**Appendix 13: Internet APS Baseline Interview**

**Thank you for agreeing to participate in another On the Road to Retirement survey of American households being conducted by the U.S. Department of Labor. The goal of this study is to collect information on how households make important decisions from early in their working lives all the way into retirement. Some of the questions concern household finances, such as retirement savings. Other questions ask about your work situation and health.**

**The following statement is made in accordance with the Privacy Act of 1974 (5. U. S. C. 552a). Section 513(a) of the Employee Retirement Income Security Act of 1974 (ERISA), 29 U.S.C. 1143, authorizes EBSA to conduct this survey. Your survey responses will be used for research and statistical purposes by the Department of Labor and contractors and researchers working with us on this study. We will keep your identity private to the extent permitted by law. The Department intends to release a public data file with information obtained from this survey, but will do so in in a way that protects the privacy of individual respondents. For example, released data will not include any first remove all personally identifying information, such as your name and address. Your participation is voluntary, and your decision to participate or not to participate will not affect your standing or relationship with the U.S. Department of Labor in any way.**

**Paperwork Reduction Act Statement: This survey has been approved under Office of Management and Budget (OMB) control number 1210-0NEW (exp. 00/30/00). The Paperwork Reduction Act of 1995 provides that no person is required to respond to a Federal collection of information unless it displays a valid OMB control number. Your response is voluntary, and we will use this information to evaluate and improve the quality of our services. The Department estimates that it will take approximately 30 minutes (on average) for respondents to complete the survey. Please send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the U.S. Department of Labor, Office of Policy and Research, Attention: PRA Clearance Officer, 200 Constitution Avenue, N.W., Room N-5718, Washington, DC 20210 or email ebsa.opr@dol.gov<mailto:ebsa.opr@dol.gov> and reference the OMB Control Number1210-0NEW .**

**(1) Background**

***DHC1-DHC16d: Pre-Load information and confirm when available (all but DHC8 and DHC14)***

**(1) Background**

**DHC1. What is your birth date?**

Month

Day

Year

**DHC2. What is your sex?**

 Male

 Female

**DHC3. Now we would like to know about where you live. In which state do you reside?**

1 ALASKA (AK) - 52 PUERTO RICO

**DHC4. Were you born in the United States?**

1 Yes

2 No

**DHC5. In what state were you born?**

1 ALASKA (AK) - 52 PUERTO RICO

**DHC6. Are you a citizen of the United States?**

1 Yes

2 No

**DHC7. What is the highest level of school you have completed or the highest degree you have received?**

1 Less than 1st grade

2 1st, 2nd, 3rd, or 4th grade

3 5th or 6th grade

4 7th or 8th grade

5 9th grade

6 10th grade

7 11th grade

8 12th grade NO DIPLOMA

9 HIGH SCHOOL GRADUATE high school DIPLOMA or the equivalent (For example: GED)

10 Some college but no degree

11 Associate degree in college Occupational/vocational program

12 Associate degree in college Academic program

13 Bachelor's degree (For example: BA,AB,BS)

14 Master's degree (For example: MA,MS,MEng,MEd,MSW,MBA)

15 Professional School Degree (For example: MD,DDS,DVM,LLB,JD)

16 Doctorate degree (For example: PhD,EdD)

**DHC8. Would you say your health is excellent, very good, good, fair, or poor?**

1 Excellent

2 Very good

3 Good

4 Fair

5 Poor

**DHC9. Are you of Hispanic, Latino, or Spanish origin?**

\_\_\_ No, not of Hispanic, Latino, or Spanish origin

\_\_\_ Yes, Mexican, Mexican American, Chicano

\_\_\_ Yes, Puerto Rican

\_\_\_ Yes, Cuban

\_\_\_ Yes, another Hispanic, Latino, or Spanish origin

**DHC10. What is your race?** *Mark (X) one or more boxes.*

\_\_\_ White

\_\_\_ Black, African American, or Negro

\_\_\_ American Indian or Alaska Native

\_\_\_\_ Asian Indian \_\_\_\_ Japanese \_\_\_\_ Native Hawaiian

\_\_\_\_ Chinese \_\_\_\_ Korean \_\_\_\_ Guamanian or Chamorro

\_\_\_\_ Filipino \_\_\_\_ Vietnamese \_\_\_\_ Samoan

\_\_\_\_ Other Asian  \_\_\_\_ Other Pacific Islander

**DHC11. What is your marital status?**

1 Married

2 Separated

3 Divorced

4 Widowed

5 Never married

**DHC11A. Are you currently living with {your spouse/ a partner}?**

Yes

No

**DHC12. Now we would like to know about other adult members of your household, if there are any. How many other people 18 years of age or older live with you?** (enter 0 for no other adults).

**DHC12a. And how many other people under 18 years of age live with you, if any?** (enter 0 for no one).

***If DHC11A=No (Not living with a spouse/partner), THEN skip to DHC15****.*

**DHC13. Now, please tell us about your {spouse/partner}, indicating the age, sex, and education.**

*[Display 13a-13c as table]*

**DHC13a**. What is the age of your {spouse/partner}?

#\_\_\_\_\_

**DHC13b**. What is the sex of your {spouse/partner}?

 1 Male

 2 Female

**DHC13c. What is the highest level of school {he/she} has completed or the highest degree {he/she} has received?**

1 Less than 1st grade

2 1st,2nd,3rd,or 4th grade

3 5th or 6th grade

4 7th or 8th grade

5 9th grade

6 10th grade

7 11th grade

8 12th grade NO DIPLOMA

9 HIGH SCHOOL GRADUATE high school DIPLOMA or the equivalent (For example: GED)

10 Some college but no degree

11 Associate degree in college Occupational/vocational program

12 Associate degree in college Academic program

13 Bachelor's degree (For example: BA,AB,BS)

14 Master's degree (For example: MA,MS,MEng,MEd,MSW,MBA)

15 Professional School Degree (For example: MD,DDS,DVM,LLB,JD)

16 Doctorate degree (For example: PhD,EdD)

**DHC14. And what about your {spouse’s/partner’s} health. Would you say {his/her} health is excellent, very good, good, fair, or poor?**

1 Excellent

2 Very good

3 Good

4 Fair

5 Poor

**DHC15 *If DHC12>0 and/or DHC12a>0, then go to DHC16. Otherwise, skip to Section 2***

**DHC16. Now, please tell us about the other members of your household who live with you, indicating the relationship, age, sex, and current educational status.**

*[Display 16a-16d as table]*

**DHC16a**. **Which best describes this person’s relationship to you?**

* Child (biological, adopted, or step)
* Foster child
* Grandchild
* Parent or Parent-in-law
* Brother or Sister
* Housemate or roommate
* Other relative
* Other nonrelative

**DHC16b. Age?**  #\_\_\_\_ years

**DHC16c**. **Sex?**

* Male
* Female

**DHC16d. Currently enrolled in school?**

* Yes
* No

**(2) Financial Decisions**

*If DH11>0 (other adult household members), then continue. Otherwise, SKIP to HF3:*

**HF1. Now please think about the financial situation among members of your household. Among the adults in your household, which of you is the most knowledgeable about the assets, debts and retirement planning of the household?** *Choose only one*

\_\_\_ Me

\_\_\_ My {spouse/partner}

\_\_\_ Another adult in my household who is not my {spouse/partner}

 (please specify relationship, such as child, parent, etc.) \_\_\_\_\_\_\_

\_\_\_ My {spouse/partner} and I are equally knowledgeable

\_\_\_ Another adult in my household who is not my {spouse/partner} and I are equally knowledgeable

\_\_\_ Other

 please specify \_\_\_\_\_

**HF2. We would like to understand how financial responsibilities are divided in your household. Among the adults in your household, which of you is primarily responsible for making long-term saving and investment plans?** *Choose only one*

\_\_\_ Me

\_\_\_ My {spouse/partner}

\_\_\_ Another adult in my household who is not my {spouse/partner}

 (please specify relationship, such as child, parent, etc.) \_\_\_\_\_\_\_

\_\_\_ My {spouse/partner} and I make the household plans together

\_\_\_ Another adult in my household who is not my {spouse/partner} and I make the plans together

\_\_\_ My {spouse/partner} and another adult in the household make the plans together

\_\_\_ I make my own individual plan separate from any other adult in the household

\_\_\_ Other

 please specify \_\_\_\_\_\_

**HF3. In the past year, have you received financial information related to retirement from any of the following sources? This would include information on such things as retirement planning, saving, or investing.** *Check all that apply***.**

\_\_\_ One-on-one meeting(s) or communications with professional financial services providers (e.g., in person, by phone, by email)

\_\_\_ Seminar or group meeting(s) with professional financial services providers (e.g., in person, video presentation, webinar)

\_\_\_ Personalized information via website(s) (e.g., online chat with financial service representative, or

financial calculators that analyze your retirement savings or investment accounts and/or make recommendations for changes to your retirement holdings or contributions)

\_\_\_ General information via website(s) (e.g., websites that provide general financial information or

advice related to retirement)

\_\_\_ Government websites or publications (e.g., from Social Security Administration or IRS)

\_\_\_ Members of your household

\_\_\_ Friends and family outside of your household

\_\_\_ Coworkers

\_\_\_ Books/Newspapers/Magazines/Television

\_\_\_ Other

 please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Or**

\_\_\_\_ I have not received any such financial information in the past year  *SKIP to HF3b.*

**HF3FollowCheckPoint.**

*If multiple responses to HF3, then GO TO HF3a.*

*Otherwise, If any of first three response categories were chosen in HF3, follow up on each with HF3aFeeFollowUp*

*Otherwise, SKIP to HF3b.*

**HF3a. Please rank {these / the top three} sources of information in order of importance to your financial planning for retirement.**

1. Most Important \_\_\_\_\_

2. Second Most Important \_\_\_\_\_
3. Third Most Important \_\_\_\_\_

*If any of first three response categories were in HF3 were chosen, follow up on each with HF3aFeeFollowUp*

*Otherwise, skip to HF3b*

**HF3b. Who pays for {*source of information*}?**  *Choose only one*

1. I pay for it (e.g., as a commission or amount per transaction, flat fee, annual/monthly/hourly fee, or as a percentage of my account balance)
2. My employer pays for it
3. It is a free service that I receive but is not necessarily free to everyone (e.g., because I have an account with the provider or I am a client of the provider)
4. It is free to the public
5. Other, please specify: \_\_\_\_\_\_\_\_\_\_
6. Don’t know

**HF3c.** **How often do you seek out financial information related to retirement?**

1. Never

2. No more than once per year

3. A few times per year

4. Every month

5. Every week

**HF4. In the past year, have you received financial information not related to retirement planning through any of the following types of direct communication with a professional financial services provider?**  *Check all that apply.*

 \_\_\_ One-on-one meeting(s) or communications with professional financial services providers (e.g., in person, by phone, by email)

 \_\_\_ Seminar or group meeting(s) with professional financial services providers (e.g., in person, video presentation, webinar)

\_\_\_ Personalized information via web site(s) (e.g., online chat with financial service

representative, or financial calculators that help with monthly budgeting)

**Or**

\_\_\_\_ I have not received any such financial information in the past year

*If living with a spouse or partner, continue to HF5. Otherwise SKIP to Section 3 (FC1)*

**HF5. In the past year, has your {spouse/partner} received financial information related to retirement through any of the following types of direct communication with a professional financial services provider{, including any of the communications related to retirement that you just told us about, if your (spouse/partner) participated as well}?** *Check all that apply.*

 \_\_\_ One-on-one meeting(s) or communications with professional financial services providers (e.g., in person, by phone, by email)

 \_\_\_ Seminar or group meeting(s) with professional financial services providers (e.g., in person, video presentation, webinar)

\_\_\_ Personalized information via web site(s) (e.g., online chat with financial service

representative, or financial calculators that analyze your retirement savings or investment accounts and/or make recommendations for changes to your retirement holdings or contributions)

 \_\_ Don’t know *SKIP TO HF6*

**Or**

\_\_\_\_ My {spouse/partner} has not received any such financial information in the past year. *SKIP to HF6.*

**HF5b. Did you participate in the meeting(s) and/or communications along with your {spouse/partner}?**

1. Yes, I participated in each one

 2. I participated in some but not all of the meetings and/or communications

 3. No, I did not participate

*SKIP to Section 3 (FC1)*

**HF6. In the past year, has your {spouse/partner} received financial information not related to retirement through any of the following types of direct communication with a professional financial services provider{, including any of the communications that you just told us about, if your (spouse/partner) participated as well}?** *Check all that apply*

 \_\_\_ One-on-one meeting(s) or communications with professional financial services providers (e.g., in person, by phone, by email)

 \_\_\_ Seminar or group meeting(s) with professional financial services providers (e.g., in person, video presentation, webinar)

\_\_\_ Personalized information via web site(s) (e.g., online chat with financial service

representative, or financial calculators that help with monthly budgeting)

 \_\_\_ Don’t know

**Or**

\_\_\_\_ My {spouse/partner} has not received any such financial information in the past year.

**(3) Saving and Spending**

**FC1. Suppose you had $100 in a savings account and the interest rate was 2% per year. After 5 years, how much do you think you would have in the account if you left the money to grow?**

* More than $102
* Exactly $102
* Less than $102
* Don’t know

**FC2. Imagine that the interest rate on money held in your savings account was 1% per year and that the rate of price inflation on the things you buy was 2% per year. Generally speaking, how much would you be able to buy with money held in this savings account after 1 year?**

* More than today
* Exactly the same
* Less than today
* Don’t know

**FC3. True or False: Buying a single company’s stock usually provides a safer return than a stock mutual fund.**

* True
* False
* Don’t know

*FC4 and FC5 responses given on a 5 point scale -- strength of agreement (1= strongly disagree, 5= strongly agree):*

**FC4. I am pretty good at math.**

**FC5. I am good at dealing with day-to-day financial matters, such as checking accounts, credit and debit cards, and tracking expenses.**

**FC6. Over the past year, would you say your household's spending was less than, more than, or about equal to your household's income?** *Please do not include the purchase of a new house or car, or other big investments you may have made over the past year.*

* + Spending less than income
	+ Spending about equal to income
	+ Spending more than income
	+ Don’t know

**FC7. Please indicate below the option that best describes your payments on credit cards.**

* + Always pay off monthly
	+ Generally pay off monthly
	+ Occasionally pay off monthly
	+ Seldom pay off, but try to pay down
	+ Generally pay the minimum each month
	+ Pay less than the minimum or skip payments
	+ Don’t know
	+ I don’t have any credit cards

**FC8.**



**(4) Your Employment**

**EPRD2. We are interested in your present job status. Which one of the following BEST describes your current employment situation?**

1. Working now
2. Temporarily laid off and awaiting recall
3. On sick or other leave
4. Not employed, but looking for a job
5. Not employed and not looking for a job
6. Homemaker
7. Student
8. Disabled and not working
9. Retired

***If (EPRD2=1,2, or 3), then ask EPRD3***

**EPRD3. Thinking of {your current, main job / the job from which you (have been temporarily laid off/ are on leave)}, do you:**

1. Work full-time for someone else
2. Work part-time for someone else
3. Work for yourself (self-employed)
4. Work as a partner in a partnership (e.g. partner in law firm, medical practice)
5. Work as a consultant/contractor

***If EPRD2=7 “Student,” then ask EPRD4A***

**EPRD4A. Besides being a student, do you also have a paid job?** *Check all that apply*

1. Yes, I work full-time for someone else

2. Yes, I work part-time for someone else

3. Yes, I work for myself (self-employed)

4. Yes, I do some other type of work for pay

5. No

***If EPRD2=9 “Retired,” then ask EPRD4B***

**EPRD4B. Besides being retired, do you also have a paid job?** *Check all that apply*

1. Yes, I work full-time for someone else

2. Yes, I work part-time for someone else

3. Yes, I work for myself (self-employed)

4. Yes, I do some other type of work for pay

5. No

***If (EPRD2=1,2, or 3), then ask EPRD4C***

**EPRD4C. In addition to {your current, main job / the job from which you (have been temporarily laid off/ are on leave)}, do you have any of the following types of additional paid jobs?** *Check all that apply*

a. I have *another* job, and it is full-time

b. I have *another* job, and it is part-time

c. I do other work for pay that is not through a formal job. This may include activities like selling items you make at flea markets or online; freelance work through companies like Uber, Care.com, or Airbnb; or providing services for others like paid child care or yard work.

