U.S. CENSUS BUREAU

U.S. DEPARTMENT OF COMMERCE Economics and Statistics Administration

* CHILLIS OF A BUT OF COMPANY

THE American Community Survey

Start Here

Respond online today at: https://respond.census.gov/qdt

OR

Complete this form and mail it back as soon as possible.

This form asks for information about the people who are living or staying at the address on the mailing label and about the house, apartment, or mobile home located at the address on the mailing label.



If you need help or have questions about completing this form, please call 1-888-595-1327.

The telephone call is free.

Telephone Device for the Deaf (TDD): Call 1–800–582–8330. The telephone call is free.

¿NECESITA AYUDA? Si usted habla español y necesita ayuda para completar su cuestionario, llame sin cargo alguno al 1-888-369-3615. Usted también puede completar su entrevista por teléfono con un entrevistador que habla español. O puede responder por Internet en: https://respond.census.gov/qdt

For more information about the American Community Survey, visit our web site at: http://www.census.gov/acs/www/

,				
person	print the name a who is filling ou ere is a question. ne	ıt this fo	hone numb rm. We may	er of the contact
First Na	me			r
Area Co	de + Number			
• INCL more	any people are I JDE everyone who than 2 months. JDE yourself if you	is living	or staying her	e for
2 moi	ths. ' JDE anyone else s er place to stay, ev	taying her	e who does r	ot have
• DO N for m	OT INCLUDE anyone than 2 months, or someone in the	such as a	college stude	nt living
Numbe	of people			



OMB No. 0607-0936

	Person 1	Person 2			
	(Person 1 is the person living or staying here in whose name this house or apartment is owned, being bought, or rented. If there is no such person, start with the name	What is Person 2's name? Last Name (Please print) First Name MI			
	af ann aghala lining an atariban hana \	How is this person related to Person 1? Mark (X) ONE box.			
1		Husband or wife Biological son or daughter Adopted son or daughter Stepson or stepdaughter Brother or sister Father or mother Son-in-law or daughter-in-law Other relative Roomer or boarder Housemate or roommate Unmarried partner			
	Mark (X) ONE box. Person 1	Grandchild Parent-in-law Foster child Other nonrelative			
3	What is Person 1's age and what is Person 1's date of birth? Please report babies as age 0 when the child is less than 1 year old. Print numbers in boxes. Age (in years) Month Day Year of birth NOTE: Please answer BOTH Question 5 about Hispanic origin and Question 6 about race. For this survey, Hispanic origins are not races.	What is Person 2's sex? Mark (X) ONE box. Male			
6	What is Person 1's race? Mark (X) one or more boxes. White Black, African Am., or Negro American Indian or Alaska Native – Print name of enrolled or principal tribe.	What is Person 2's race? Mark (X) one or more boxes. White Black, African Am., or Negro American Indian or Alaska Native – Print name of enrolled or principal tribe.			
	Asian Indian Chinese Korean Vietnamese Other Asian – Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.	Asian Indian Chinese Korean Guamanian or Chamorro Samoan Other Asian – Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.			
	Some other race – Print race.	☐ Some other race – Print race. ☐			

Person 3	Person 4
What is Person 3's name? Last Name (Please print) First Name MI	What is Person 4's name? Last Name (Please print) First Name MI
How is this person related to Person 1? Mark (X) ONE box.	How is this person related to Person 1? Mark (X) ONE box.
Husband or wife Biological son or daughter Adopted son or daughter Stepson or stepdaughter Brother or sister Father or mother Grandchild Parent-in-law Son-in-law or daughter Roomer or boarder Housemate or roommate Unmarried partner Foster child Other nonrelative	Husband or wife Biological son or daughter Adopted son or daughter Stepson or stepdaughter Brother or sister Father or mother Grandchild Parent-in-law Son-in-law or daughter-In-law Other relative Roomer or boarder Housemate or roommate Unmarried partner Foster child Other nonrelative
What is Person 3's sex? Mark (X) ONE box. Male Female	What is Person 4's sex? Mark (X) ONE box. Male Female
No, not of Hispanic, Latino, or Spanish origin Yes, Mexican, Mexican Am., Chicano Yes, Puerto Rican Yes, Cuban Yes, another Hispanic, Latino, or Spanish origin − Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on. ✓	What is Person 4's age and what is Person 4's date of birth? Please report babies as age 0 when the child is less than 1 year old. Print numbers in boxes. Age (in years) Nonth Day Year of birth NOTE: Please answer BOTH Question 5 about Hispanic origin and Question 6 about race. For this survey, Hispanic origins are not races. Is Person 4 of Hispanic, Latino, or Spanish origin? No, not of Hispanic, Latino, or Spanish origin? Yes, Mexican, Mexican Am., Chicano Yes, Puerto Rican Yes, cuban Yes, another Hispanic, Latino, or Spanish origin − Print origin, for example, Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on. What is Person 4's race? Mark (X) one or more boxes. White Black, African Am., or Negro American Indian or Alaska Native − Print name of enrolled or principal tribe. Print origin for example, Print name of enrolled or principal tribe.
Asian Indian Chinese Korean Filipino Other Asian – Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.	Asian Indian Chinese Korean Vietnamese Other Asian – Print race, for example, Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.
☐ Some other race – Print race. ✓	Some other race – Print race.

What is Person 5's name? Last Name (Please print)	on 5 First Name MI	If there are more than five people living or staying here, print their names in the spaces for Person 6 through Person 12. We may call you for more information about them.
		Person 6
How is this person related to Mark (X) ONE box.		Last Name (Please print) First Name MI
Husband or wife Biological son or daughter Adopted son or daughter Stepson or stepdaughter Brother or sister Father or mother Grandchild Parent-in-law	Son-in-law or daughter-in-law Other relative Roomer or boarder Housemate or roommate Unmarried partner Foster child Other nonrelative	Sex Male Female Age (in years) Person 7 Last Name (Please print) First Name MI
What is Person 5's sex? Mar.	k (X) ONE box.	
☐ Male ☐ Female	9	Sex Male Female Age (in years)
What is Person 5's age and value of birth? Please report b	what is Person 5's abies as age 0 when the	Person 8
child is less than 1 year old. Pl Age (in years) Montl	rint numbers in boxes. n Day Year of birth	Last Name (Please print) First Name MI
NOTE: Please answer BOTH Hispanic origin and Question survey, Hispanic origins are r	6 about race. For this	Sex Male Female Age (in years)
Is Person 5 of Hispanic, Latino, No, not of Hispanic, Latino, Yes, Mexican, Mexican Am. Yes, Puerto Rican	or Spanish origin	Person 9 Last Name (Please print) First Name MI
Yes, Cuban Yes, another Hispanic, Latin Print origin, for example, Argen Nicaraguan, Salvadoran, Spania	itinean, Colombian, Dominican,	Sex Male Female Age (in years)
What is Person 5's race? Ma		Person 10 Last Name (Please print) First Name MI
☐ Black, African Am., or Negro ☐ American Indian or Alaska Nenrolled or principal tribe.		Sex Male Female Age (in years)
Asian Indian Japan Chinese Korea	n Guamanian or	Person 11 Last Name (Please print) First Name MI
Filipino Vietna Other Asian – Print race, for example, Hmong, Laotian, Thai,	Chamorro Samoan Other Pacific Islander – Print race, for example,	Sex Male Female Age (in years)
Pakistani, Cambodian, and so on.	Fijian, Tongan, and so on.	Person 12 Last Name (Please print) First Name MI
Some other race – Print race	e. 🗸	
		Sex Male Female Age (in years)

Housing

	Please answer the following questions about the house, apartment, or mobile home at the address on the mailing label.	Answer questions 4 – 6 if this is a HOUSE OR A MOBILE HOME; otherwise, SKIP to question 7a.
3	Which best describes this building? Include all apartments, flats, etc., even if vacant. A mobile home A one-family house detached from any other house A one-family house attached to one or more houses A building with 2 apartments	How many acres is this house or mobile home on? Less than 1 acre → SKIP to question 6 1 to 9.9 acres 10 or more acres IN THE PAST 12 MONTHS, what were the actual sales of all agricultural products from this property? None \$1 to \$999 \$1,000 to \$2,499 \$2,500 to \$4,999 \$5,000 to \$9,999 \$10,000 or more Yes No No A. How many separate rooms are in this house, apartment, or mobile home? Rooms must be separated by built-in archways or walls that extend out at least 6 inches and go from floor to ceiling. • INCLUDE bedrooms, kitchens, etc. • EXCLUDE bathrooms, porches, balconies, foyers, halls, or unfinished basements. Number of rooms D. How many of these rooms are bedrooms? Count as bedrooms those rooms you would list if this house, apartment, or mobile home were for sale or rent. If this is an efficiency/studio apartment, print "0". Number of bedrooms



Housing (continued)

have –	nobile h Yes	ome No		How many automobiles, vans, and trucks of one-ton capacity or less are kept at home for
a. hot and cold running water?				use by members of this household?
b. a flush toilet?				None
				<u> </u>
c. a bathtub or shower?				 2 3
d. a sink with a faucet?				☐ 4
e. a stove or range?				□ 5
f. a refrigerator?				6 or more
g. telephone service from which you can both make and receive calls? <i>Include cell phones</i> .				Which FUEL is used MOST for heating this house, apartment, or mobile home?
At this house, apartment, or moldo you or any member of this holown or use any of the following	usehold	l		Gas: from underground pipes serving the neighborhood
• EXCLUDE GPS devices, digital m	nusic play			Gas: bottled, tank, or LP
and devices with only limited cor capabilities, for example: househ				☐ Electricity
appliances.	Yes	No		Fuel oil, kerosene, etc.
a. Desktop, laptop, netbook, or notebook computer				Coal or coke
b. Handheld computer,				Wood
smart mobile phone, or other handheld wireless computer				Solar energyOther fuel
·				No fuel used
 c. Some other type of computer Specify ✓ 	ш	Ш		
c. Some other type of computer Specify			14	a. LAST MONTH, what was the cost of electric for this house, apartment, or mobile home?
Specify				a. LAST MONTH, what was the cost of electric for this house, apartment, or mobile home? Last month's cost – Dollars
At this house, apartment, or mol do you or any member of this ho access the Internet?	bile hon	1e -		for this house, apartment, or mobile home?
At this house, apartment, or mol do you or any member of this ho	bile hon usehold	ne – I		for this house, apartment, or mobile home? Last month's cost – Dollars OR
At this house, apartment, or mol do you or any member of this ho access the Internet? Yes, with a subscription to an Ir	bile hon usehold	ne – I ervice		for this house, apartment, or mobile home? Last month's cost – Dollars Solution OR Included in rent or condominium fee
At this house, apartment, or mol do you or any member of this ho access the Internet? ☐ Yes, with a subscription to an Ir ☐ Yes, without a subscription to a service → SKIP to question 12	bile hon usehold nternet s	ne – I ervice et		for this house, apartment, or mobile home? Last month's cost – Dollars OR
At this house, apartment, or mol do you or any member of this ho access the Internet? Yes, with a subscription to an Ir	bile hon busehold nternet s an Interne	ne – I ervice et		for this house, apartment, or mobile home? Last month's cost – Dollars Solution OR Included in rent or condominium fee
At this house, apartment, or moldo you or any member of this ho access the Internet? Yes, with a subscription to an Ir Yes, without a subscription to a service → SKIP to question 12 No Internet access at this house or mobile home → SKIP to question 4 this house, apartment, or moldo you or any member of this house.	bile hon ousehold nternet s an Internet e, apartm stion 12 bile hon usehold	ervice et nent,		COR Included in rent or condominium fee No charge or electricity not used DATE OF THE OF T
At this house, apartment, or mol do you or any member of this ho access the Internet? Yes, with a subscription to an Ir Yes, without a subscription to a service → SKIP to question 12 No Internet access at this house or mobile home → SKIP to question 12 At this house, apartment, or mol do you or any member of this house, subscribe to the Internet using —	bile hon busehold internet s an Internet e, apartm stion 12 bile hon usehold	ne – I ervice et nent,		CR Included in rent or condominium fee No charge or electricity not used b. LAST MONTH, what was the cost of gas for house, apartment, or mobile home? Last month's cost – Dollars \$.00
At this house, apartment, or moldo you or any member of this hoaccess the Internet? Yes, with a subscription to an Ir Yes, without a subscription to a service → SKIP to question 12 No Internet access at this house or mobile home → SKIP to question 4 At this house, apartment, or moldo you or any member of this hos subscribe to the Internet using — a. Dial-up service?	bile hon ousehold nternet s an Internet e, apartm stion 12 bile hon usehold	ervice et nent,		CR Included in rent or condominium fee No charge or electricity not used b. LAST MONTH, what was the cost of gas for house, apartment, or mobile home? Last month's cost – Dollars OR OR
At this house, apartment, or moldo you or any member of this hoaccess the Internet? Yes, with a subscription to an Ir Yes, without a subscription to a service → SKIP to question 12 No Internet access at this house or mobile home → SKIP to question 4 At this house, apartment, or moldo you or any member of this hosubscribe to the Internet using – a. Dial-up service? b. DSL service?	bile hon ousehold nternet s an Internet e, apartm stion 12 bile hon usehold	ervice et nent,		CR Included in rent or condominium fee No charge or electricity not used b. LAST MONTH, what was the cost of gas for house, apartment, or mobile home? Last month's cost – Dollars \$.00
At this house, apartment, or mol do you or any member of this ho access the Internet? Yes, with a subscription to an Ir Yes, without a subscription to a service → SKIP to question 12 No Internet access at this house or mobile home → SKIP to question 4. At this house, apartment, or mol do you or any member of this house subscribe to the Internet using – a. Dial-up service? b. DSL service? c. Cable modem service?	bile hon ousehold nternet s an Internet e, apartm stion 12 bile hon usehold	ervice et		For this house, apartment, or mobile home? Last month's cost - Dollars OR Included in rent or condominium fee No charge or electricity not used b. LAST MONTH, what was the cost of gas for house, apartment, or mobile home? Last month's cost - Dollars OR Included in rent or condominium fee
At this house, apartment, or moldo you or any member of this hoaccess the Internet? Yes, with a subscription to an Ir Yes, without a subscription to a service → SKIP to question 12 No Internet access at this house or mobile home → SKIP to question 12 At this house, apartment, or moldo you or any member of this hos subscribe to the Internet using — a. Dial-up service? b. DSL service? c. Cable modem service?	bile hon ousehold nternet s an Internet e, apartm stion 12 bile hon usehold	ervice et nent,		CR Included in rent or mobile home? Last month's cost – Dollars OR Included in rent or condominium fee No charge or electricity not used b. LAST MONTH, what was the cost of gas for house, apartment, or mobile home? Last month's cost – Dollars OR Included in rent or condominium fee Included in electricity payment entered above
At this house, apartment, or mol do you or any member of this ho access the Internet? Yes, with a subscription to an Ir Yes, without a subscription to a service → SKIP to question 12 No Internet access at this house or mobile home → SKIP to question 4. At this house, apartment, or mol do you or any member of this house subscribe to the Internet using – a. Dial-up service? b. DSL service? c. Cable modem service?	bile hon ousehold nternet s an Internet e, apartm stion 12 bile hon usehold	ervice et		CR Included in rent or mobile home? Last month's cost – Dollars OR Included in rent or condominium fee No charge or electricity not used b. LAST MONTH, what was the cost of gas for house, apartment, or mobile home? Last month's cost – Dollars OR Included in rent or condominium fee Included in electricity payment entered above
At this house, apartment, or moldo you or any member of this hoaccess the Internet? Yes, with a subscription to an Ir Yes, without a subscription to a service → SKIP to question 12 No Internet access at this house or mobile home → SKIP to question 12 At this house, apartment, or moldo you or any member of this hos subscribe to the Internet using — a. Dial-up service? b. DSL service? c. Cable modem service? d. Fiber-optic service? e. Mobile broadband plan for	bile hon ousehold nternet s an Internet e, apartm stion 12 bile hon usehold	ervice et nent, No		CR Included in rent or mobile home? Last month's cost – Dollars OR Included in rent or condominium fee No charge or electricity not used b. LAST MONTH, what was the cost of gas for house, apartment, or mobile home? Last month's cost – Dollars OR Included in rent or condominium fee Included in electricity payment entered above
At this house, apartment, or mol do you or any member of this ho access the Internet? Yes, with a subscription to an Ir Yes, without a subscription to a service → SKIP to question 12 No Internet access at this house or mobile home → SKIP to question 12 At this house, apartment, or mol do you or any member of this hos subscribe to the Internet using — a. Dial-up service? b. DSL service? c. Cable modem service? d. Fiber-optic service? e. Mobile broadband plan for a computer or a cell phone?	bile hon ousehold nternet s an Internet e, apartm stion 12 bile hon usehold	ervice et No		CR Included in rent or mobile home? Last month's cost – Dollars OR Included in rent or condominium fee No charge or electricity not used b. LAST MONTH, what was the cost of gas for house, apartment, or mobile home? Last month's cost – Dollars OR Included in rent or condominium fee Included in electricity payment entered above

