish to share additional comments or further explain any of your responses. *Please do not share any Personally Identifiable Information (PII), including, but not limited to, your name, address, phone number, email address, Social Security number, etc.*

## N. Contingency questions for possible inclusion and flexibility

1. **In the past year, were you late on a loan payment of any kind?** *Include payments for things like credit cards, buy-now-pay-later purchases, student loan payments, mortgage payments, and any other form of credit.*
  - Yes
  - No (Skip to Question XX)
2. **Were you late on any of the following?** *Select all that apply.*
  - Mortgage
  - Credit card bill
  - Student loan
  - Auto loan
  - Payday loan
  - Auto title loan
  - Personal loan from a bank or other financial services provider
  - Loan from a family member, friend, or acquaintance
  - Buy-now-pay-later payments
  - Cash advance from your employer
  - Rent
  - Other (Specify)
3. **Thinking about the most recent time you were late on a loan, was there an event or expense that caused you to be late?**
  - Yes
  - No
4. **What was that event or expense?** *Select all that apply.*
  - Medical expenses or fees
  - Loss of income from illness
  - Loss of job
  - Other loss of income
  - Home repair
  - Auto repair
  - Taxes or fees
  - Legal bills
  - Death or funeral costs
  - Helping children, parents, or other family members
  - Student loan, school, or tuition costs
  - Moving costs
  - Fraud or theft
  - Gambling losses
  - Other (specify)
5. **About how large was the bill, expense, or loss of income from this event?**
  - \_\_\_\_\_
6. **Was this event expected or unexpected?**
  - Expected
  - Unexpected
7. **What did you do when you were late on your payment?** *Select all that apply.*
  - Made the payment in full as soon as I realized I was late
  - Took money from savings, investment, or a retirement account
  - Negotiated a lower or delayed payment
  - Reduced total spending in order to make payments
  - Spent less on necessities in order to make payments
  - Paid another bill late or skipped a payment for a different loan
  - Increased income, for example, by working overtime or taking an extra job
  - Worked with a professional financial coach or counselor
  - Sold something
  - Borrowed money from a different source
  - Other (specify)
8. **If you borrowed money, which of the following did you do?** *(Select all that apply)*
  - Pawned something

- Borrowed from an IRA, 401k, or retirement account
- Used a credit card
- Took out or used a home equity line of credit
- Took out a loan from a bank, credit union, or other financial institution
- Borrowed from friends or family
- Took out a payday loan
- Took out an auto-title loan
- Borrowed from an unlicensed lender who charges interest
- Other (please specify)

**9. If you sold something, what did you sell?**

- Valuables, such as jewelry or collectibles
- Large possessions, such as furniture
- A car or other motor vehicle you use for transport
- Investment assets, such as stocks or bonds
- The property where you resided
- Another property you owned
- Other (specify)

**10. Thinking back to when you first took out this loan, do any of the following apply to your situation?**

	Yes	No
I would have been able to make the payments at the time, but something unforeseen occurred that made it difficult	<input type="checkbox"/>	<input type="checkbox"/>
I anticipated that something would happen that would allow me to make the payments, but that didn't happen	<input type="checkbox"/>	<input type="checkbox"/>
In retrospect, I should have anticipated that I would not be able to make the payments	<input type="checkbox"/>	<input type="checkbox"/>
I didn't consider my future ability to make payments when choosing this loan	<input type="checkbox"/>	<input type="checkbox"/>