***If (EPRD2=4, 5, or 6), then ask EPRD4D***

**EPRD4D. Do you do any work for pay, even if not through a formal job?** This may include activities like selling items you make at flea markets or online; freelance work through companies like Uber, Care.com, or Airbnb; or providing services for others like paid child care or yard work).

1. Yes

2. No

***If (EPRD3 = 1, 2, or 5) or (EPRD4A = 1 or 2) or (EPRD4B = 1 or 2)***

**EPRD4E. If you were paid the same hourly rate that you make at your main job regardless of the number of hours you work, would you prefer to:**

1. Work the same number of hours that you usually work

2. Work more hours for more money

3. Work fewer hours for less money

*If* ***(EPRD3 = 1 or 2) or (EPRD4A = 1 or 2) or (EPRD4B = 1 or 2)*** *then continue. Otherwise, skip to EPR17.*

**EPR2. Next are some questions about {your current, main job. / the job from which you (have been temporarily laid off/ are on leave). / your main (full-time/part-time) job. } On this job, how frequently are you paid? That is, what is your “pay period”?**

* Daily
* Weekly
* Every two weeks
* Monthly
* Other, please specify: \_\_\_\_\_\_\_

**EPR2a. On this job, are you a member of a labor union or of an employee association similar to a union?**

* Yes
* No
* Don’t know

**EPR2b. On this job, are you covered by a union or employee association contract?**

* Yes
* No
* Don’t know

**EPR3. Are you employed by the government at the federal, state, or local
level?** *This includes teachers and other service workers who are on
the payrolls of local government, school district, and other agencies
of state and local government.*

* Yes, federal government S*kip to EPR6.*
* Yes, state government S*kip to EPR6.*
* Yes, local government (e.g., county, city, township) S*kip to EPR6.*
* No

**EPR4. Will you please tell us the name of your employer on this job?**

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

**EPR5. To be certain that we can correctly identify your employer, please tell us the Federal Employer Identification Number or “EIN” for {fill}. This number may be found, for example, on the Form W-2 you received from your employer in order to file your taxes. This number is reported in box b of your W-2, under the heading “Employer I.D. number.”**

**What is the Employer I.D. number?**

# \_\_\_\_\_

(Note: If you have a Form W-2 from this employer, please enter the Federal I.D. number from box b, not the state I.D. number shown elsewhere on your W-2).

**(5) Your Current Employer-Provided Retirement Plan**

**EPR6.**  **Now we'd like to ask some questions about retirement plans at your job, provided by your employer{ or union}. This includes traditional pension plans, 401(k) plans, SEP and SIMPLE IRAs, savings-and-thrift plans, deferred profit-sharing plans, and other types like stock ownership plans.**

**Do you have a retirement plan at {your current, main job / the job from which you (have been temporarily laid off/ are on leave)/ your main (full-time/part-time) job}?**

* Yes *SKIP TO EPR6M*
* No
* Don't know

 **EPR6a. Does your current employer {or union} offer a retirement plan?**

* Yes *SKIP to EPR6b unless EPR2a=”Yes” or EPR2b=”Yes”*
* No *SKIP to EPR17a*
* Don’t know *SKIP to EPR17a*

 **EPR6a1. Which one offers a retirement plan—your current employer, your labor union, or both?**

* My employer
* My labor union
* Both

 **EPR6b. Are you eligible to be included in any of these retirement plans?**

* Yes
* No*SKIP to EPR6f*
* Don’t know*SKIP to EPR6f*

**EPR6c. Does your current {employer’s/union’s/employer’s or union’s} plan automatically enroll workers like you?**

* Yes, I would have been automatically enrolled in my {employer’s/union’s/employer’s or union’s} plan, but I opted out of participating in it
* No, I was not automatically enrolled in any plan
* Don’t know

**EPR6d. Does your {employer/union/employer or union} make contributions to any plan for which you are eligible?**

* Yes
* No
* Don’t know

 **EPR6e. Do you intend to participate in a retirement plan provided by your current {employer/union/employer or union} at some time in the future?**

* Yes
* No
* Don’t know

 *SKIP to EPR17a*

 ***If no to EPR6b:***

**EPR6f. Will you be eligible if you continue to work for this {employer/union/employer or union}?**

* Yes
* No *SKIP to EPR17a*
* Don’t know *SKIP to EPR17a*

**EPR6g. How many more years will you have to work for this {employer/union/employer or union} before you will be eligible? \_\_\_ #years**

*SKIP to EPR17a*

**EPR6M. Do you participate in one retirement plan at this job or more than one plan?**

* One plan at this job
* More than one plan at this job
* Don’t know

**EPR7. In some retirement plans, known as “Defined Benefit” plans, retirement benefits are usually paid based on a formula involving age, years of service and salary.**

**In other retirement plans, known as “Defined Contribution” plans, money is accumulated in a retirement account for you.**

**{Is/Are} your retirement plan{s} of the “Defined Benefit” type or of the “Defined Contribution” type?**

1. Defined Benefit – benefits paid out based on a formula

2. Defined Contribution - money accumulates in a retirement account for me

3. Both types

8. Don’t know

*If EPR6M=”More than one plan,” then go to EPR7A1*

*Otherwise, skip to EPR7aCHECKPOINT*

**EPR7A1. Now we have some questions about the {***if EPR7=3*|**Defined Contribution type of} plan that is most important to you.**

**EPR7aCHECKPOINT:** *If EPR2a=”Yes” and/or EPR2b=”Yes” then go to EPR7a.*

*Otherwise, skip to EPR7b.*

**EPR7a. Is this retirement plan provided by your current employer, by your labor union, or both?**

* My employer
* My labor union
* Both

**EPR7b. Were you automatically enrolled in the plan by your {employer/union/ employer or union} or did you have to actively choose to enroll?**

* I was automatically enrolled by my {employer/union/employer or union}
* I actively chose to enroll
* Don’t know

**EPR7c. Do you have any choice over how the money in this retirement plan is invested?**

*For example, choices about investments in stocks or stock mutual funds, bonds or bond funds, or money market accounts.*

1 Yes
2 No
3 Don't know

*If EPR7c=1, then go to EPR7c2. Otherwise, skip to EPR8*

**EPR7c2. Does the plan offer you an option to receive financial advice on which investment options you should choose?**

* Yes
* No *Skip to EPR7d*
* Don’t know *Skip to EPR7d*

**EPR7c3. What types of advice does your plan offer?** *Check all that apply*

\_\_\_ One-on-one meeting(s) or communications with professional financial services providers (e.g., in person, by phone, by email)

\_\_\_ Seminar or group meeting(s) with professional financial services providers (e.g., in

person, video presentation, webinar)

\_\_\_ Personalized information via the plan’s website (e.g., online chat with financial

service representative, or financial calculators that analyze your retirement savings or investment accounts and/or make recommendations for changes to your retirement holdings or contributions)

\_\_\_ General information via the plan’s website (e.g., websites that provide general

financial information or advice related to retirement)

\_\_\_ Other, please specify: \_\_\_\_\_\_\_

**EPR7d. Have you made any choices about how the money in this retirement plan is invested?** *For example, choices about investments in stocks or stock mutual funds, bonds or bond funds, or money market accounts.*

1 Yes, I chose how to invest the money
2 No, the investments were selected for me automatically
3 Don't know

*If EPR7d=1, then go to EPR7d2. Otherwise, skip to EPR8*

**EPR7d2. How do you make your choices on how the money is invested?** *Check all that apply*

* I do the research on my own
* I use online tools offered by the plan provider
* My plan offers the services of a financial adviser and I ask them for help
* I use the services of a professional financial adviser who is not associated with the plan.
* I get help from coworkers
* I get help from family and/or friends.
* Other, please specify: \_\_\_\_\_\_

**EPR8**. **Do you currently make contributions to this plan?** *For example, contributions through salary deduction{ or union dues}.*

1 Yes
2 No *SKIP to EPR10*

3 Don't know *SKIP to EPR10*

**EPR8a. Did you choose the amount of money to contribute or was the amount automatically selected for you?**

1. I chose the amount to contribute

 2. The amount was selected for me automatically

 3. Don’t know

**EPR9. What amount do you contribute currently per pay period or per year?**

\_\_\_ %

 $\_\_\_ per year/pay period (fill pay period from **EPR2**)