Housing (continued)

c. IN THE PAST 12 MONTHS, what was the cost of water and sewer for this house, apartment,	Is this house, apartment, or mobile home – Mark (X) ONE box.
or mobile home? If you have lived here less than 12 months, estimate the cost.	Owned by you or someone in this household
Past 12 months' cost – <i>Dollars</i>	with a mortgage or loan? Include home equity loans.
\$.00	Owned by you or someone in this household free and clear (without a mortgage or loan)?
OR	Rented?
☐ Included in rent or condominium fee	☐ Occupied without payment of rent? → SKIP to C
☐ No charge	
d. IN THE PAST 12 MONTHS, what was the cost of oil, coal, kerosene, wood, etc., for this house, apartment, or mobile home? If you have lived here less than 12 months, estimate the cost.	Answer questions 18a and b if this house, apartment, or mobile home is RENTED. Otherwise, SKIP to question 19.
Past 12 months' cost – Dollars	a. What is the monthly rent for this house, apartment, or mobile home?
\$.00	Monthly amount – Dollars
OR	\$.00
Included in rent or condominium fee	
No charge or these fuels not used	b. Does the monthly rent include any meals?
5 IN THE PAST 12 MONTHS, did you or any member of this household receive benefits from the Food Stamp Program or SNAP (the	☐ Yes ☐ No
Supplemental Nutrition Assistance Program)? Do NOT include WIC, the School Lunch Program, or assistance from food banks. Yes No	Answer questions 19 – 23 if you or any member of this household OWNS or IS BUYING this house, apartment, or mobile home. Otherwise, SKIP to E on the next page.
6 Is this house, apartment, or mobile home part of a condominium?	About how much do you think this house and lot, apartment, or mobile home (and lot, if owned) would sell for if it were for sale?
Yes → What is the monthly condominium fee?	Amount – Dollars
For renters, answer only if you pay the condominium fee in addition to your rent; otherwise, mark the "None" box.	\$,
Monthly amount – Dollars	What are the annual real estate taxes on THIS property?
\$.00	Annual amount – Dollars
OR	\$.00
None	
□ No	OR None
	What is the annual payment for fire, hazard, and flood insurance on THIS property?
	Annual amount – <i>Dollars</i>
	\$.00
	OR None

Housing (continued)

a. Do you or any member of this household have a mortgage, deed of trust, contract to purchase, or similar debt on THIS property?		Answer question 24 if this is a MOBILE HOME. Otherwise, SKIP to E .
Yes, mortgage, deed of trust, or similar debt		
Yes, contract to purchase		
☐ No → SKIP to question 23a	24 v	What are the total annual costs for personal
	Tp	roperty taxes, site rent, registration fees, and
b. How much is the regular monthly mortgage payment on THIS property? Include payment		cense fees on THIS mobile home and its site?
only on FIRST mortgage or contract to purchase.		
Monthly amount – Dollars		nnual costs – <i>Dollars</i>
\$.00		\$.00
3 .00		3
OR		
No regular payment required → SKIP to		
question 23a		Inswer questions about PERSON 1 on the next
c. Does the regular monthly mortgage payment		age if you listed at least one person on page 2. Otherwise, SKIP to page 44 for the mailing
include payments for real estate taxes on THIS property?		nstructions.
Yes, taxes included in mortgage payment		
No, taxes paid separately or taxes not required		
d. Does the regular monthly mortgage payment		
include payments for fire, hazard, or flood		
insurance on THIS property?		
Yes, insurance included in mortgage payment		
No, insurance paid separately or no insurance		
a. Do you or any member of this household have a second mortgage or a home equity loan on THIS property?		
Yes, home equity loan		
Yes, second mortgage		
Yes, second mortgage and home equity loan		
\square No \rightarrow SKIP to \square		
o. How much is the regular monthly payment on all second or junior mortgages and all home equity loans on THIS property?		
Monthly amount – <i>Dollars</i>		
\$.00		
OR		
☐ No regular payment required		