*If EPR9 response is in % or missing, then ask EPR9a.*

 *Otherwise, SKIP to EPR10*

 **EPR9a. About how much do you contribute per year?**

 **Is it more than X? Yes/No (*unfolding brackets*)**

 **X ϵ**

*Start with 7500 and ask up to 3.*

**EPR10. Does your {employer/union} make contributions to this plan?**

* Yes *SKIP to EPR11*
* No
* Don’t know

 *If EPR10 = (“No” or DK) and EPR8=(”No” or DK) then ask EPR10a:*

 **EPR10a**. **Would your {employer/union} make contributions to this plan if you made contributions?**

* Yes
* No
* Don’t know

 *SKIP to EPR13*

 **EPR11. What amount does your employer/union contribute currently per pay period or per year?**

\_\_\_ %

 $\_\_\_ per year/pay period (fill pay period **EPR 2**)

 ***If EPR11 response is in % or missing, then ask***

 **EPR11a. About how much does your {employer/union} contribute per year?**

 **Is it more than X? Yes/No (*unfolding brackets*)**

 **X ϵ**

*Start with 7500 and ask up to 3.*

**EPR12.** **Does the amount of the {employer/union} contribution depend on the amount that you contribute? That is, does the {employer/union} make “matching contributions”?**

* Yes
* No
* Don’t know

**EPR13. Are you allowed to borrow against your holdings in this plan?**

* Yes
* No *SKIP to EPR16*
* Don’t know *SKIP to EPR16*

**EPR14. Do you currently have a loan against the plan?**

1. Yes *SKIP to EPR15*

2. No

**EPR14a. Have you ever taken out a loan against your holdings in this plan?**

* Yes
* No *SKIP to EPR16*

**EPR15. For what purpose(s) did you borrow this money?** *Check all that apply.*

* Pay medical expenses
* Pay credit card bill(s)
* Pay other regular household expenses (e.g., rent, utility bills)
* Cover the down payment on your principal residence
* Avoid eviction or foreclosure on your principal residence.
* Pay college tuition
* Pay other educational expenses
* Cover funeral expenses for a family member
* Other, please specify: \_\_\_\_\_

**EPR16. Have you ever taken any withdrawals from this account?**

1. Yes

2. No *SKIP to EPR16k*

3. Don’t know *SKIP to EPR16k*

 **EPR16a. For what purpose(s) did you withdraw this money?** *Check all that apply.*

* Pay medical expenses
* Pay credit card bill(s)
* Pay other regular household expenses (e.g., rent, utility bills)
* Cover the down payment on your principal residence
* Avoid eviction or foreclosure on your principal residence.
* Pay college tuition
* Pay other educational expenses
* Cover funeral expenses for a family member
* Regular distribution after age 59½ *(only list if age 59+)*
* Other, please specify: \_\_\_\_\_

**EPR16b . Did you pay a 10 percent tax penalty on the withdrawal, in addition to regular income taxes?**

* Yes
* No, because I was over age 59½ when I took the withdrawal  *(only list if age 59+)*
* No, please specify {other} reason why not: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**EPR16k:**

*If EPR6M=”More than one plan,” then go to EPR16l*

*Otherwise, skip to EPR17a*

**EPR16l. Now we have some questions about your other retirement plan(s) at this job. Is (one of) your other retirement plan(s) of the Defined Contribution type, where money accumulates in a retirement account for you?**

*•* Yes

• No

• Don’t know

**EPR16m. The following questions concern the {***if EPR16l=Yes*|**Defined Contribution type of} plan at this job that is the most important to you, other than the plan at this job you just told us about.**

**EPR16n:** *Begin sequence of questions identical to EPR7aCHECKPOINT – EPR16c, except sequence should end by branching to EPR17 rather than EPR16k*

**(6) Your Other Employer-Provided Retirement Plans**

**EPR17. {We would like to ask some questions about pension or retirement plans you may currently have. / We would like to ask just a few more questions about other pension or retirement plans you may currently have, other than any plan at the job you just told us about.}**

**EPR17a.**

**Do you have any {other} pension, retirement or retirement savings plans from any current or previous business, employer or union?** *Please include only plans provided by a business, employer or union. {Do not include any plan at the job you just told us about.}*

* Yes
* No
* Don’t know

*If EPR17a=”Yes,” then go to EPR17b*

*Elseif* *if living with a spouse/partner, then Skip to Section (7).*

*Otherwise, skip to Section (10).*

**EPR17b.How many {other }plans do you have?**

1. More than one {other} plan. *Skip to EPR17d*

2. Just one {other} plan.

**EPR17c.**

**In some retirement plans, known as “Defined Benefit” plans, retirement benefits are usually paid based on a formula involving age, years of service and salary.**

**In other retirement plans, known as “Defined Contribution” plans, money is accumulated in a retirement account for you.**

**Is your {other} retirement plan of the “Defined Benefit” type or of the “Defined Contribution” type?**

1. Defined Benefit – benefits paid out based on a formula

2. Defined Contribution - money accumulates in a retirement account for me

3. Both types

8. Don’t know

***Skip to EPR17e.***

**EPR17d.**

**In some retirement plans, known as “Defined Benefit” plans, retirement benefits are usually paid based on a formula involving age, years of service and salary.**

**In other retirement plans, known as “Defined Contribution” plans, money is accumulated in a retirement account for you.**

**Are any of your {other} retirement plans of the “Defined Contribution” type?**

* Yes
* No
* Don’t know

***Go to Section (7) if living with a spouse/partner. Otherwise, skip to Section (10)***

**(7) Your Spouse/Partner’s Employment**

**EPSPD2. Which one of the following BEST describes your {spouse’s/partner’s} current employment situation?**

1. Working now
2. Temporarily laid off and awaiting recall
3. On sick or other leave
4. Not employed, but looking for a job
5. Not employed and not looking for a job
6. Homemaker
7. Student
8. Disabled and not working
9. Retired

***If (EPSPD2=1,2, or 3) then ask EPSPD3***

**EPSPD3. Thinking of {(his/her) current, main job / the job from which (he/she) (has been temporarily laid off/ is on leave)}, does your {spouse/partner}:**

1. Work full-time for someone else
2. Work part-time for someone else
3. Work for {himself/herself} (self-employed)
4. Work as a partner in a partnership (e.g. partner in law firm, medical practice)
5. Work as a consultant/contractor

***If EPSPD2=7 “Student” then ask EPSPD4A***

**EPSP4A. Besides being a student, does {he/she} also have a paid job?** *Check all that apply*

1. Yes, works full-time for someone else

2. Yes, works part-time for someone else

3. Yes, works for himself/herself (self-employed)

4. Yes, does some other type of work for pay

5. No

***If EPSPD2=9 “Retired” then ask EPSPD4B***

**EPSPD4B. Besides being retired, does {he/she} also have a paid job?** *Check all that apply*

1. Yes, works full-time for someone else

2. Yes, works part-time for someone else

3. Yes, works for {himself/herself} (self-employed)

4. Yes, does some other type of work for pay

5. No

***If (EPSPD2=1,2, or 3) then ask EPSPD4C***

**EPSPD4C. In addition to {(his/her) current, main job / the job from which (he/she) (has been temporarily laid off/ is on leave)}, does {he/she} have any of the following types of additional paid jobs?** *Check all that apply*

a. {He/She} has *another* full-time job

b. {He/She} has *another* part-time job

c. {He/She} does other work for pay that is not through a formal job. This may include activities like selling items you make at flea markets or online; freelance work through companies like Uber, Care.com, or Airbnb; or providing services for others like paid child care or yard work.

***If (EPSPD2=4, 5, or 6), then ask EPSPD4D***

**EPSPD4D. Does {he/she} do any work for pay, even if not through a formal job?** This may include activities like selling items you make at flea markets or online; freelance work through companies like Uber, Care.com, or Airbnb; or providing services for others like paid child care or yard work.