Person 1

In the United States – Print name of state. Outside the United States – Print name of foreign country, or Puerto Rico, Guam, etc. Statis person a citizen of the United States? Yes, born in the United States → SKIP to question 10a Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization – Print year of naturalization No, not a U.S. citizen When did this person come to live in the United States? Print numbers in boxes. Year Yes U.S. citizen When did this person come to live in the United States? Print numbers in boxes. Year 12th grade – NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: MA, MS, MEng MEd, MSW, MBA)	Last Name	nursery or preschool, kindergarten, elementary school, home school, and schooling which leads to a high school diploma or a college degree.
Yes, private school, private college, home school	First Name MI	
Mhere was this person born? In the United States – Print name of state. Outside the United States – Print name of foreign country, or Puerto Rico, Guam, etc. Nursery school, preschool Kindergarten Grade 1 through 12 – Specify grade 1 – 12 / grade 1 – 12		Yes, public school, public college
In the United States – Print name of state. Outside the United States – Print name of foreign country, or Puerto Rico, Guam, etc. Statis person a citizen of the United States? Yes, born in the United States → SKIP to question 10a Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization – Print year of naturalization No, not a U.S. citizen No		
In the United States − Print name of state. Outside the United States − Print name of foreign country, or Puerto Rico, Guam, etc. Statis person a citizen of the United States? College undergraduate years (freshman to senior) Graduate or professional school beyond a bachelor's degree (for example: MA or PhD program, or medical or law school) What is the highest degree or level of school to figure the person has COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No, not a U.S. citizen by naturalization − Print year of naturalization No, not a U.S. citizen No, not a U.S.	Where was this person born?	b. What grade or level was this person attending Mark (X) ONE box.
Outside the United States – Print name of foreign country, or Puerto Rico, Guam, etc. St this person a citizen of the United States? College undergraduate years (freshman to senior) Graduate or professional school beyond a bachelor's degree (for example: MA or PhD program, or medical or law school) What is the highest degree received. No school in College credit No, not a U.S. citizen parent or parents St. St. College credit No, not a U.S. citizen parent or parents No, not a U.S. citizen No schooling completed Nursery school Kindergarten Grade 1 through 11 – Specify grade 1 – 11 Nursery school Kindergarten Grade 1 through 11 – Specify grade 1 – 11 Nursery school Kindergarten Grade 1 through 11 – Specify grade 1 – 11 Nursery school No schooling completed Nursery school Nurser	☐ In the United States – <i>Print name of state.</i>	Nursery school preschool
Outside the United States – <i>Print name of foreign country, or Puerto Rico, Guam, etc.</i> Grade 1 through 12 – <i>Specify grade</i> 1 – 12		
Outside the United States - Print name of foreign country, or Puerto Rico, Guam, etc.		
College undergraduate years (freshman to senior) Yes, born in the United States → SKIP to question 10a Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization - Print year of naturalization No, not a U.S. citizen No schooling completed Nursery school Kindergarten Grade 1 through 11 - Specify grade 1 - 17 12th grade - NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree beyond a bachelor's degree Nater's degree (for example: MA, MS, MEng MEd, MSW, MBA) Nater's degree beyond a bachelor's degree Nater's degree (for example: MA, MS, MEng MEd, MSW, MBA) Nater's degree (for example: MA, MS, MEng MEd, MSW, MBA) Nater's degree (for example: MA, MS, MEng MEd, MSW, MBA) Nater's degree (for example: MA, MS, MEng MEd, MSM, MSA) Nater's degree (for example: MA, MS, MEng MED, MED, MED, MED, MED, MED, MED, MED,		
st his person a citizen of the United States? □ Yes, born in the United States → SKIP to question 10a □ Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas □ Yes, born abroad of U.S. citizen parent or parents □ Yes, U.S. citizen by naturalization – Print year of naturalization □ No, not a U.S. citizen □ No, not a U.S. citizen When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year I turnently enrolled, mark the previous grade or highest degree received. No SCHOOLING COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No SCHOOLING COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No SCHOOLING COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No SCHOOLING COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No SCHOOLING COMPLETED? Mark (X) ONE box. If currently enrolled, mark (N) ONE box. If curre	country, or Puerto Rico, Guam, etc.	
s this person a citizen of the United States? □ Yes, born in the United States → SKIP to question 10a □ Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas □ Yes, born abroad of U.S. citizen parent or parents □ Yes, U.S. citizen by naturalization – Print year of naturalization □ No, not a U.S. citizen When did this person come to live in the United States? Print numbers in boxes. Wear When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year I turnently enrolled, mark the previous grade or highest degree received. No SCHOOLING COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No SCHOOLING COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No SCHOOLING COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No SCHOOLING ComPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No SCHOOLING ComPLETED? Mark (X) ONE box. If currently enrolled, mark (N) one box. If currently enrolled, mark (N) o		
st this person a citizen of the United States? Yes, born in the United States → SKIP to question 10a Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization − Print year of naturalization No, not a U.S. citizen When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year Mean time the did this person come to live in the United States? Print numbers in boxes. Year Mariana School live of school to person has COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No schooling completed Nursery or preschool Through Grade 1 Nursery school Kindergarten Grade 1 through 11 − Specify grade 1 − 11 12th grade − NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit. 1 or more years of college credit, no degree Associate's degree (for example: BA, BS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree		
Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, born abroad of U.S. citizen parent or parents Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization − Print year of naturalization No, not a U.S. citizen When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year What is the highest degree or level of school in person has COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No SCHOOLING COMPLETED No schooling completed NURSERY OR PRESCHOOL THROUGH GRADE 1 Nursery school	a this payon a sitiron of the United State - 3	
Question 10a Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization - Print year of naturalization No, not a U.S. citizen No schooling completed No schooling completed Nursery school Kindergarten Grade 1 through 11 - Specify grade 1 - 11 12th grade - NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential College Or Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree beyond a bachelor's degree Professional degree Pro	_	bachelor's degree (for example: MÁ or PhD
Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization – Print year of naturalization No, not a U.S. citizen No, oschooling completed Nursery or Preschool Through GRADE 1 Nursery school Kindergarten Grade 1 through 11 – Specify grade 1 – 11 – 11 – 12 mark the previous grade or highest degree (received.) No, schooling completed Nursery or Preschool Through GRADE 1 Nursery school Kindergarten Grade 1 through 11 – Specify grade 1 – 11 – 12 mark the previous grade or highest degree (received.) No, schooling completed Nursery or Preschool Through GRADE 1 Nursery school Kindergarten Grade 1 through 11 – Specify grade 1 – 11 – 12 mark the previous grade or highest degree (received.) No, schooling completed Nursery or Preschool Through GRADE 1 Nursery school Kindergarten Grade 1 through 11 – Specify grade 1 – 11 – 12 mark the previous grade or highest degree (received.) No schooling completed Nursery school Kindergarten Grade 1 through 11 – Specify grade 1 – 11 – 12 mark the previous grade or highest degree (received.) 12th grade – NO DIPLOMA HIGH SCHOOL THROUGH GRADE 1 No schooling completed Nursery school Kindergarten Grade 1 through 11 – Specify grade 1 – 11 – 12 mark the previous grade or highest degree (received.) 12th grade – NO DIPLOMA HIGH SCHOOL THROUGH GRADE 1 No schooling completed Nursery school		program, or medical or law school)
Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization - Print year of naturalization No, not a U.S. citizen No schooling completed Nursery of preschool Kindergarten Grade 1 through 11 - Specify grade 1 - 11 - Specify grade 2 - NO DIPLOMA GED or alternative credential COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree No DIPLOMA Professional degree beyond a bachelor's degree No DIPLOMA Professional degree beyond a bachelor's degree No DIPLOMA Professional de		What is the highest degree or level of school th
Yes, U.S. citizen by naturalization − Print year of naturalization No, not a U.S. citizen		person has COMPLETED? Mark (X) ONE box.
No, not a U.S. citizen No, not a U.S. citizen Nursery school Kindergarten States? Print numbers in boxes. Year 12th grade - NO DIPLOMA High school diploma GED or alternative credential College Credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree	_	
No, not a U.S. citizen No, not a U.S. citizen Nursery school Kindergarten Grade 1 through 11 - Specify grade 1 - 11 12th grade - NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree Professional degree Prof		
Nursery or preschool through grade 1 Nursery school Kindergarten Grade 1 through 11 - Specify grade 1 - 11 12th grade - NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degre		
No, not a U.S. citizen Nursery school Kindergarten Grade 1 through 11 − Specify grade 1 − 11 Specify gr		
Kindergarten Grade 1 through 11 - Specify grade 1 - 11	No not all S citizen	
When did this person come to live in the United States? Print numbers in boxes. Year 12th grade - NO DIPLOMA	No, not a 0.5. citizen	
When did this person come to live in the United States? Print numbers in boxes. Year 12th grade – NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree		
12th grade - NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree	When did this person come to live in the	
□ 12th grade - NO DIPLOMA HIGH SCHOOL GRADUATE □ Regular high school diploma □ GED or alternative credential COLLEGE OR SOME COLLEGE □ Some college credit, but less than 1 year of college credit □ 1 or more years of college credit, no degree □ Associate's degree (for example: AA, AS) □ Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE □ Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) □ Professional degree beyond a bachelor's degree		
HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree		
Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree		☐ 12th grade – NO DIPLOMA
GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree		HIGH SCHOOL GRADUATE
COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree		Regular high school diploma
Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree		☐ GED or alternative credential
college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree		COLLEGE OR SOME COLLEGE
□ Associate's degree (for example: AA, AS) □ Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE □ Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) □ Professional degree beyond a bachelor's degree		
□ Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE □ Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) □ Professional degree beyond a bachelor's degree.		1 or more years of college credit, no degree
AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree		
☐ Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) ☐ Professional degree beyond a bachelor's degree		Associate's degree (for example: AA, AS)
MEd, MSW, MBA) ☐ Professional degree beyond a bachelor's degr		
☐ Professional degree beyond a bachelor's degr		☐ Bachelor's degree (for example: BA, BS)
(for example: MD, DDS, DVM, LLB, JD)		☐ Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE ☐ Master's degree (for example: MA, MS, MEng,
☐ Doctorate degree (for example: PhD, EdD)		 □ Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE □ Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA) □ Professional degree beyond a bachelor's degree

		_				
F	Answer question 12 if this person has a bachelor's degree or higher. Otherwise, SKIP to question 13.	15		Did this person live in this ho year ago?	ouse or apa	rtment
				Person is under 1 year old question 16	→ SKIP to	
2	This question focuses on this person's		[Yes, this house → SKIP to	question 16	
	BACHELOR'S DEGREE. Please print below the specific major(s) of any BACHELOR'S DEGREES this person has received. (For example: chemical engineering, elementary teacher education, organizational psychology)			No, outside the United Star Print name of foreign count Islands, Guam, etc., below, question 16	try, or U.S.	/irgin
					Lateral Charles	
			L	No, different house in the lor Puerto Rico	Jnited States	5
			b. V	Where did this person live 1	year ago?	
	Milest in this manner of an action on atheric crimin?		Δ	Address (Number and street	t name)	
٦	What is this person's ancestry or ethnic origin?					
			N	lame of city, town, or post	office	
	(For example: Italian, Jamaican, African Am., Cambodiar Cape Verdean, Norwegian, Dominican, French Canadian,					
	Haitian, Korean, Lebanese, Polish, Nigerian, Mexican, Taiwanese, Ukrainian, and so on.)		_	lome of H.C. county or		
			n	lame of U.S. county or nunicipio in Puerto Rico		
P	a. Does this person speak a language other than English at home?					
	Yes		_	lame of U.S. state or		
	☐ No → SKIP to question 15a			uerto Rico	ZIP Code	•
	b. What is this language?					
	J. Tillat lo tillo laligaago.		_			
		16		his person CURRENTLY cov	ered by any	of the
	For example: Korean, Italian, Spanish, Vietnamese		foll	owing types of health insurerage plans? Mark "Yes" or "	rance or hea	alth
	c. How well does this person speak English?		of c	overage in items a – h.		
	☐ Very well		a. Ir	nsurance through a current or or or or union (of this	Ye	es No
	Well		р	erson or another family member)	L	
	Not wellNot at all		а	nsurance purchased directly from n insurance company (by this erson or another family member)		
				ledicare, for people 65 and older, r people with certain disabilities		
				ledicaid, Medical Assistance, or ny kind of government-assistance	.	
			р	lan for those with low incomes r a disability		
				RICARE or other military health ca	are	
			f. V	A (including those who have ever sed or enrolled for VA health care	<i>S</i>)	
				ndian Health Service		
			h. A	any other type of health insurance	_	
			U	r health coverage plan – Specify		



a. Is this person deaf or does he/she have serious difficulty hearing? Yes No	Answer question 19 if this person is 15 years old or over. Otherwise, SKIP to the questions for Person 2 on page 16.
b. Is this person blind or does he/she have serious difficulty seeing even when wearing glasses? Yes No	Because of a physical, mental, or emotional condition, does this person have difficulty doing errands alone such as visiting a doctor's office or shopping? Yes No
Answer question 18a – c if this person is 5 years old or over. Otherwise, SKIP to the questions for Person 2 on page 16.	What is this person's marital status? Now married Widowed
a. Because of a physical, mental, or emotional condition, does this person have serious difficulty concentrating, remembering, or making decisions?	 □ Divorced □ Separated □ Never married → SKIP to on the next page
☐ Yes ☐ No	In the PAST 12 MONTHS did this person get – Yes No
 b. Does this person have serious difficulty walking or climbing stairs? Yes No 	a. Married?
c. Does this person have difficulty dressing or bathing? Yes No	How many times has this person been married? Once Two times Three or more times
	In what year did this person last get married? Year

Answer question 24 if this part of 15 – 50 years old. Otherwis		Has this person ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard? Mark (X) ONE box.
Has this person given bir past 12 months?	th to any children in the	 Never served in the military → SKIP to question 29a Only on active duty for training in the Reserves or National Guard → SKIP to question 28a Now on active duty On active duty in the past, but not now
a. Does this person have grandchildren under the this house or apartment Yes No → SKIP to question	any of his/her own ne age of 18 living in nt?	When did this person serve on active duty in the U.S. Armed Forces? Mark (X) a box for EACH period in which this person served, even if just for part of the period. September 2001 or later August 1990 to August 2001 (including Persian Gulf War)
under the age of 18 whapartment? ☐ Yes ☐ No → SKIP to question c. How long has this grant for these grandchildren	s of any grandchildren no live in this house or on 26 dparent been responsible n? If the grandparent is r more than one grandchild, he grandchild for whom	May 1975 to July 1990 Vietnam era (August 1964 to April 1975) February 1955 to July 1964 Korean War (July 1950 to January 1955) January 1947 to June 1950 World War II (December 1941 to December 1946) November 1941 or earlier a. Does this person have a VA service-connected disability rating?
Less than 6 months 6 to 11 months 1 or 2 years 3 or 4 years 5 or more years		 Yes (such as 0%, 10%, 20%,, 100%) No → SKIP to question 29a b. What is this person's service-connected disability rating? 0 percent 10 or 20 percent 30 or 40 percent 50 or 60 percent 70 percent or higher



29 a.	LAST WEEK, did this person work for pay at a job (or business)? ☐ Yes → SKIP to question 30	J	Answer question 32 if you marked "Car, truck, or van" in question 31. Otherwise, SKIP to question 33.
b.	 No - Did not work (or retired) LAST WEEK, did this person do ANY work for pay, even for as little as one hour? Yes No → SKIP to question 35a 	32	How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK? Person(s)
lo w	t what location did this person work LAST EEK? If this person worked at more than one cation, print where he or she worked most last eek. Address (Number and street name)	33	What time did this person usually leave home to go to work LAST WEEK? Hour Minute a.m. p.m.
b.	If the exact address is not known, give a description of the location such as the building name or the nearest street or intersection. Name of city, town, or post office	34	How many minutes did it usually take this person to get from home to work LAST WEEK? Minutes
c.	Is the work location inside the limits of that city or town? Yes No, outside the city/town limits	K	Answer questions 35 – 38 if this person did NOT work last week. Otherwise, SKIP to question 39a.
	Name of U.S. state or foreign country	35	 a. LAST WEEK, was this person on layoff from a job? ☐ Yes → SKIP to question 35c ☐ No
f.	ZIP Code		 b. LAST WEEK, was this person TEMPORARILY absent from a job or business? Yes, on vacation, temporary illness, maternity leave, other family/personal reasons, bad weather, etc. → SKIP to question 38 No → SKIP to question 36
W m	DOWN DESCRIPTION EEK? If this person usually used more than one ethod of transportation during the trip, mark (X) the box of the one used for most of the distance.		c. Has this person been informed that he or she will be recalled to work within the next 6 months OR been given a date to return to work?
	Car, truck, or van Motorcycle Bus or trolley bus Bicycle Streetcar or trolley car Walked Subway or elevated Worked at home → SKIP to question 39a Ferryboat Other method Taxicab		Yes → SKIP to question 37No



36	During the LAST 4 WEEKS, has this person been ACTIVELY looking for work? Yes		Answer questions 41 – 46 if this person worked in the past 5 years. Otherwise, SKIP to question 47.
37	No → SKIP to question 38 LAST WEEK, could this person have started a job if offered one, or returned to work if recalled? Yes, could have gone to work No, because of own temporary illness No, because of all other reasons (in school, etc.)	á i i	ACTIVITY. Describe clearly this person's chief job activity or business last week. If this person had more than one job, describe the one at which this person worked the most hours. If this person had no job or business last week, give information for his/her last job or business.
38	When did this person last work, even for a few days?	49	Nas this person – Mark (X) ONE box.
	 Within the past 12 months 1 to 5 years ago → SKIP to L Over 5 years ago or never worked → SKIP to question 47 		an employee of a PRIVATE FOR-PROFIT company or business, or of an individual, for wages, salary, or commissions? an employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization?
39	a. During the PAST 12 MONTHS (52 weeks), did this person work 50 or more weeks? Count paid time off as work.		a local GOVERNMENT employee (city, county, etc.)? a state GOVERNMENT employee?
	Yes → SKIP to question 40 No No No No No No No No No N	l t	a Federal GOVERNMENT employee? SELF-EMPLOYED in own NOT INCORPORATED business, professional practice, or farm? SELF-EMPLOYED in own INCORPORATED business, professional practice, or farm? working WITHOUT PAY in family business or farm? For whom did this person work? If now on active duty in the Armed Forces, mark (X) this box → and print the branch of the Armed Forces. Name of company, business, or other employer
40	During the PAST 12 MONTHS, in the WEEKS WORKED, how many hours did this person usually work each WEEK? Usual hours worked each WEEK		What kind of business or industry was this? Describe the activity at the location where employed. For example: hospital, newspaper publishing, mail order house, auto engine manufacturing, bank)
			manufacturing? wholesale trade? retail trade? other (agriculture, construction, service, government, etc.)?

45	What kind of work was this person doing? (For example: registered nurse, personnel manager, supervisor of order department, secretary, accountant)	d. Social Security or Railroad Retirement. ☐ Yes → \$.00 ☐ No TOTAL AMOUNT for past
46	What were this person's most important activities or duties? (For example: patient care, directing hiring policies, supervising order clerks, typing and filing, reconciling financial records)	e. Supplemental Security Income (SSI). □ Yes → \$.00 □ No TOTAL AMOUNT for past 12 months
47	INCOME IN THE PAST 12 MONTHS	f. Any public assistance or welfare payments from the state or local welfare office.
	Mark (X) the "Yes" box for each type of income this person received, and give your best estimate of the TOTAL AMOUNT during the PAST 12 MONTHS. (NOTE: The "past 12 months" is the period from today's date one year ago up through today.)	☐ Yes → \$.00 ☐ No TOTAL AMOUNT for past 12 months
	Mark (X) the "No" box to show types of income NOT received.	g. Retirement, survivor, or disability pensions. Do NOT include Social Security.
	If net income was a loss, mark the "Loss" box to the right of the dollar amount.	☐ Yes → \$.00 ☐ No ☐ TOTAL AMOUNT for past
	For income received jointly, report the appropriate share for each person – or, if that's not possible, report the whole amount for only one person and mark the "No" box for the other person. a. Wages, salary, commissions, bonuses, or tips from all jobs. Report amount before deductions for taxes, bonds, dues, or other items.	h. Any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support or alimony. Do NOT include lump sum payments such as money from an inheritance or the sale of a home.
	☐ Yes → \$.00	☐ Yes → \$.00 No TOTAL AMOUNT for past 12 months
	b. Self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partnerships. Report NET income after business expenses.	What was this person's total income during the PAST 12 MONTHS? Add entries in questions 47a to 47h; subtract any losses. If net income was a loss, enter the amount and mark (X) the "Loss" box next to the dollar amount.
	☐ Yes → \$.00 ☐ Loss TOTAL AMOUNT for past 12 months	OR S .00 Loss None TOTAL AMOUNT for past 12 months
	c. Interest, dividends, net rental income, royalty income, or income from estates and trusts. Report even small amounts credited to an account.	
	Yes → \$.00 Loss TOTAL AMOUNT for past 12 months	
		Continue with the questions for Person 2 on the next page. If no one is listed as Person 2 on page 2, SKIP to page 44 for mailing instructions.



Person 2

Last Name	nursery or preschool, kindergarten, elementary school, home school, and schooling which leads to a high school diploma or a college degree.
First Name MI	No, has not attended in the last 3 months → SKIP to question 11
	Yes, public school, public college
	Yes, private school, private college, home school
Where was this person born?	b. What grade or level was this person attendin Mark (X) ONE box.
☐ In the United States – <i>Print name of state.</i>	☐ Nursery school, preschool
	Kindergarten
Outside the United States – Print name of foreign	Grade 1 through 12 – Specify grade 1 – 12 –
country, or Puerto Rico, Guam, etc.	
	College undergraduate years (freshman to senior)
s this person a citizen of the United States?	Graduate or professional school beyond a
Yes, born in the United States → SKIP to question 10a	bachelor's degree (for example: MA or PhD program, or medical or law school)
Yes, born in Puerto Rico, Guam, the U.S. Virgin	What is the highest degree or level of school th
islands, or Northern Marianas	person has COMPLETED? Mark (X) ONE box.
Yes, born abroad of U.S. citizen parent or parents	If currently enrolled, mark the previous grade or highest degree received.
Yes, U.S. citizen by naturalization − Print year of naturalization →	NO SCHOOLING COMPLETED
	☐ No schooling completed
	NURSERY OR PRESCHOOL THROUGH GRADE 12
No, not a U.S. citizen	☐ Nursery school
	Kindergarten
Allere P. J. d. Communication of the Control of the	☐ Grade 1 through 11 – Specify
When did this person come to live in the United States? Print numbers in boxes.	grade 1 – 11 –
Year	
	12th grade – NO DIPLOMA
	HIGH SCHOOL GRADUATE
	Regular high school diploma
	GED or alternative credential
	COLLEGE OR SOME COLLEGE
	Some college credit, but less than 1 year of college credit
	1 or more years of college credit, no degree
	Associate's degree (for example: AA, AS)
	Bachelor's degree (for example: BA, BS)
	AFTER BACHELOR'S DEGREE
	Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
	Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD)

F	Answer question 12 if this person has a bachelor's degree or higher. Otherwise, SKIP to question 13.	15	a. Did this person live in this house or apartment 1 year ago?
			Person is under 1 year old → SKIP to question 16
2	This question focuses on this person's		Yes, this house → SKIP to question 16
	BACHELOR'S DEGREE. Please print below the specific major(s) of any BACHELOR'S DEGREES this person has received. (For example: chemical engineering, elementary teacher education, organizational psychology)		No, outside the United States and Puerto Rico Print name of foreign country, or U.S. Virgin Islands, Guam, etc., below; then SKIP to question 16
			No, different house in the United States or Puerto Rico
			b. Where did this person live 1 year ago?
	Million to the control of the contro		Address (Number and street name)
3	What is this person's ancestry or ethnic origin?		
	(For example: Italian, Jamaican, African Am., Cambodiar Cape Verdean, Norwegian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican,	1,	Name of city, town, or post office
	Taiwanese, Ukrainian, and so on.)		Name of U.S. county or municipio in Puerto Rico
4	a. Does this person speak a language other		municipio in Puerto Rico
	than English at home?		
	YesNo → SKIP to question 15a		Name of U.S. state or Puerto Rico ZIP Code
	b. What is this language?		
	For example: Korean, Italian, Spanish, Vietnamese c. How well does this person speak English?	16	Is this person CURRENTLY covered by any of the following types of health insurance or health coverage plans? Mark "Yes" or "No" for EACH type of coverage in items a – h.
	☐ Very well ☐ Well		a. Insurance through a current or former employer or union (of this person or another family member) Yes No
	Not wellNot at all		b. Insurance purchased directly from an insurance company (by this person or another family member)
			c. Medicare, for people 65 and older, or people with certain disabilities
			d. Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
			e. TRICARE or other military health care
			f. VA (including those who have ever used or enrolled for VA health care)
			g. Indian Health Service
			h. Any other type of health insurance or health coverage plan – Specify



Ð	 a. Is this person deaf or does he/she have serious difficulty hearing? Yes 	H	Answer question 19 if this person is 15 years old or over. Otherwise, SKIP to the questions for Person 3 on page 23.
	□ No		
	 b. Is this person blind or does he/she have serious difficulty seeing even when wearing glasses? Yes No 	19	Because of a physical, mental, or emotional condition, does this person have difficulty doing errands alone such as visiting a doctor's office or shopping? Yes No
			in No
G	Answer question 18a – c if this person is 5 years old or over. Otherwise, SKIP to the questions for Person 3 on page 23.	20	What is this person's marital status? Now married
			Widowed
8	a. Because of a physical, mental, or emotional		Divorced
	condition, does this person have serious difficulty concentrating, remembering, or making decisions?		SeparatedNever married → SKIP to on the next page
	Yes	a	In the PAST 12 MONTHS did this person get -
	☐ No	4	Yes No
	b. Does this person have serious difficulty		a. Married?
	walking or climbing stairs?		b. Widowed?
	Yes		c. Divorced?
	☐ No		c. Divorced:
	c. Does this person have difficulty dressing or bathing?	22	How many times has this person been married?
			Once
			☐ Two times
			☐ Three or more times
		23	In what year did this person last get married?
			Year

Answer question 24 if this person is female and 15 – 50 years old. Otherwise, SKIP to question 25a.	Has this person ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard? Mark (X) ONE box.
4 Has this person given birth to any children in the	 Never served in the military → SKIP to question 29a Only on active duty for training in the Reserves or National Guard → SKIP to question 28a
past 12 months?	☐ Now on active duty
Yes	On active duty in the past, but not now
□ No	
a. Does this person have any of his/her own grandchildren under the age of 18 living in this house or apartment?	When did this person serve on active duty in the U.S. Armed Forces? Mark (X) a box for EACH period in which this person served, even if just for part of the period.
Yes	September 2001 or later
□ No → SKIP to question 26	August 1990 to August 2001 (including Persian Gulf War)
b. Is this grandparent currently responsible for	☐ May 1975 to July 1990
most of the basic needs of any grandchildren under the age of 18 who live in this house or	☐ Vietnam era (August 1964 to April 1975)
apartment?	February 1955 to July 1964
□ Yes	☐ Korean War (July 1950 to January 1955)
☐ No → SKIP to question 26	☐ January 1947 to June 1950
Two your to quotion 20	☐ World War II (December 1941 to December 1946)
c. How long has this grandparent been responsible for these grandchildren? If the grandparent is financially responsible for more than one grandchild, answer the question for the grandchild for whom the grandparent has been responsible for the longest period of time.	□ November 1941 or earlier a. Does this person have a VA service-connected disability rating?
Less than 6 months	Yes (such as 0%, 10%, 20%,, 100%)
6 to 11 months	\Box No → SKIP to question 29a
☐ 1 or 2 years ☐ 3 or 4 years	b. What is this person's service-connected disability rating?
☐ 5 or more years	□ 0 percent
	☐ 10 or 20 percent
	☐ 30 or 40 percent
	☐ 50 or 60 percent
	70 percent or higher



29	 a. LAST WEEK, did this person work for pay at a job (or business)? ☐ Yes → SKIP to question 30 	J	Answer question 32 if you marked "Car, truck, or van" in question 31. Otherwise, SKIP to question 33.
	 No - Did not work (or retired) b. LAST WEEK, did this person do ANY work for pay, even for as little as one hour? Yes No → SKIP to question 35a 	32	How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK? Person(s)
30	At what location did this person work LAST WEEK? If this person worked at more than one location, print where he or she worked most last week. a. Address (Number and street name)	33	What time did this person usually leave home to go to work LAST WEEK? Hour Minute a.m. p.m.
	If the exact address is not known, give a description of the location such as the building name or the nearest street or intersection. b. Name of city, town, or post office	34	How many minutes did it usually take this person to get from home to work LAST WEEK? Minutes
	c. Is the work location inside the limits of that city or town? Yes No, outside the city/town limits	K	Answer questions 35 – 38 if this person did NOT work last week. Otherwise, SKIP to question 39a.
	d. Name of county e. Name of U.S. state or foreign country	35	a. LAST WEEK, was this person on layoff from a job? ☐ Yes → SKIP to question 35c ☐ No
31	f. ZIP Code How did this person usually get to work LAST		 b. LAST WEEK, was this person TEMPORARILY absent from a job or business? Yes, on vacation, temporary illness, maternity leave, other family/personal reasons, bad weather, etc. → SKIP to question 38 No → SKIP to question 36 c. Has this person been informed that he or she
	WEEK? If this person usually used more than one method of transportation during the trip, mark (X) the box of the one used for most of the distance. □ Car, truck, or van □ Motorcycle □ Bus or trolley bus □ Bicycle □ Streetcar or trolley car □ Walked □ Subway or elevated □ Worked at home → SKIP to question 39a □ Ferryboat □ Other method □ Taxicab		will be recalled to work within the next 6 months OR been given a date to return to work? ☐ Yes → SKIP to question 37 ☐ No



36	During the LAST 4 WEEKS, has this person been ACTIVELY looking for work? Yes		Answer questions 41 – 46 if this person worked in the past 5 years. Otherwise, SKIP to question 47.
37	No → SKIP to question 38 LAST WEEK, could this person have started a job if offered one, or returned to work if recalled? Yes, could have gone to work No, because of own temporary illness No, because of all other reasons (in school, etc.)	á i i	ACTIVITY. Describe clearly this person's chief job activity or business last week. If this person had more than one job, describe the one at which this person worked the most hours. If this person had no job or business last week, give information for his/her last job or business.
38	When did this person last work, even for a few days?	49	Nas this person – Mark (X) ONE box.
	 Within the past 12 months 1 to 5 years ago → SKIP to L Over 5 years ago or never worked → SKIP to question 47 		an employee of a PRIVATE FOR-PROFIT company or business, or of an individual, for wages, salary, or commissions? an employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization?
39	a. During the PAST 12 MONTHS (52 weeks), did this person work 50 or more weeks? Count paid time off as work.		a local GOVERNMENT employee (city, county, etc.)? a state GOVERNMENT employee?
	Yes → SKIP to question 40 No No No No No No No No No N	l t	a Federal GOVERNMENT employee? SELF-EMPLOYED in own NOT INCORPORATED business, professional practice, or farm? SELF-EMPLOYED in own INCORPORATED business, professional practice, or farm? working WITHOUT PAY in family business or farm? For whom did this person work? If now on active duty in the Armed Forces, mark (X) this box → and print the branch of the Armed Forces. Name of company, business, or other employer
40	During the PAST 12 MONTHS, in the WEEKS WORKED, how many hours did this person usually work each WEEK? Usual hours worked each WEEK		What kind of business or industry was this? Describe the activity at the location where employed. For example: hospital, newspaper publishing, mail order house, auto engine manufacturing, bank)
			manufacturing? wholesale trade? retail trade? other (agriculture, construction, service, government, etc.)?