1. Yes

2. No

***If (EPSPD3 = 1, 2, or 5) or (EPSPD4A = 1 or 2) or (EPSPD4B = 1 or 2)***

**EPSPD4E. If your {spouse/partner} were paid the same hourly rate that {he/she} makes at {his/her} main job regardless of the number of hours {he/she} works, do you think {he/she} would you prefer to:**

1. Work the same number of hours that {he/she} usually works

2. Work more hours for more money

3. Work fewer hours for less money

*If (EPSPD3 = 1 or 2) or (EPSPD4A = 1 or 2) or (EPSPD4B = 1 or 2) “Work for someone else” then continue. Otherwise, skip to EPSP17*

**EPSP2. Next are some questions about {(his/her) current, main job / the job from which (he/she) (has been temporarily laid off/ is on leave)/ (his/her) main (full-time/part-time) job.} On this job, how frequently is your {spouse/partner} paid? That is, what is {his/her} “pay period”?**

• Daily

• Weekly

• Every two weeks

• Monthly

• Other, please specify: \_\_\_\_\_\_\_

**EPSP2a.**  **On this job, is your {spouse/partner} a member of a labor union or of an employee association similar to a union?**

* Yes
* No
* Don’t know

**EPSP2b. On this job, is your {spouse/partner} covered by a union or employee association contract?**

* Yes
* No
* Don’t know

**EPSP3. Is {he/she} employed by the government at the federal, state, or local level?** *This includes teachers and other service workers who are on the payrolls of local government, school district, and other agencies of state and local government***.**

* Yes, federal government S*kip to EPSP6.*
* Yes, state government S*kip to EPSP6.*
* Yes, local government (e.g., county, city, township) S*kip to EPSP6.*
* No

**EPSP4. Will you please tell us the name of your {spouse’s/partner’s} employer on this job?**

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

**EPSP5. To be certain that we can correctly identify {his/her} employer, please tell us the Federal Employer Identification Number or “EIN” for {fill}. This number may be found, for example, on the Form W-2 your spouse/partner received from his/her employer in order to file your taxes. This number is reported in box b of his/her W-2, under the heading “Employer I.D. number.”**

**What is the Employer I.D. number?**

# \_\_\_\_\_

(Note: If you have a Form W-2 from this employer, please enter the Federal I.D. number from box b, not the state I.D. number shown elsewhere on his/her W-2).

**(8) Your Spouse’s/Partner’s Current Employer-Provided Retirement Plan**

**EPSP6.**  **Now we'd like to ask some questions about retirement plans at your {spouse’s/partner’s} job, provided by {his/her} employer{ or union}. This includes traditional pension plans, 401(k) plans, SEP and SIMPLE IRAs, savings-and-thrift plans, deferred profit-sharing plans, and other types like stock ownership plans.**

**Does your {spouse/partner} have a retirement plan at {(his/her) current, main job / the job from which (he/she) (has been temporarily laid off/ is on leave)/ (his/her) main (full-time/part-time) job.}?**

* Yes *SKIP TO EPSP6M*
* No
* Don't know

 **EPSP6a. Does {his/her} employer {or union} offer a retirement plan?**

* Yes *SKIP to EPSP6b unless EPSP2a=”Yes” or EPSP2b=”Yes”*
* No *SKIP to EPSP17a*
* Don’t know *SKIP to EPSP17a*

 **EPSP6a1. Which one offers such a plan—{his/her} employer, {his/her} labor union, or both?**

* {His/her} employer
* {His/her} labor union
* Both

 **EPSP6b. Is {he/she} eligible to be included in any of these retirement plans?**

* Yes
* No *SKIP to EPSP6f*
* Don’t know *SKIP to EPSP6f*

**EPSP6c. Does your {spouse’s/partner’s} {employer/union/employer or union} plan automatically enroll workers like him/her?**

* Yes, {he/she} would have been automatically enrolled in the {employer’s/union’s/employer’s or union’s} plan, but {he/she} opted out of participating in it
* No, {he/she} was not automatically enrolled in any plan
* Don’t know

**EPSP6d. Does {his/her} {employer/union/employer or union} make contributions to any retirement plan for which {he/she} is eligible?**

* Yes
* No
* Don’t know

 **EPSP6e. Does your {spouse/partner} intend to participate in a retirement plan provided by his/her current {employer/union/employer or union} sometime in the future?**

* Yes
* No
* Don’t know

 *SKIP to EPSP17a*

  **EPSP6f. Will your {spouse/partner} be eligible if {he/she} continues to work for this {employer/union/employer or union}?**

* Yes
* No *SKIP to EPSP17a*
* Don’t know *SKIP to EPSP17a*

 **EPSP6g. How many more years will your {spouse/partner} have to work for this {employer/union/employer or union} before {he/she} will be eligible? \_\_\_ #years**

 *SKIP to EPSP17a*

**EPSP6M. Does {he/she} participate in one retirement plan at this job or more than one plan?**

* One plan
* More than one plan
* Don’t know

**EPSP7. In some retirement plans, known as “Defined Benefit” plans, retirement benefits are usually paid based on a formula involving age, years of service and salary.**

**In other retirement plans, known as “Defined Contribution” plans, money is accumulated in a retirement account for you.**

**{Is/Are} your {spouse’s/partner’s} retirement plan{s} of the “Defined Benefit” type or of the “Defined Contribution” type?**

1. Defined Benefit – benefits paid out based on a formula

2. Defined Contribution - money accumulates in a retirement account for {him/her}

3. Both types

8. Don’t know

*If EPSP6M=”More than one plan,” then go to EPSP7A1*

*Otherwise, skip to EPSP7aCHECKPOINT*

**EPSP7A1. Now we have some questions about the {***if EPSP7=3*|**Defined Contribution type of} plan that is most important to {him/her}.**

**EPSP7aCHECKPOINT***: If EPSP2a=”Yes” and/or EPSP2b=”Yes” then go to EPSP7a.*

*Otherwise, skip to EPSP7b.*

**EPSP7a. Is this retirement plan provided by your {spouse’s/partner} employer, by {his/her} labor union, or both?**

* {His/Her} employer
* {His/Her} labor union
* Both
* Don’t know

**EPSP7b. Was your {spouse/partner} automatically enrolled in the plan by {his/her} {employer/union/employer or union} or did {he/she} have to actively choose to enroll?**

* {He/She} was automatically enrolled by {his/her} {employer/union/employer or union}
* {He/She} actively chose to enroll
* Don’t know

**EPSP7c. Does your {spouse/partner} have any choice over how the money in this retirement plan is invested?**

*For example, choices about investments in stocks or stock mutual funds, bonds or bond funds, or money market accounts.*

1 Yes
2 No
3 Don't know

*If EPSP7c=1, then go to EPSP7c2. Otherwise, skip to EPSP8*

**EPSP7c2. Does the plan offer {him/her} an option to receive financial advice on which investment options {he/she} should choose?**

* Yes
* No *Skip to EPSP7d*
* Don’t know *Skip to EPSP7d*

**EPSP7c3. What types of advice does {his/her} plan offer?** *Check all that apply*

\_\_\_ One-on-one meeting(s) or communications with professional financial services providers (e.g., in person, by phone, by email)

\_\_\_ Seminar or group meeting(s) with professional financial services providers (e.g., in person, video presentation, webinar)

\_\_\_ Personalized information via the plan’s website (e.g., online chat with financial service representative, or financial calculators that analyze your retirement savings or investment accounts and/or make recommendations for changes to your retirement holdings or contributions)

\_\_\_ General information via the plan’s website (e.g., websites that provide general financial information or advice related to retirement)

\_\_\_ Other, please specify: \_\_\_\_\_\_\_

**EPSP7d. Has your {spouse/partner} made any choices about how the money in this retirement plan is invested?** *For example, choices about investments in stocks or stock mutual funds, bonds or bond funds, or money market accounts.*

1 Yes, {he/she} chose how to invest the money
2 No, the investments were selected for {him/her} automatically
3 Don't know

*If EPSP7d=1, then go to EPSP7d2. Otherwise, skip to EPSP8*

**EPR7d2. How does {he/she} make {his/her} choices on how the money is invested?** *Check all that apply*

* {He/She} does the research on {his/her} own
* {He/She} uses online tools offered by the plan provider
* {His/Her} plan offers the services of a financial adviser and {he/she} asks them for help
* {He/She} uses the services of a professional financial adviser who is not associated with the plan.
* {He/She} gets help from coworkers
* {He/She} gets help from family and/or friends.
* Other, please specify: \_\_\_\_\_\_

**EPSP8.** **Does your {spouse/partner} currently make contributions to this plan?** *For example, contributions through salary deduction{ or union dues}.*

1 Yes
2 No *SKIP to EPSP10*

3 Don't know *SKIP to EPSP10*

 **EPSP8a. Did {he/she} choose the amount of money to contribute or was the amount automatically selected for {him/her}?**