45	What kind of work was this person doing? (For example: registered nurse, personnel manager, supervisor of order department, secretary, accountant)	d. Social Security or Railroad Retirement. ☐ Yes → \$.00 ☐ No TOTAL AMOUNT for past
46	What were this person's most important activities or duties? (For example: patient care, directing hiring policies, supervising order clerks, typing and filing, reconciling financial records)	e. Supplemental Security Income (SSI). □ Yes → \$.00 □ No TOTAL AMOUNT for past
47	INCOME IN THE PAST 12 MONTHS Mark (X) the "Yes" box for each type of income this	f. Any public assistance or welfare payments from the state or local welfare office.
	person received, and give your best estimate of the TOTAL AMOUNT during the PAST 12 MONTHS. (NOTE: The "past 12 months" is the period from today's date one year ago up through today.)	No TOTAL AMOUNT for past 12 months g. Retirement, survivor, or disability pensions.
	Mark (X) the "No" box to show types of income NOT received. If net income was a loss, mark the "Loss" box to the right of the dollar amount.	Do NOT include Social Security. ☐ Yes → \$.00 ☐ No ☐ TOTAL AMOUNT for past
	For income received jointly, report the appropriate share for each person – or, if that's not possible, report the whole amount for only one person and mark the "No" box for the other person. a. Wages, salary, commissions, bonuses, or tips from all jobs. Report amount before deductions for	h. Any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support or alimony. Do NOT include lump sum payments such as money from an inheritance or the sale of a home.
	taxes, bonds, dues, or other items. ☐ Yes → \$.00 ☐ No TOTAL AMOUNT for past 12 months	☐ Yes → \$.00 ☐ No TOTAL AMOUNT for past 12 months
		What was this person's total income during the PAST 12 MONTHS? Add entries in questions 47a to 47h; subtract any losses. If net income was a loss, enter the amount and mark (X) the "Loss" box next to the dollar amount.
	Yes → \$.00 Loss TOTAL AMOUNT for past 12 months	OR S .00 Loss None TOTAL AMOUNT for past 12 months
	c. Interest, dividends, net rental income, royalty income, or income from estates and trusts. Report even small amounts credited to an account.	
	Yes → S Loss TOTAL AMOUNT for past 12 months	Continue with the succeions for Boson 2 on the
		Continue with the questions for Person 3 on the next page. If no one is listed as Person 3 on page 3, SKIP to page 44 for mailing instructions.



Person 3

Last Name	nursery or preschool, kindergarten, elementary school, home school, and schooling which leads to a high school diploma or a college degree.
First Name MI	No, has not attended in the last 3 months → SKIP to question 11
	Yes, public school, public college
	Yes, private school, private college, home school
Where was this person born?	b. What grade or level was this person attending Mark (X) ONE box.
☐ In the United States – Print name of state.	Nursery school, preschool
	Kindergarten
	Grade 1 through 12 – Specify
Outside the United States – Print name of foreign country, or Puerto Rico, Guam, etc.	grade 1 – 12 –
dodnity, of Fuorio Filoo, Guarri, etc.	
	College undergraduate years (freshman to senior)
s this person a citizen of the United States?	Graduate or professional school beyond a
Yes, born in the United States → SKIP to question 10a	bachelor's degree (for example: MÅ or PhD program, or medical or law school)
Yes, born in Puerto Rico, Guam, the U.S. Virgin	What is the highest degree or level of school th
islands, or Northern Warianas	What is the highest degree or level of school the person has COMPLETED? Mark (X) ONE box.
Yes, born abroad of U.S. citizen parent or parents	If currently enrolled, mark the previous grade or
Yes, U.S. citizen by naturalization − Print year of naturalization →	highest degree received. NO SCHOOLING COMPLETED
or nataranzarion –	
	Nursery or preschool through grade 12
No, not a U.S. citizen	Nursery school
No, not a 0.3. citizen	
	Kindergarten
When did this person come to live in the	Grade 1 through 11 – Specify grade 1 – 11 –
United States? Print numbers in boxes. Year	
	☐ 12th grade – NO DIPLOMA
	HIGH SCHOOL GRADUATE
	Regular high school diploma
	☐ GED or alternative credential
	COLLEGE OR SOME COLLEGE
	Some college credit, but less than 1 year of college credit
	1 or more years of college credit, no degree
	Associate's degree (for example: AA, AS)
	Bachelor's degree (for example: BA, BS)
	AFTER BACHELOR'S DEGREE
	Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
	Professional degree beyond a bachelor's degre (for example: MD, DDS, DVM, LLB, JD)

F	Answer question 12 if this person has a bachelor's degree or higher. Otherwise, SKIP to question 13.	1	a. Did this person live in this house or apartment 1 year ago?
H			Person is under 1 year old → SKIP to question 16
4	This could be for a constitution of		Yes, this house → SKIP to question 16
	This question focuses on this person's BACHELOR'S DEGREE. Please print below the specific major(s) of any BACHELOR'S DEGREES this person has received. (For example: chemical engineering, elementary teacher education, organizational psychology)		No, outside the United States and Puerto Rico Print name of foreign country, or U.S. Virgin Islands, Guam, etc., below; then SKIP to question 16
			No, different house in the United States or Puerto Rico
			b. Where did this person live 1 year ago?
			Address (Number and street name)
13)	What is this person's ancestry or ethnic origin?		
			Name of city, town, or post office
	(For example: Italian, Jamaican, African Am., Cambodian Cape Verdean, Norwegian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican,		
	Taiwanese, Ukrainian, and so on.)		Name of U.S. county or
14	a. Does this person speak a language other		municipio in Puerto Rico
٣	than English at home?		
	Yes		Name of U.S. state or
	No → SKIP to question 15a		Puerto Rico ZIP Code
	b. What is this language?		
		16	Is this person CURRENTLY covered by any of the
	For example: Korean, Italian, Spanish, Vietnamese	T	following types of health insurance or health coverage plans? Mark "Yes" or "No" for EACH type
	c. How well does this person speak English?		of coverage in items a – h.
	☐ Very well		a. Insurance through a current or former employer or union (of this
	Well		person or another family member)
	Not wellNot at all		b. Insurance purchased directly from an insurance company (by this person or another family member)
			c. Medicare, for people 65 and older, or people with certain disabilities
			d. Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
			e. TRICARE or other military health care
			f. VA (including those who have ever used or enrolled for VA health care)
			g. Indian Health Service
			h. Any other type of health insurance
			or health coverage plan – Specify



		1
(a. Is this person deaf or does he/she have serious difficulty hearing? Yes No 	Answer question 19 if this person is 15 years old or over. Otherwise, SKIP to the questions for Person 4 on page 30.
	 b. Is this person blind or does he/she have serious difficulty seeing even when wearing glasses? Yes No 	Because of a physical, mental, or emotional condition, does this person have difficulty doing errands alone such as visiting a doctor's office or shopping? Yes No
G	Answer question 18a – c if this person is 5 years old or over. Otherwise, SKIP to the questions for Person 4 on page 30.	What is this person's marital status? Now married Widowed
18	a. Because of a physical, mental, or emotional condition, does this person have serious difficulty concentrating, remembering, or making decisions?	 □ Divorced □ Separated □ Never married → SKIP to 1 on the next page
	☐ Yes ☐ No	In the PAST 12 MONTHS did this person get –
		Yes No
	b. Does this person have serious difficulty walking or climbing stairs?	a. Married?
	Yes	b. Widowed?
	□ No	c. Divorced?
	c. Does this person have difficulty dressing or bathing?	How many times has this person been married?
	Yes	☐ Once☐ Two times
	∐ No	Three or more times
		23 In what year did this person last get married?
		Year

Answer question 24 if this person is female and 15 – 50 years old. Otherwise, SKIP to question 25a. Has this person ever served or U.S. Armed Forces, Reserves, Mark (X) ONE box. Never served in the military - Only on active duty for training or National Guard → SKIP to	n active duty in the or National Guard?
Only on active duty for training or National Guard → SKIP to	
past 12 months? Now on active duty On active duty in the past, but the	ning in the Reserves o question 28a
a. Does this person have any of his/her own grandchildren under the age of 18 living in this house or apartment? When did this person serve on U.S. Armed Forces? Mark (X) a in which this person served, ever period.	a box for EACH period
 Yes No → SKIP to question 26 September 2001 or later August 1990 to August 2001 Persian Gulf War) 	(including
	A service-connected %,, 100%)



29 a.	LAST WEEK, did this person work for pay at a job (or business)? ☐ Yes → SKIP to question 30	J	Answer question 32 if you marked "Car, truck, or van" in question 31. Otherwise, SKIP to question 33.
b.	 No – Did not work (or retired) LAST WEEK, did this person do ANY work for pay, even for as little as one hour? Yes No → SKIP to question 35a 	32	How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK? Person(s)
lo w	t what location did this person work LAST IEEK? If this person worked at more than one cation, print where he or she worked most last reek. Address (Number and street name)	33	What time did this person usually leave home to go to work LAST WEEK? Hour Minute a.m. p.m.
b.	If the exact address is not known, give a description of the location such as the building name or the nearest street or intersection. Name of city, town, or post office	34	How many minutes did it usually take this person to get from home to work LAST WEEK? Minutes
c.	Is the work location inside the limits of that city or town? Yes No, outside the city/town limits	K	Answer questions 35 – 38 if this person did NOT work last week. Otherwise, SKIP to question 39a.
	Name of county Name of U.S. state or foreign country	35	a. LAST WEEK, was this person on layoff from a job? ☐ Yes → SKIP to question 35c ☐ No
f.	ZIP Code		 b. LAST WEEK, was this person TEMPORARILY absent from a job or business? Yes, on vacation, temporary illness, maternity leave, other family/personal reasons, bad weather, etc. → SKIP to question 38 No → SKIP to question 36
W m	ow did this person usually get to work LAST IEEK? If this person usually used more than one nethod of transportation during the trip, mark (X) the ox of the one used for most of the distance.		c. Has this person been informed that he or she will be recalled to work within the next 6 months OR been given a date to return to work?
	Car, truck, or van Bus or trolley bus Streetcar or trolley car Subway or elevated Railroad Ferryboat Taxicab Motorcycle Bicycle Walked Worked at home → SKIP to question 39a Other method		Yes → SKIP to question 37No



36	During the LAST 4 WEEKS, has this person been ACTIVELY looking for work? ☐ Yes ☐ No → SKIP to question 38	Answer questions 41 – 46 if this person worked in the past 5 years. Otherwise, SKIP to question 47.
37	LAST WEEK, could this person have started a job if offered one, or returned to work if recalled? Yes, could have gone to work No, because of own temporary illness No, because of all other reasons (in school, etc.)	41 – 46 CURRENT OR MOST RECENT JOB ACTIVITY. Describe clearly this person's chief job activity or business last week. If this person had more than one job, describe the one at which this person worked the most hours. If this person had no job or business last week, give information for his/her last job or business.
38	When did this person last work, even for a few days? Within the past 12 months	Was this person – Mark (X) ONE box. □ an employee of a PRIVATE FOR-PROFIT company or business, or of an individual, for
	 1 to 5 years ago → SKIP to L Over 5 years ago or never worked → SKIP to question 47 	wages, salary, or commissions? an employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization? a local GOVERNMENT employee
39	 a. During the PAST 12 MONTHS (52 weeks), did this person work 50 or more weeks? Count paid time off as work. Yes → SKIP to question 40 No b. How many weeks DID this person work, even for a few hours, including paid vacation, paid sick leave, and military service? 50 to 52 weeks 48 to 49 weeks 40 to 47 weeks 27 to 39 weeks 	(city, county, etc.)? a state GOVERNMENT employee? a Federal GOVERNMENT employee? SELF-EMPLOYED in own NOT INCORPORATED business, professional practice, or farm? SELF-EMPLOYED in own INCORPORATED business, professional practice, or farm? working WITHOUT PAY in family business or farm? For whom did this person work? If now on active duty in the Armed Forces, mark (X) this box → and print the branch of the Armed Forces.
40	☐ 14 to 26 weeks ☐ 13 weeks or less During the PAST 12 MONTHS, in the WEEKS WORKED, how many hours did this person usually work each WEEK? Usual hours worked each WEEK	What kind of business or industry was this? Describe the activity at the location where employed. (For example: hospital, newspaper publishing, mail order house, auto engine manufacturing, bank)
		Is this mainly – Mark (X) ONE box. manufacturing? wholesale trade? retail trade? other (agriculture, construction, service, government, etc.)?

45	What kind of work was this person doing? (For example: registered nurse, personnel manager, supervisor of order department, secretary, accountant)	d. Social Security or Railroad Retirement. ☐ Yes → \$.00 No TOTAL AMOUNT for past 12 months
46	What were this person's most important activities or duties? (For example: patient care, directing hiring policies, supervising order clerks, typing and filing, reconciling financial records)	e. Supplemental Security Income (SSI). ☐ Yes → \$.00 No TOTAL AMOUNT for past 12 months
47	INCOME IN THE PAST 12 MONTHS Mark (X) the "Yes" box for each type of income this person received, and give your best estimate of the TOTAL AMOUNT during the PAST 12 MONTHS.	f. Any public assistance or welfare payments from the state or local welfare office. ☐ Yes → \$.00
	(NOTE: The "past 12 months" is the period from today's date one year ago up through today.) Mark (X) the "No" box to show types of income NOT received.	TOTAL AMOUNT for past 12 months g. Retirement, survivor, or disability pensions. Do NOT include Social Security.
	If net income was a loss, mark the "Loss" box to the right of the dollar amount. For income received jointly, report the appropriate share for each person – or, if that's not possible, report the whole amount for only one person and mark the "No" box for the other person.	No TOTAL AMOUNT for past 12 months h. Any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support or
	a. Wages, salary, commissions, bonuses, or tips from all jobs. Report amount before deductions for taxes, bonds, dues, or other items. ☐ Yes → \$.00	alimony. Do NOT include lump sum payments such as money from an inheritance or the sale of a home. ☐ Yes → \$.00 ☐ No
	No TOTAL AMOUNT for past	TOTAL AMOUNT for past 12 months What was this person's total income during the PAST 12 MONTHS? Add entries in questions 47a to 47h; subtract any losses. If net income was a loss, enter
	proprietorships and partnerships. Report NET income after business expenses. □ Yes → \$.00 □ No loss	the amount and mark (X) the "Loss" box next to the dollar amount. OR S .00 D None TOTAL AMOUNT for past
	TOTAL AMOUNT for past 12 months c. Interest, dividends, net rental income, royalty income, or income from estates and trusts. Report even small amounts credited to an account.	12 months
	Yes → \$.00 Loss TOTAL AMOUNT for past 12 months	
		Continue with the questions for Person 4 on the next page. If no one is listed as Person 4 on page 3, SKIP to page 44 for mailing instructions.



Person 4

In the United States - Print name of state. Outside the United States - Print name of foreign country, or Puerto Rico, Guam, etc. Statis person a citizen of the United States? Yes, born in the United States → SKIP to question 10a Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization - Print year of naturalization No, not a U.S. citizen No, not a U.S. citizen When did this person come to live in the United States? Print numbers in boxes. Year 12th grade - NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit Outside the United States - Print name of foreign Grade 1 through 12 - Specify grade 1 - 117 What is the highest degree eceived. No schooling completed Nursery school What is the highest degree or level of school person has COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree eceived. No schooling completed Nursery school Kindergarten Grade 1 through 12 - Specify grade or highest degree eceived. No schooling completed Nursery school What is the highest degree or level of school person has COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree eceived. No schooling completed Nursery school Kindergarten Grade 1 through 11 - Specify grade 1 - 117 grade 1 - 117 grade 1 - 117 12 13 14 15 16 17 17 17 18 19 19 19 10 10 10 11 12 13 14 15 16 17 17 17 17 18 19 19 10 10 11 11 12 13 14 15 15 16 17 17 17 18 19 19 10 10 11 11 11 12 13 14 15 16 17 17	Last Name	nursery or preschool, kindergarten, elementary school, home school, and schooling which leads to a high school diploma or a college degree.
Yes, private school, private college, home school In the United States - Print name of state. Outside the United States - Print name of foreign country, or Puerto Rico, Guam, etc. States - Print name of foreign country, or Puerto Rico, Guam, etc. College undergraduate years (freshman to senior) Grade 1 through 12 - Specify grade 1 - 12	First Name MI	
Where was this person born? In the United States – Print name of state. Outside the United States – Print name of foreign country, or Puerto Rico, Guam, etc. Nursery school, preschool Kindergarten Grade 1 through 12 – Specify grade 1 – 12 College undergraduate years (freshman to senior) Graduate or professional school beyond a bachelor's degree (for example: MA or Phiprogram, or medical or law school) Wes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, U.S. citizen by naturalization – Print year of naturalization No, not a U.S. citizen by naturalization – Print year of naturalization No, not a U.S. citizen by naturalization + Print year of naturalization When did this person come to live in the United States? Print numbers in boxes. When did this person come to live in the United States? Print numbers in boxes. 12th grade – NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit Or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: AA, AS) Bachelor's degree (for example: AA, AS) Bachelor's degree (for example: AA, AS) Professional degree beyond a bachelor's degree		Yes, public school, public college
In the United States – Print name of state. Outside the United States – Print name of foreign country, or Puerto Rico, Guam, etc. Statis person a citizen of the United States? Yes, born in the United States → SKIP to question 10a Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization – Print year of naturalization — Rich Print numbers in boxes. No, not a U.S. citizen When did this person come to live in the United States? Print numbers in boxes. Yes or a Print numbers in boxes Yes or a Print numbers Yes or		
Outside the United States − Print name of foreign country, or Puerto Rico, Guam, etc. College undergraduate years (freshman to senior)	Where was this person born?	b. What grade or level was this person attending Mark (X) ONE box.
Outside the United States − Print name of foreign country, or Puerto Rico, Guam, etc. Grade 1 through 12 − Specify grade 1 − 12	☐ In the United States – <i>Print name of state.</i>	Nursery school, preschool
Outside the United States − Print name of foreign country, or Puerto Rico, Guam, etc. Grade 1 through 12 − Specify grade 1 − 12		
Qutside the United States - Print name of foreign country, or Puerto Rico, Guam, etc.		
College undergraduate years (freshman to senior) College undergraduate years (freshman to senior) Graduate or professional school beyond a bachelor's degree (for example: MA or Phil program, or medical or law school) Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization − Print year of naturalization No, not a U.S. citizen When did this person come to live in the United States? Print numbers in boxes. When did this person come to live in the United States? Print numbers in boxes. Yes, U.S. citizen When did this person come to live in the United States? Print numbers in boxes. Yes, U.S. citizen What is the highest degree or level of school person has COMPLETED? Mark (X) ONE box. If currently enrolled, mark (X)		
senior) Sethis person a citizen of the United States? Yes, born in the United States → SKIP to question 10a Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization − Print year of naturalization	country, or Puerto Rico, Guam, etc.	
senior) Sethis person a citizen of the United States? Yes, born in the United States → SKIP to question 10a Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization − Print year of naturalization		
St this person a citizen of the United States? Yes, born in the United States → SKIP to question 10a Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization - Print year of naturalization No, not a U.S. citizen No, not a U.S. citizen No, not a U.S. citizen What is the highest degree or level of school person has COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No Schooling completed No schooling completed Nursery school Kindergarten Graduate or professional school beyond a bachelor's degree (for example: MA or Phiprogram, or medical or law school) What is the highest degree or level of school person has COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No Schooling completed Nursery school Kindergarten Graduate or professional school beyond a bachelor's degree (for example: MA or Phiprogram, or medical or law school) What is the highest degree or level of school person has COMPLETED? Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No Schooling completed Nursery school Kindergarten Graduate or professional school beyond a bachelor's degree (for example: MA or Phiprogram, or medical or law school) What is the highest degree or level of school fercurently enrolled, mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No Schooling completed Nursery school Kindergarten Graduate or previous grade or highest degree received. No Schooling completed Nursery school Kindergarten Graduate or law school alponation On Better Print Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No Schooling completed Nursery school Kindergarten Graduate or law school scho		College undergraduate years (freshman to
Yes, born in the United States → SKIP to question 10a Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization – Print year of naturalization No, not a U.S. citizen No achooling completed Nursery school Kindergarten Grade 1 through 11 – Specify grade 1 – 11 Grade 1 through 11 – Specify grade 1 – 11 12th grade – NO DIPLOMA High School diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree	la di tanana ana ataha ana daha Hata di Okaza 2	
Yes, born in the United States → SKIP to question 10a Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas Yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization – Print year of naturalization No, not a U.S. citizen No, not a U.S. citizen No, not a U.S. citizen When did this person come to live in the United States? Print numbers in boxes. Year When did this person come to live in the United States? Print numbers in boxes. Year Mark (X) ONE box. If currently enrolled, mark the previous grade or highest degree received. No schooling completed NURSERY OR PRESCHOOL THROUGH GRADE Nursery school Kindergarten Grade 1 through 11 – Specify grade 1 – 117 12th grade – NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's degree	s this person a citizen of the United States?	
Islands, or Northern Marianas yes, born abroad of U.S. citizen parent or parents yes, born abroad of U.S. citizen parent or parents yes, U.S. citizen by naturalization – Print year of naturalization No, not a U.S. citizen No, not a U.S. citizen No, not a U.S. citizen When did this person come to live in the United States? Print numbers in boxes. Year 12th grade – NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree beyond a bachelor's degre		
yes, born abroad of U.S. citizen parent or parents Yes, U.S. citizen by naturalization − Print year of naturalization No, not a U.S. citizen When did this person come to live in the United States? Print numbers in boxes. Year 12th grade − NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit, but less than 1 year of college credit in or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's deg		What is the highest degree or level of school the school the second that it is the highest degree or level of school the second
Yes, U.S. citizen by naturalization − Print year of naturalization No, not a U.S. citizen		
No, not a U.S. citizen No, not a U.S. citizen Nursery or PRESCHOOL THROUGH GRADE Nursery school Kindergarten Grade 1 through 11 - Specify grade 1 - 11 12th grade - NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MENG MEd, MSW, MBA) Professional degree beyond a bachelor's degree	_	
Nursery or preschool Through Grade Nursery school Kindergarten Grade 1 through 11 - Specify grade 1 - 11 12th grade - NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MENGMEd, MSW, MBA) Professional degree beyond a bachelor's deg		NO SCHOOLING COMPLETED
No, not a U.S. citizen	<u> </u>	☐ No schooling completed
Kindergarten Grade 1 through 11 – Specify grade 1 – 11		NURSERY OR PRESCHOOL THROUGH GRADE 12
When did this person come to live in the United States? Print numbers in boxes. Year 12th grade - NO DIPLOMA	No, not a U.S. citizen	☐ Nursery school
When did this person come to live in the United States? Print numbers in boxes. Year 12th grade - NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's deg		☐ Kindergarten
Year 12th grade − NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's deg	When did this person come to live in the	
12th grade - NO DIPLOMA HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's deg	United States? Print numbers in boxes.	grade 1 – 11 –
HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's deg	Year	
HIGH SCHOOL GRADUATE Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's deg		
Regular high school diploma GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's deg		
GED or alternative credential COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's deg		
COLLEGE OR SOME COLLEGE Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's deg		
Some college credit, but less than 1 year of college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's deg		
college credit 1 or more years of college credit, no degree Associate's degree (for example: AA, AS) Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's deg		
□ Associate's degree (for example: AA, AS) □ Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE □ Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) □ Professional degree beyond a bachelor's deg		
□ Bachelor's degree (for example: BA, BS) AFTER BACHELOR'S DEGREE □ Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) □ Professional degree beyond a bachelor's degree		1 or more years of college credit, no degree
AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's deg		Associate's degree (for example: AA, AS)
AFTER BACHELOR'S DEGREE Master's degree (for example: MA, MS, MEng MEd, MSW, MBA) Professional degree beyond a bachelor's deg		Bachelor's degree (for example: BA, BS)
MEd, MSW, MBA) ☐ Professional degree beyond a bachelor's deg		
☐ Professional degree beyond a bachelor's deg		Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)
(for example: MD, DDS, DVM, LLB, JD)		Professional degree beyond a bachelor's degre
☐ Doctorate degree (for example: PhD, EdD)		(for example: MD, DDS, DVM, LLB, JD)