1. {He/She} chose the amount to contribute

 2. The amount was selected for him/her automatically

 3. Don’t know

**EPSP9. What amount does {he/she} contribute currently per pay period or per year?**

\_\_\_ %

 $\_\_\_ per year/pay period (fill pay period **EPSP2**)

 ***If EPSP9 response is in % or missing, then ask***

 **EPSP9a. About how much does your {spouse/partner} contribute per year?\_\_\_\_\_\_**

 **Is it more than X? Yes/No (*unfolding brackets*)**

 **X ϵ**

*Start with 7500 and ask up to 3.*

 **EPSP10. Does {his/her} {employer/union/employer or union} make contributions to this plan?**

* Yes *SKIP to EPSP11*
* No
* Don’t know

 *If EPSP10 = (“No” or DK) and EPSP8=(”No” or DK) then ask:*

**EPSP10a.** **Would {his/her} {employer/union/employer or union} make contributions to this plan if {he/she} made contributions?**

 **Yes**

 **No**

 **Don’t know**

 *SKIP to EPSP13*

**EPSP11. What amount does {his/her} {employer/union/employer or union} contribute currently per pay period or per year?**

\_\_\_ %

 $\_\_\_ per year/pay period (fill pay period EPSP2)

 *If EPSP11 response is in % or missing, then ask EPSP11a*

**EPSP11a. About how much does your {spouse’s/partner’s} {employer/union/employer or union} contribute per year?**

 **Is it more than X? Yes/No (*unfolding brackets*)**

 **X ϵ**

*Start with 7500 and ask up to 3.*

**EPSP12.** **Does the amount of the {employer/union/employer or union} contribution depend on the amount that your {spouse/partner} contributes? That is, does the {employer/union/employer or union} make “matching contributions”?**

* Yes
* No
* Don’t know

**EPSP13. Is your {spouse/partner} allowed to borrow against {his/her} holdings in this plan?**

* Yes
* No *SKIP to EPSP16*
* Don’t know *SKIP to EPSP16*

**EPSP14. Does your {spouse/partner} currently have a loan against the plan?**

1. Yes *SKIP to EPSP15*

2. No

**EPSP14a. Has your {spouse/partner} ever taken out a loan against {his/her} holdings in this plan?**

* Yes
* No *SKIP to EPSP16*
* Don’t know *SKIP to EPSP16*

**EPSP15. For what purpose(s) did {he/she} borrow this money?** *Check all that apply.*

* Pay medical expenses
* Pay credit card bill(s)
* Pay other regular household expenses (e.g., rent, utility bills)
* Cover the down payment on {his/her} principal residence
* Avoid eviction or foreclosure on {his/her} principal residence
* Pay college tuition
* Pay other educational expenses
* Cover funeral expenses for a family member
* Other, please specify: \_\_\_\_\_
* Don’t know

**EPSP16. Has your {spouse/partner} ever taken any withdrawals from this account?**

1. Yes

2. No *SKIP to EPSP16k*

3. Don’t know *SKIP to EPSP16k*

 **EPSP16a. For what purpose(s) did {he/she} withdraw this money?** *Check all that apply.*

* Pay medical expenses
* Pay credit card bill(s)
* Pay other regular household expenses (e.g., rent, utility bills)
* Cover the down payment on {his/her} principal residence
* Avoid eviction or foreclosure on {his/her} principal residence.
* Pay college tuition
* Pay other educational expenses
* Cover funeral expenses for a family member
* Received regular distribution after age 59½ *(only list if age 59+)*
* Other, please specify \_\_\_\_\_
* Don’t know

**EPSP16b.**  **Did {he/she} pay a 10 percent tax penalty on the withdrawal, in addition to regular income taxes?**

* Yes
* No, because {he/she} was over age 59½ when {he/she} took the withdrawal *(if 59+)*
* No, please specify {other} reason why not: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know

**EPSP16k:**

*If EPSP6M=”More than one plan” then go to EPSP16l*

*Otherwise, skip to EPSP17a*

**EPSP16l. Now we have some questions about your {spouse’s/partner’s} other retirement plan(s) on this job. Is (one of) {his/her} other retirement plan(s) of the Defined Contribution type, where money accumulates in a retirement account for {him/her}?**

*•* Yes

• No

• Don’t know

**EPSP16m. The following questions concern the {***if EPSP16l=Yes*|**Defined Contribution type of} plan at this job that is the next most important to {him/her}, other than the plan at this job you just told us about.**

**EPSP16n:** *Begin sequence of questions identical to EPSP7aCHECKPOINT – EPSP16c, except sequence should end by branching to EPSP17 rather than EPSP16k.*

**(9) Your Spouse’s/Partner’s Other Employer-Provided Retirement Plans**

**EPSP17*. {*We would like to ask some questions about pension or retirement plans your (spouse/partner) may currently have. / We would like to ask just a few more questions about other pension or retirement plans your (spouse/partner) may currently have, other than any plan at the job you just told us about.}**

**EPSP17a.**

**Does your {spouse/partner} have any {other} pension, retirement or retirement savings plans from any current or previous business, employer or union?** *Please include only plans provided by a business, employer or union. {Do not include any plan at the job you just told us about.}*

* Yes
* No *Skip to Section 10*
* Don’t know*SKIP to Section 10*

**EPSP17b.How many other plans does your {spouse/partner} have??**

* More than one {other} plan. *Skip to EPSP17d*.
* Just one {other} plan.

**EPSP17c.**

**In some retirement plans, known as “Defined Benefit” plans, retirement benefits are usually paid based on a formula involving age, years of service and salary.**

**In other retirement plans, known as “Defined Contribution” plans, money is accumulated in a retirement account for you.**

**Is your {spouse’s/partner’s} {other} retirement plan of the “Defined Benefit” type or of the “Defined Contribution” type?**

1. Defined Benefit – benefits paid out based on a formula

2. Defined Contribution - money accumulates in a retirement account for {him/her}

3. Both types

8. Don’t know

*Skip to Section 10*

**EPSP17d.**

**In some retirement plans, known as “Defined Benefit” plans, retirement benefits are usually paid based on a formula involving age, years of service and salary.**

**In other retirement plans, known as “Defined Contribution” plans, money is accumulated in a retirement account for you.**

**Are any of your {spouse’s/partner’s} {other} retirement plans of the “Defined Contribution” type?**

* Yes
* No
* Don’t know

**(10) Financial Planning**

*This section includes text fills based on whether respondent and/or spouse/partner is retired (EPRD2=9 and/or EPSPD2=9)*

**RP1. Did you {and your (spouse/partner)} ever try to figure out how much money you would need to have saved by the time you retire so that you could live comfortably in retirement?**

* + Yes
	+ No *SKIP to RP3*

**RP2. Tell us about the ways you tried to figure out how much your household would need.**

*(display as table with Yes/No buttons)*

* + **Did you talk to family and relatives?**
	+ **Did you talk to co-workers or friends?**
	+ **Attend a retirement seminar?**
	+ **Did you use calculators or worksheets that are computer or Internet-based?**
	+ **Did you consult a financial planner or adviser or an accountant?**

**RP3. Did you develop a plan for how to save for retirement?**

* Yes
* No *SKIP to RP7*

**RP4. Tell us how you developed this plan.**

*(display as table with Yes/No buttons)*

* + **Did you talk to family and relatives?**
	+ **Did you talk to co-workers or friends?**
	+ **Attend a retirement seminar?**
	+ **Gather information from the Internet?**
	+ **Gather information from books and/or television programs?**
	+ **Did you consult a financial planner or adviser or an accountant?**

 **RP5. About how long ago did you develop this plan?**

* In the past year
* About 1-2 years ago
* About 3-5 years ago
* More than 5 years ago

 **RP6. Have you revised the plan in any meaningful way in the past year**?

* Yes
* No

**RP6a What {keeps/kept} you from saving more for retirement?** *Check all that apply*

* {Not / Was not} willing to sacrifice things that add to quality of life
* Need/Needed money to pay basic monthly bills
* Saving for a child’s education
* Paying off student loans
* {I/We} {don’t/didn’t} know what type of retirement account to open
* {I/We} {don’t/didn’t} know how to open a retirement account
* {I/We} {wouldn’t/didn’t} know how to invest the funds
* Other, please specify: \_\_\_\_\_\_

**OR**

* {I/We} {(am/are) saving / saved} enough for retirement

**RP7. Have you {and your (spouse/partner)} tried to figure out how to plan to pay for very expensive medical care or procedures and/or the costs of long-term care for you or a family member if it were to be necessary in the years ahead?**

*For purposes of this survey, when we use the term 'long-term care' we are referring to a range of services and supports one may require to meet personal care needs—such as bathing, dressing, using the toilet, and/or eating—after a significant deterioration in mental and/or physical health. Most long-term care is not medical care.*

* Yes
* No *SKIP to RP9*

**RP8. Tell us about the ways you tried to figure out how to plan to pay for such costs.**

*(display as table with Yes/No buttons)*

* + **Did you talk to family and relatives?**
	+ **Did you talk to co-workers or friends?**
	+ **Attend a retirement seminar?**
	+ **Gather information from the Internet?**
	+ **Gather information from books and/or television programs?**
	+ **Did you consult a financial planner or adviser or an accountant?**
	+ **Did you consult with an insurance agent or insurance broker?**

**RP9. Have you taken any steps to "protect" some of your assets, perhaps via transfers to family, friends, and/or an irrevocable trust, so that these assets would not be counted in determining your eligibility for Medicaid benefits to pay for the cost of long-term care?**

* Yes
* No

**(11) Income and IRAs**

**I1. Which category represents the total combined income of all members of your family (living here) during the year 2016? This includes money from jobs, net income from business, farm or rent, pensions, dividends, interest, Social Security payments and any other money income received by members of your family who are 15 years of age or older.**

1 Less than $5,000

2 $5,000 to $7,499

3 $7,500 to $9,999

4 $10,000 to $12,499

5 $12,500 to $14,999

6 $15,000 to $19,999

7 $20,000 to $24,999

8 $25,000 to $29,999

9 $30,000 to $34,999

10 $35,000 to $39,999

11 $40,000 to $49,999

12 $50,000 to $59,999

13 $60,000 to $74,999

14 $75,000 or more

*IF FAMILY INCOME = $75,000 or more THEN*

**I2. You told us that the total combined income of all members of your family (living here) during**

**the year 2016 was more than $75,000. Thinking about the total combined income of your family from all sources, approximately how much did members of your family receive during the year 2016?**

 1 $75,000-$99,999

 2 $100,000-$124,999

 3 $125,000-$199,999

 4 $200,000 or more

**I3. Now please think about how much money you personally earned in 2016. What was the total of your wages, salary, commissions, bonuses, and tips from all jobs?** *Please report the total amount before**deductions for taxes, bonds, dues, or other items*

**If no response to I3, then ask:**

**I3a. Did you earn more than $X?**

*With up to 3 values of* ***X*** *selected based on employment status of R (and of spouse/partner) and family income.*

*If living with a spouse/partner, then continue to I4.*

*Otherwise, SKIP to DR1*

**I4. Now please think about how much money your {spouse/partner} earned in 2016. What was the total of {his/her} wages, salary, commissions, bonuses, and tips from all jobs?** *Please report amount before**deductions for taxes, bonds, dues, or other items*

**If no response to I4, then ask:**

**I4a. Did {he/she} earn more than $X?**

*With up to 3 values of* ***X*** *selected based on employment status of R (and of spouse/partner) and family income.*

**DR1. We now have some more questions about money or assets you may have in dedicated retirement accounts. We previously asked about retirement plans you may have through a business, employer, or union. We begin with a question about a different type of retirement plan.**

**Here we would like to ask just about IRAs that you personally have. These may include accounts that you 'rolled over' into an IRA after leaving a previous job, as well as Roth IRAs or any other type of IRA account that is not part of a retirement plan on a current or past job. It would also include a Payroll Deduction IRA where you established an IRA with a financial institution, and then you authorized your employer to take money out of your paycheck and deposit it into your IRA account.**

**Do you have any IRAs?**

* Yes
* No *SKIP to DR2 if living with spouse/partner, else SKIP to DR3*

**DR1a. Did you make any contributions to an IRA account in the 2016 tax year? That is, did you put any money into an IRA account that year?** *Please do not count money rolled over into an IRA in 2016 from another retirement account.*

* Yes
* No *SKIP to DR1b1*
* Don’t know *SKIP to DR1b1*

**DR1b. How much did you contribute in the 2016 tax year?**

* $\_\_\_

**DR1b1. Have you made any contributions to an IRA account for the current tax year (2017)?**

* Yes
* No
* Don’t know

**DR1b2.**  *If DR1a=”Yes” and/or DR1b1=”Yes” then go to DR1c*

*Otherwise, SKIP to DR2 if living with spouse/partner, or else SKIP to DR3*

**DR1c. Were any of these {2016/2017/2016 or 2017} contributions made by payroll deduction on your job? That is, was money deducted from your paycheck and deposited into your IRA account?**

* Yes  *Go to DR1d if EPR6=”Yes” or EPR17a=”Yes”. Otherwise SKIP to DR2 if living with*

 *spouse/partner, else SKIP to DR3*

* No *SKIP to DR2 if living with spouse/partner, else SKIP to DR3*
* Don’t know *SKIP to DR2 if living with spouse/partner, else SKIP to DR3*

**DR1d. Did you already tell us about this IRA when we asked your earlier about retirement plans provided by a business, employer, or union?**

* Yes
* No

*Continue to DR2 if living with spouse/partner, else SKIP to DR3*

**DR2.** **Does your {spouse/partner} have any IRAs?**

* Yes
* No *Go to DR3*
* Don’t know *Go to DR3*

**DR2a. Did {he/she} make any contributions to an IRA account in the 2016 tax year? That is, did your {spouse/partner} put any money into an IRA account that year?** *Please do not count money rolled over into an IRA in 2016 from another retirement account.*

* Yes
* No *SKIP to DR2b1*
* Don’t know *SKIP to DR2b1*

**DR2b. How much did {he/she} contribute in the 2016 tax year?**

* $\_\_\_

**DR2b1. Has {he/she} made any contributions to an IRA account for the current tax year (2017)?**

* Yes
* No
* Don’t know

**DR2b2.**  *If DR2a=”Yes” and/or DR2b1=”Yes” then go to DR2c*

*Otherwise, else SKIP to DR3*

**DR2c. Were any of these {2016/2017/2016 or 2017} contributions made by payroll deduction on {his/her} job? That is, was money deducted from {his/her} paycheck and deposited into {his/her} IRA account?**

* Yes  *Go to DR2d if EPSP6=”Yes” or EPSP17a=”Yes”. Otherwise, SKIP to DR3*
* No *SKIP to DR3*
* Don’t know *SKIP to DR3*

**DR2d. Did you already tell us about this IRA when we asked you earlier about {his/her} retirement plans provided by a business, employer, or union?**

* Yes
* No

**(12) Dedicated Retirement Accounts**

**DR3. Now please think about all of the money or assets that you personally have in any type of dedicated retirement account—that is, 401(k) plans, IRAs, Keogh accounts, and the like.**

**At the present time, about how much money TOTAL do you personally have in all of your dedicated retirement accounts?** *Please do not include any money that is in your {spouse’s/partner’s} accounts.*

$\_\_\_\_\_\_\_

*If no valid response, then continue to DR3a (elicit categorical response with unfolding brackets)*

*Otherwise, if $0 and living with spouse/partner, then SKIP to DR6*

*Otherwise, if $0, then SKIP to Section 13*

*Else, SKIP to DR4*

**DR3a. Is it more than** {$10,000; $25,000; $50,000; $100,000; $250,000}?

* *Unfolding brackets. Up to 3 questions, starting with $50,000.*

**DR4.** **Is any of the money in these accounts invested in stocks, either directly in stocks or in investment funds that hold stocks?** *Please include any type of investment fund based on stocks, such as stock mutual funds, stock Index Funds, or stock ETFs.*

1. Yes

2. No *SKIP to DR6 if living with spouse/partner, else SKIP to Section 13*

**DR5**. **About what percent is invested in stocks or stock investment funds?** Range: 0..100

* *IF no valid response, then elicit categorical response with unfolding brackets*

**DR5a. Is it more than {20%, 33%, 50%, 66%, 80%}?**

 Up to 3 values, starting with 50%.