Answer question 12 if this person has a bachelor's degree or higher. Otherwise, SKIP to question 13.	a. Did this person live in this house or apartment 1 year ago?
	☐ Person is under 1 year old → SKIP to question 16
This was at its factor of a state	Yes, this house → SKIP to question 16
This question focuses on this person's BACHELOR'S DEGREE. Please print below the specific major(s) of any BACHELOR'S DEGREES this person has received. (For example: chemical engineering, elementary teacher education, organizational psychology)	No, outside the United States and Puerto Rico – Print name of foreign country, or U.S. Virgin Islands, Guam, etc., below; then SKIP to question 16
	No, different house in the United States or Puerto Rico
	b. Where did this person live 1 year ago?
	Address (Number and street name)
What is this person's ancestry or ethnic origin?	
	Name of city, town, or post office
(For example: Italian, Jamaican, African Am., Cambodian Cape Verdean, Norwegian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican,	
Taiwanese, Ukrainian, and so on.)	Name of U.S. county or
a. Does this person speak a language other	municipio in Puerto Rico
than English at home?	
YesNo → SKIP to question 15a	Name of U.S. state or Puerto Rico ZIP Code
b. What is this language?	
	16 Is this person CURRENTLY covered by any of the
For example: Korean, Italian, Spanish, Vietnamese	following types of health insurance or health coverage plans? Mark "Yes" or "No" for EACH type
c. How well does this person speak English?	of coverage in items a – h.
☐ Very well ☐ Well	a. Insurance through a current or former employer or union (of this person or another family member)
☐ Not well ☐ Not at all	b. Insurance purchased directly from an insurance company (by this person or another family member)
	c. Medicare, for people 65 and older, or people with certain disabilities
	d. Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
	e. TRICARE or other military health care
	f. VA (including those who have ever used or enrolled for VA health care)
	g. Indian Health Service
	h. Any other type of health insurance or health coverage plan – Specify



		13853320
	Person 4 (continued)	
•	a. Is this person deaf or does he/she have serious difficulty hearing? Yes No b. Is this person blind or does he/she have serious difficulty seeing even when wearing glasses? Yes No	Answer question 19 if this person is 15 years old or over. Otherwise, SKIP to the questions for Person 5 on page 37. Because of a physical, mental, or emotional condition, does this person have difficulty doing errands alone such as visiting a doctor's office or shopping? Yes No
	a. Because of a physical, mental, or emotional condition, does this person have serious difficulty concentrating, remembering, or making decisions?	What is this person's marital status? Now married Widowed Divorced Separated Never married → SKIP to 1 on the next page
	 Yes No b. Does this person have serious difficulty walking or climbing stairs? Yes No 	Yes No a. Married?
	c. Does this person have difficulty dressing or bathing? Yes No	How many times has this person been married? Once Two times Three or more times In what year did this person last get married? Year



Answer question 24 if this part of 15 – 50 years old. Otherwis		Has this person ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard? Mark (X) ONE box.
Has this person given bir past 12 months?	th to any children in the	 Never served in the military → SKIP to question 29a Only on active duty for training in the Reserves or National Guard → SKIP to question 28a Now on active duty On active duty in the past, but not now
a. Does this person have grandchildren under the this house or apartment Yes No → SKIP to question	any of his/her own ne age of 18 living in nt?	When did this person serve on active duty in the U.S. Armed Forces? Mark (X) a box for EACH period in which this person served, even if just for part of the period. September 2001 or later August 1990 to August 2001 (including Persian Gulf War)
under the age of 18 whapartment? ☐ Yes ☐ No → SKIP to question c. How long has this grant for these grandchildren	s of any grandchildren no live in this house or on 26 dparent been responsible n? If the grandparent is r more than one grandchild, he grandchild for whom	May 1975 to July 1990 Vietnam era (August 1964 to April 1975) February 1955 to July 1964 Korean War (July 1950 to January 1955) January 1947 to June 1950 World War II (December 1941 to December 1946) November 1941 or earlier a. Does this person have a VA service-connected disability rating?
Less than 6 months 6 to 11 months 1 or 2 years 3 or 4 years 5 or more years		 Yes (such as 0%, 10%, 20%,, 100%) No → SKIP to question 29a b. What is this person's service-connected disability rating? 0 percent 10 or 20 percent 30 or 40 percent 50 or 60 percent 70 percent or higher



29 a.	LAST WEEK, did this person work for pay at a job (or business)? ☐ Yes → SKIP to question 30	J	Answer question 32 if you marked "Car, truck, or van" in question 31. Otherwise, SKIP to question 33.
b.	 No – Did not work (or retired) LAST WEEK, did this person do ANY work for pay, even for as little as one hour? Yes No → SKIP to question 35a 	32	How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK? Person(s)
lo w	t what location did this person work LAST IEEK? If this person worked at more than one cation, print where he or she worked most last reek. Address (Number and street name)	33	What time did this person usually leave home to go to work LAST WEEK? Hour Minute a.m. p.m.
b.	If the exact address is not known, give a description of the location such as the building name or the nearest street or intersection. Name of city, town, or post office	34	How many minutes did it usually take this person to get from home to work LAST WEEK? Minutes
c.	Is the work location inside the limits of that city or town? Yes No, outside the city/town limits	K	Answer questions 35 – 38 if this person did NOT work last week. Otherwise, SKIP to question 39a.
	Name of county Name of U.S. state or foreign country	35	a. LAST WEEK, was this person on layoff from a job? ☐ Yes → SKIP to question 35c ☐ No
f.	ZIP Code		 b. LAST WEEK, was this person TEMPORARILY absent from a job or business? Yes, on vacation, temporary illness, maternity leave, other family/personal reasons, bad weather, etc. → SKIP to question 38 No → SKIP to question 36
W m	ow did this person usually get to work LAST IEEK? If this person usually used more than one nethod of transportation during the trip, mark (X) the ox of the one used for most of the distance.		c. Has this person been informed that he or she will be recalled to work within the next 6 months OR been given a date to return to work?
	Car, truck, or van Bus or trolley bus Streetcar or trolley car Subway or elevated Railroad Ferryboat Taxicab Motorcycle Bicycle Walked Worked at home → SKIP to question 39a Other method		Yes → SKIP to question 37No



36	During the LAST 4 WEEKS, has this person been ACTIVELY looking for work? Yes		Answer questions 41 – 46 if this person worked in the past 5 years. Otherwise, SKIP to question 47.
37	No → SKIP to question 38 LAST WEEK, could this person have started a job if offered one, or returned to work if recalled? Yes, could have gone to work No, because of own temporary illness No, because of all other reasons (in school, etc.)	á i i	ACTIVITY. Describe clearly this person's chief job activity or business last week. If this person had more than one job, describe the one at which this person worked the most hours. If this person had no job or business last week, give information for his/her last job or business.
38	When did this person last work, even for a few days?	49	Nas this person – Mark (X) ONE box.
	 Within the past 12 months 1 to 5 years ago → SKIP to L Over 5 years ago or never worked → SKIP to question 47 		an employee of a PRIVATE FOR-PROFIT company or business, or of an individual, for wages, salary, or commissions? an employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization?
39	a. During the PAST 12 MONTHS (52 weeks), did this person work 50 or more weeks? Count paid time off as work.		a local GOVERNMENT employee (city, county, etc.)? a state GOVERNMENT employee?
	Yes → SKIP to question 40 No No No No No No No No No N	l t	a Federal GOVERNMENT employee? SELF-EMPLOYED in own NOT INCORPORATED business, professional practice, or farm? SELF-EMPLOYED in own INCORPORATED business, professional practice, or farm? working WITHOUT PAY in family business or farm? For whom did this person work? If now on active duty in the Armed Forces, mark (X) this box → and print the branch of the Armed Forces. Name of company, business, or other employer
40	During the PAST 12 MONTHS, in the WEEKS WORKED, how many hours did this person usually work each WEEK? Usual hours worked each WEEK		What kind of business or industry was this? Describe the activity at the location where employed. For example: hospital, newspaper publishing, mail order house, auto engine manufacturing, bank)
			manufacturing? wholesale trade? retail trade? other (agriculture, construction, service, government, etc.)?

5	For example: registered nurse, personnel manager, supervisor of order department, secretary, accountant)	Yes → \$.00
		No
		TOTAL AMOUNT for past 12 months
	What were this person's most important activities	e. Supplemental Security Income (SSI).
	or duties? (For example: patient care, directing hiring policies, supervising order clerks, typing and filing,	\(\text{Yes} \rightarrow \\$ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	econciling financial records)	No.
		TOTAL AMOUNT for past 12 months
		f. Any public assistance or welfare payment
	NCOME IN THE PAST 12 MONTHS	from the state or local welfare office.
	Mark (X) the "Yes" box for each type of income this person received, and give your best estimate of the	☐ Yes → \$.00
1	TOTAL AMOUNT during the PAST 12 MONTHS. NOTE: The "past 12 months" is the period from	No TOTAL AMOUNT for past
	oday's date one year ago up through today.)	12 months
	Mark (X) the "No" box to show types of income NOT received.	g. Retirement, survivor, or disability pension Do NOT include Social Security.
	f net income was a loss, mark the "Loss" box to the ight of the dollar amount.	☐ Yes → \$.00
	For income received jointly, report the appropriate	TOTAL AMOUNT for past 12 months
•	thare for each person – or, if that's not possible, report the whole amount for only one person and	h. Any other sources of income received
	mark the "No" box for the other person.	regularly such as Veterans' (VA) payments unemployment compensation, child supp
1	. Wages, salary, commissions, bonuses, or tips	alimony. Do NOT include lump sum payments as money from an inheritance or the sale of a l
	from all jobs. Report amount before deductions for taxes, bonds, dues, or other items.	
	\(\text{Yes} \rightarrow \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	☐ Yes → \$.00
	□ No	No TOTAL AMOUNT for past 12 months
	TOTAL AMOUNT for past 12 months	What was this person's total income during
	o. Self-employment income from own nonfarm	PAST 12 MONTHS? Add entries in questions 47 47h; subtract any losses. If net income was a loss
	businesses or farm businesses, including proprietorships and partnerships. Report	the amount and mark (X) the "Loss" box next to the dollar amount.
	NET income after business expenses.	donar amount.
	☐ Yes → \$.00 ☐	OR \$.00
	No TOTAL AMOUNT for past 12 months	None TOTAL AMOUNT for past 12 months
	. Interest, dividends, net rental income, royalty	
	income, or income from estates and trusts. Report even small amounts credited to an account.	
	☐ Yes → \$.00 ☐	
	No TOTAL AMOUNT for past Loss	



SKIP to page 44 for mailing instructions.

Person 5

Last Name	nursery or preschool, kindergarten, elementary school, home school, and schooling which leads to a high school diploma or a college degree.
First Name MI	No, has not attended in the last 3 months → SKIP to question 11
	Yes, public school, public college
	Yes, private school, private college, home school
Where was this person born?	b. What grade or level was this person attending Mark (X) ONE box.
☐ In the United States – <i>Print name of state.</i>	Nursery school, preschool
	☐ Kindergarten
	Grade 1 through 12 – Specify
Outside the United States – Print name of foreign	grade 1 – 127
country, or Puerto Rico, Guam, etc.	
	College undergraduate years (freshman to senior)
s this person a citizen of the United States?	Graduate or professional school beyond a
Yes, born in the United States → SKIP to	bachelor's degree (for example: MA or PhD program, or medical or law school)
question 10a Yes, born in Puerto Rico, Guam, the U.S. Virgin	
Islands, or Northern Marianas	What is the highest degree or level of school the person has COMPLETED? Mark (X) ONE box.
Yes, born abroad of U.S. citizen parent or parents	If currently enrolled, mark the previous grade or
Yes, U.S. citizen by naturalization – <i>Print year</i>	highest degree received.
of naturalization	NO SCHOOLING COMPLETED
	☐ No schooling completed
	NURSERY OR PRESCHOOL THROUGH GRADE 12
No, not a U.S. citizen	Nursery school
	Kindergarten
When did this person come to live in the	Grade 1 through 11 – Specify grade 1 – 11 –
United States? Print numbers in boxes.	grade 1 11
Year	
	☐ 12th grade – NO DIPLOMA
	HIGH SCHOOL GRADUATE
	Regular high school diploma
	GED or alternative credential
	COLLEGE OR SOME COLLEGE
	Some college credit, but less than 1 year of
	college credit
	1 or more years of college credit, no degree
	Associate's degree (for example: AA, AS)
	☐ Bachelor's degree (for example: BA, BS)
	AFTER BACHELOR'S DEGREE
	Master's degree (for example: MA, MS, MEng, MEd. MSW. MBA)
	 ✓ Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA) ✓ Professional degree beyond a bachelor's degree (for example: MD, DDS, DVM, LLB, JD)