*CONTINUE to DR6 if living with spouse/partner, else SKIP to Section 13*

**DR6. Now please think about all of the money or assets that your {spouse/partner} has in any type of dedicated retirement account—that is, 401(k) plans, IRAs, Keogh accounts, and the like.**

**At the present time, about how much money TOTAL does your {spouse/partner} have in all of {his/her} dedicated retirement accounts?** *Please do not include any money that is in your personal accounts.*

$\_\_\_\_\_\_\_

*If no valid response, then continue to DR6a (elicit categorical response with unfolding brackets)*

*Otherwise, if $0 then SKIP to Section (13)*

**DR6a. Is it more than {$10,000; $25,000; $50,000; $100,000; $250,000}?**

**DR7**. **Is any of the money in these accounts invested in stocks, either directly in stocks or in investment funds that hold stocks**? *Please include any type of investment fund based on stocks, such as stock mutual funds, stock Index Funds, or stock ETFs.*

1. Yes

2. No  *SKIP to Section 14*

3. Don’t know *SKIP to Section 14*

**DR8**. **About what percent is invested in stocks or stock investment funds?** Range: 0..100

* *IF no valid response, then elicit categorical response with unfolding brackets*

**DR8a. Is it more than {20%, 33%, 50%, 66%, 80%}?**

**(13) All Other Accounts**

**NDR1. Now please think about all of the other money or assets that you {and your (spouse/partner)} have in all other types of accounts—such as checking or savings accounts, regular investment accounts or brokerage accounts—and other holdings of cash, stocks, savings bonds, treasury bills, mutual funds, money market funds, certificates of deposit (CDs), and the like. {***Some of these may be individual accounts, belonging to either you or your (spouse/partner), and others may be joint accounts*.**}**

**If you added up the total dollar amount of these accounts and holdings, about how much would they amount to right now?**

**Do not include the value of housing or other real estate.**

**Do not include the money or assets you {and your (spouse/partner)} have in dedicated retirement accounts such as 401(k) plans or IRAs that you have just told us about.**

*If $0, SKIP to Section 14)*

*Elseif, no valid response, then continue to NDR1a (elicit categorical response with unfolding brackets)*

*Otherwise, SKIP to NDR2*

**NDR1a. Is it more than {$10,000; $25,000; $50,000; $100,000; $250,000}?**

**NDR2**. **Is any of the money in these accounts invested in stocks, either directly in stocks or in investment funds that hold stocks?** *Please include any type of investment fund based on stocks, such as stock mutual funds, stock Index Funds, or stock ETFs.*

**1. Yes**

**2. No *SKIP to Section 14***

**NDR3**. **About what percent is invested in stocks or stock investment funds?** Range: 0..100

* *IF no valid response, then elicit categorical response with unfolding brackets*

**NDR3a. Is it more than {20%, 33%, 50%, 66%, 80%}?**

**(14) Expectations**

**RRA0. Next we would like to ask your opinion about how likely you think various events might be in terms of percent chance. These questions ask for you to give a number from 0 to 100, where "0" means that you think there is absolutely no chance, and "100" means that you think the event is absolutely sure to happen.**

**For example, no one can ever be sure about tomorrow's weather, but if you think that rain is very unlikely tomorrow, you might say that there is a 10 percent chance of rain. If you think there is a very good chance that it will rain tomorrow, you might say that there is an 80 percent chance of rain.**

*if Respondent age>=75, then skip to LTCX1.*

*Note: reference age in this section depends on current age*

 *either age <65 / 65<=age<70 / 70<=age<75*

*In next 3 questions, values of X, Y, & Z determined by response to DR3/DR3a*

**RRA1. Now please think again about all of the money or assets that you personally have in any type of dedicated retirement account—that is, 401(k) plans, IRAs, Keogh accounts, and the like.**

**Think about how much money you will have in your own, personal dedicated retirement accounts when you turn 65/70/75.**

**What do you think is the percent chance (what are the chances out of 100) that you will have more than $X in your dedicated retirement accounts when you turn {65/70/75}?**

**RRA2. What do you think is the percent chance that you will have more than $Y in your dedicated retirement accounts when you turn {65/70/75}?**

**RRA3. What do you think is the percent chance that you will have more than $Z in your dedicated retirement accounts when you turn {65/70/75}?**

*If Respondent (“R”) age>69 then SKIP to LTCX1*

*If Respondent age is <60, GO to RE1.*

*If Respondent age is 60-64, SKIP to RE2.*

*If Respondent age is 65-69 SKIP to RE3.*

**RE1.**

*IF R WORKING NOW and R IS <60:*

**RE1a. Thinking now about work in general and not just your present job, what do you think the chances are that you will be working full-time after you reach age 60?** *SKIP to RE1c*

*OTHERWISE IF R <60 :*

**RE1b. Thinking now about work, what do you think the chances are that you will be working full-time after you reach age 60?**

**RE1c. And what about the chances that you will be working full-time after you reach age 65?**

***SKIP to RE2c.***

**RE2**.

*IF R WORKING NOW and R IS 60-64*

**RE2a. Thinking now about work in general and not just your present job, what do you think the chances are that you will be working full-time after you reach age 65?** *SKIP TO RE2c*

*OTHERWISE IF R is 60-64:*

**RE2b. Thinking now about work, what do you think the chances are that you will be working full-time after you reach age 65?**

**RE2c. And what about the chances that you will be working full-time after you reach age 70?**

***SKIP to LTCX1***

**RE3**.

*IF R WORKING NOW and R IS 65-69:*

**RE3a. Thinking about work in general and not just your present job, what do you think the chances are that you will be working full-time after you reach age 70?**

*OTHERWISE IF R is 65-69:*

**RE3b. Thinking now about work, what do you think the chances are that you will be working full-time after you reach age 70?**

**LTCX1. What do you think is the percent chance that you will live for at least 10 more years?**

*if LTCX1=0, then SKIP to LTCX7*

*Otherwise, if Respondent age is >=75, then SKIP to LTCX3*

**LTCX2. What is the percent chance that you will live for at least 20 more years?**

*If Respondent age is <65, then SKIP to Section 15.*

**LTCX3. Assuming that you live for 10 more years, what do you think is the percent chance that your mental and physical health will allow you to be living independently at that time, that is, to live at home without help and to manage your own affairs?**

**LTCX4. Assuming again that you live for 10 more years, suppose that your mental and physical health allow you to be living independently at that time. What do you think is the percent chance that you would own a long-term care insurance policy at that point in time?**

*For purposes of this survey, when we use the term 'long-term care' we are referring to a range of services and supports one may require to meet personal care needs—such as bathing, dressing, using the toilet, and/or eating—after a significant deterioration in mental and/or physical health. Most long-term care is not medical care.*

**LTCX5. And what do you think the chances are that prior to that time you would have taken steps to "protect" some of your assets, perhaps via transfers to family, friends, and/or an irrevocable trust, so that these assets would not be counted in determining your eligibility for Medicaid benefits to pay for the cost of long-term care?**

**LTCX6. Please assume again that you live 10 more years and are able to live independently until then. However, suppose you have had significant deterioration in your mental and/or physical health such that you would require long-term care for at least one year from that point in time.**

**How would you most likely pay for the biggest part of the costs of the long-term care?**

*Choose only one.*

* Long-term care insurance policy that you will have purchased
* Medicaid benefits
* Your own money—such as from savings, investments, and/or a deferred annuity
* Money from other members of your family
* Other, please specify: \_\_\_\_\_\_\_

**or**

* I have no idea

**LTCX7. Now please think about a typical person of your age and sex who lives for 10 more years. What do you think the chances are that {his/her} mental and physical health will allow {him/her} to be living independently at that time, that is, to live at home without help and to manage {his/her} own affairs?**

**LTCX8. Think now about a typical person of your age and sex who lives for 10 more years and is able to live independently until that time. However, suppose this person has had significant deterioration in mental and/or physical health such that {he/she} requires long term care for the remainder of {his/her} lifetime. What do you think is the percent chance that this person would live at least another 5 years with long-term care?**

**LTCX9. And what do you think the chances are that this person would live at least another 10 years with long-term care?**

**(15) Conclusion**

**Thank you for completing the survey. We greatly appreciate your time and effort. Your reward will be credited to your account.**

**We will contact you again in two weeks to ask you some more questions. Your participation is voluntary, and your decision to participate or not to participate will not affect you in any way. Your experiences and opinions will help us provide policy makers with valuable information, so we hope you will choose to participate**.