F	Answer question 12 if this person has a bachelor's degree or higher. Otherwise, SKIP to question 13.	15	a. Did this person live in this house or apartment 1 year ago?
			Person is under 1 year old → SKIP to question 16
2	This question focuses on this person's		Yes, this house → SKIP to question 16
	BACHELOR'S DEGREE. Please print below the specific major(s) of any BACHELOR'S DEGREES this person has received. (For example: chemical engineering, elementary teacher education, organizational psychology)		No, outside the United States and Puerto Rico Print name of foreign country, or U.S. Virgin Islands, Guam, etc., below; then SKIP to question 16
			_
			No, different house in the United States or Puerto Rico
			b. Where did this person live 1 year ago?
	Million to the control of the contro		Address (Number and street name)
3	What is this person's ancestry or ethnic origin?		
	(For example: Italian, Jamaican, African Am., Cambodiar Cape Verdean, Norwegian, Dominican, French Canadian, Haitian, Korean, Lebanese, Polish, Nigerian, Mexican,	n,	Name of city, town, or post office
	Taiwanese, Ukrainian, and so on.)		Name of U.S. county or municipio in Puerto Rico
4	a. Does this person speak a language other		municipio in Puerto Rico
	than English at home?		
	YesNo → SKIP to question 15a		Name of U.S. state or Puerto Rico ZIP Code
	b. What is this language?		
	For example: Korean, Italian, Spanish, Vietnamese c. How well does this person speak English?	16	Is this person CURRENTLY covered by any of the following types of health insurance or health coverage plans? Mark "Yes" or "No" for EACH type of coverage in items a – h.
	☐ Very well ☐ Well		a. Insurance through a current or former employer or union (of this person or another family member)
	Not wellNot at all		b. Insurance purchased directly from an insurance company (by this person or another family member)
			c. Medicare, for people 65 and older, or people with certain disabilities
			d. Medicaid, Medical Assistance, or any kind of government-assistance plan for those with low incomes or a disability
			e. TRICARE or other military health care
			f. VA (including those who have ever used or enrolled for VA health care)
			g. Indian Health Service
			h. Any other type of health insurance or health coverage plan – Specify



a. Is this person deaf or does he/she have serious difficulty hearing? Yes No	Answer question 19 if this person is 15 years old or over. Otherwise, SKIP to the mailing instructions on page 44.
b. Is this person blind or does he/she have serious difficulty seeing even when wearing glasses? Yes No	Because of a physical, mental, or emotional condition, does this person have difficulty doing errands alone such as visiting a doctor's office or shopping? Yes No
Answer question 18a – c if this person is 5 years old or over. Otherwise, SKIP to the mailing instructions on page 44.	What is this person's marital status? Now married Widowed
a. Because of a physical, mental, or emotional condition, does this person have serious difficulty concentrating, remembering, or making decisions?	 □ Divorced □ Separated □ Never married → SKIP to
☐ Yes ☐ No	In the PAST 12 MONTHS did this person get – Yes No
 b. Does this person have serious difficulty walking or climbing stairs? Yes No 	a. Married?
c. Does this person have difficulty dressing or bathing?YesNo	How many times has this person been married? Once Two times Three or more times
	In what year did this person last get married? Year

ı		
l	Answer question 24 if this person is female and 15 – 50 years old. Otherwise, SKIP to question 25a.	Has this person ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard? Mark (X) ONE box.
22	Has this person given birth to any children in the past 12 months?	 Never served in the military → SKIP to question 29a Only on active duty for training in the Reserves or National Guard → SKIP to question 28a Now on active duty
l	☐ Yes ☐ No	On active duty in the past, but not now
25		When did this person serve on active duty in the U.S. Armed Forces? Mark (X) a box for EACH period in which this person served, even if just for part of the period. September 2001 or later August 1990 to August 2001 (including
	 b. Is this grandparent currently responsible for most of the basic needs of any grandchildren under the age of 18 who live in this house or apartment? Yes No → SKIP to question 26 c. How long has this grandparent been responsible for these grandchildren? If the grandparent is financially responsible for more than one grandchild, answer the question for the grandchild for whom 	Persian Gulf War) May 1975 to July 1990 Vietnam era (August 1964 to April 1975) February 1955 to July 1964 Korean War (July 1950 to January 1955) January 1947 to June 1950 World War II (December 1941 to December 1946) November 1941 or earlier
	the grandparent has been responsible for the longest period of time. Less than 6 months 6 to 11 months 1 or 2 years 3 or 4 years 5 or more years	a. Does this person have a VA service-connected disability rating? Yes (such as 0%, 10%, 20%,, 100%) No → SKIP to question 29a b. What is this person's service-connected disability rating? O percent 10 or 20 percent 30 or 40 percent 50 or 60 percent 70 percent or higher



29) ;	a. LAST WEEK, did this person work for pay at a job (or business)? ☐ Yes → SKIP to question 30	J	Answer question 32 if you marked "Car, truck, or van" in question 31. Otherwise, SKIP to question 33.
١		☐ No – Did not work (or retired)		
l	ı	b. LAST WEEK, did this person do ANY work for pay, even for as little as one hour?	32	How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK?
١		Yes		Person(s)
١		No → SKIP to question 35a		
30		At what location did this person work LAST WEEK? If this person worked at more than one location, print where he or she worked most last week.	33	go to work LAST WEEK?
١	•	a. Address (Number and street name)		Hour Minute a.m.
١				p.m.
		If the exact address is not known, give a description of the location such as the building name or the nearest street or intersection.	34	How many minutes did it usually take this person to get from home to work LAST WEEK?
١	١	b. Name of city, town, or post office		Minutes
١				
l	•	c. Is the work location inside the limits of that city or town?	K	Answer questions 35 – 38 if this person
١		☐ Yes		did NOT work last week. Otherwise, SKIP to question 39a.
١		No, outside the city/town limits		
١	(d. Name of county	35	a. LAST WEEK, was this person on layoff from
١				a job?
١	(e. Name of U.S. state or foreign country		Yes → SKIP to question 35cNo
١				
١				b. LAST WEEK, was this person TEMPORARILY absent from a job or business?
١	1	f. ZIP Code		Yes, on vacation, temporary illness, maternity leave, other family/personal reasons,
١				bad weather, etc. → SKIP to question 38 No → SKIP to question 36
31		How did this person usually get to work LAST		,
		WEEK? If this person usually used more than one method of transportation during the trip, mark (X) the box of the one used for most of the distance.		c. Has this person been informed that he or she will be recalled to work within the next 6 months OR been given a date to return to work?
		☐ Car, truck, or van ☐ Motorcycle		☐ Yes → SKIP to question 37
		Bus or trolley bus Bicycle		∐ No
		Streetcar or trolley car Walked		
		Subway or elevated Worked at home → SKIP		
		Townsheet -		
		☐ Taxicab ☐ Other method		



36	During the LAST 4 WEEKS, has this person been ACTIVELY looking for work? Yes		Answer questions 41 – 46 if this person worked in the past 5 years. Otherwise, SKIP to question 47.
37	 No → SKIP to question 38 LAST WEEK, could this person have started a job if offered one, or returned to work if recalled? Yes, could have gone to work No, because of own temporary illness No, because of all other reasons (in school, etc.) 		41 – 46 CURRENT OR MOST RECENT JOB ACTIVITY. Describe clearly this person's chief job activity or business last week. If this person had more than one job, describe the one at which this person worked the most hours. If this person had no job or business last week, give information for his/her last job or business.
38	When did this person last work, even for a few days?	40	Was this person – Mark (X) ONE box.
	 Within the past 12 months 1 to 5 years ago → SKIP to L 		 an employee of a PRIVATE FOR-PROFIT company or business, or of an individual, for wages, salary, or commissions? an employee of a PRIVATE NOT-FOR-PROFIT,
	Over 5 years ago or never worked → SKIP to question 47		tax-exempt, or charitable organization? a local GOVERNMENT employee
39	a. During the PAST 12 MONTHS (52 weeks), did this person work 50 or more weeks? Count paid time off as work.		(city, county, etc.)? a state GOVERNMENT employee? a Federal GOVERNMENT employee?
	Yes → SKIP to question 40No		SELF-EMPLOYED in own NOT INCORPORATED business, professional practice, or farm?
	b. How many weeks DID this person work, even for a few hours, including paid vacation, paid sick leave, and military service? 50 to 52 weeks		SELF-EMPLOYED in own INCORPORATED business, professional practice, or farm?working WITHOUT PAY in family business or farm?
	□ 48 to 49 weeks□ 40 to 47 weeks□ 27 to 39 weeks□ 14 to 26 weeks	42	For whom did this person work? If now on active duty in the Armed Forces, mark (X) this box → and print the branch of the Armed Forces. Name of company, business, or other employer
	☐ 13 weeks or less		
40	During the PAST 12 MONTHS, in the WEEKS WORKED, how many hours did this person usually work each WEEK? Usual hours worked each WEEK	43	What kind of business or industry was this? Describe the activity at the location where employed. (For example: hospital, newspaper publishing, mail order house, auto engine manufacturing, bank)
		44	Is this mainly – Mark (X) ONE box.
			manufacturing? wholesale trade? retail trade? other (agriculture, construction, service, government, etc.)?

45	What kind of work was this person doing? (For example: registered nurse, personnel manager, supervisor of order department, secretary, accountant)	d. Social Security or Railroad Retirement. ☐ Yes → \$.00
46	What were this person's most important activities or duties? (For example: patient care, directing hiring policies, supervising order clerks, typing and filing, reconciling financial records)	No TOTAL AMOUNT for past 12 months e. Supplemental Security Income (SSI). Yes → \$.00 No TOTAL AMOUNT for past
1	INCOME IN THE PAST 12 MONTHS Mark (X) the "Yes" box for each type of income this	f. Any public assistance or welfare payments from the state or local welfare office.
	person received, and give your best estimate of the TOTAL AMOUNT during the PAST 12 MONTHS. (NOTE: The "past 12 months" is the period from today's date one year ago up through today.)	No TOTAL AMOUNT for past 12 months
	Mark (X) the "No" box to show types of income NOT received.	g. Retirement, survivor, or disability pensions. Do NOT include Social Security.
	If net income was a loss, mark the "Loss" box to the right of the dollar amount.	☐ Yes → \$.00
	For income received jointly, report the appropriate share for each person – or, if that's not possible, report the whole amount for only one person and mark the "No" box for the other person.	TOTAL AMOUNT for past 12 months h. Any other sources of income received regularly such as Veterans' (VA) payments, unemployment compensation, child support or
	a. Wages, salary, commissions, bonuses, or tips from all jobs. Report amount before deductions for taxes, bonds, dues, or other items.	alimony. Do NOT include lump sum payments such as money from an inheritance or the sale of a home. ☐ Yes → \$
	☐ Yes → \$.00 ☐ No TOTAL AMOUNT for past 12 months	No TOTAL AMOUNT for past 12 months
	b. Self-employment income from own nonfarm businesses or farm businesses, including proprietorships and partnerships. Report NET income after business expenses.	What was this person's total income during the PAST 12 MONTHS? Add entries in questions 47a to 47h; subtract any losses. If net income was a loss, enter the amount and mark (X) the "Loss" box next to the dollar amount.
	Yes → \$.00 Loss TOTAL AMOUNT for past 12 months	OR S .00 Loss TOTAL AMOUNT for past 12 months
	c. Interest, dividends, net rental income, royalty income, or income from estates and trusts. Report even small amounts credited to an account.	
	Yes → \$.00 No TOTAL AMOUNT for past 12 months	
	12 monais	Now continue with the mailing instructions on



Mailing Instructions

Please make sure you have...

- listed all names and answered the questions on pages 2, 3, and 4
- answered all Housing questions
- answered all Person questions for each person.

Then...

 put the completed questionnaire into the postage-paid return envelope. If the envelope has been misplaced, please mail the questionnaire to:

> U.S. Census Bureau P.O. Box 5240 Jeffersonville, IN 47199-5240

 make sure the barcode above your address shows in the window of the return envelope.

Thank you for participating in the American Community Survey.

For Census Bureau Use					
POP EDIT PHONE	JIC1 JIC2				
EDIT CLERK TELEPHONE CL	LERK JIC3 JIC4				

The Census Bureau estimates that, for the average household, this form will take 40 minutes to complete, including the time for reviewing the instructions and answers. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: Paperwork Project 0607-0936, U.S. Census Bureau, 4600 Silver Hill Road, AMSD – 3K138, Washington, D.C. 20233. You may e-mail comments to Paperwork@census.gov; use "Paperwork Project 0607-0936" as the subject. Please DO NOT RETURN your questionnaire to this address. Use the enclosed preaddressed envelope to return your completed questionnaire.

Respondents are not required to respond to any information collection unless it displays a valid approval number from the Office of Management and Budget. This 8-digit number appears in the bottom right on the front cover of this form.

Form ACS-1(X)QD85 (02-05-2013)

