The 1990 census must count every person at his or her "usual residence." This means the place where the person lives and sleeps most of the time.

1a. List on the numbered lines below the name of each person living here on Sunday, April 1, including all persons staying here who have no other home. If EVERYONE at this address is staying here temporarily and usually lives somewhere else, follow the instructions given in question 1b below.

Include

- Everyone who usually lives here such as family members, housemates and roommates, foster children, roomers, boarders, and live-in employees
- Persons who are temporarily away on a business trip, on vacation, or in a general hospital
- College students who stay here while attending college
- Persons in the Armed Forces who live here
- Newborn babies still in the hospital
- Children in boarding schools below the college level
- Persons who stay here most of the week while working even if they have a home somewhere else
- Persons with no other home who are staying here on April 1

Do NOT include

- Persons who usually live somewhere else

- Persons who are away in an institution such as a prison, mental hospital, or a nursing home
- College students who live somewhere else while attending college
- Persons in the Armed Forces who live somewhere else

- Persons who stay somewhere else most of the week while working

Print last name, first name, and middle initial for each person. Begin on line 1 with the household member (or one of the household members) in whose name this house or apartment is owned, being bought, or rented. If there is no such person, start on line 1 with any adult household member.

	LAST	FIRST	INITIAL		LAST	FIRST	INITIAL
1				7			
2				8			
3				9			
4				10			
5				11			
6				12			

1b. If EVERYONE is staying here only temporarily and usually lives somewhere else, list the name of each person on the numbered lines above, fill this circle ⟶ ○ and print their usual address below. DO NOT PRINT THE ADDRESS LISTED ON THE FRONT COVER.

House number	Street or road/Rural route and box number	Apartment number

City	State	ZIP Code

County or foreign country	Names of nearest intersecting streets or roads

NOW PLEASE OPEN THE FLAP TO PAGE 2 AND ANSWER ALL QUESTIONS FOR THE FIRST 7 PEOPLE LISTED. USE A BLACK LEAD PENCIL ONLY.

	PERSON 1	PERSON 2
Please fill one column ➡ for each person listed in Question 1a on page 1.	Last name Print name　　　　　Middle initial	Last name First name　　　　　Middle initial

2. How is this person related to PERSON 1?

Fill ONE circle for each person.

If **Other relative** of person in column 1, fill circle and print exact relationship, such as mother-in-law, grandparent, son-in-law, niece, cousin, and so on.

PERSON 1:
START in this column with the household member (or one of the members) in whose name the home is owned, being bought, or rented.

If there is no such person, start in this column with any adult household member.

PERSON 2:
If a RELATIVE of Person 1:
- ○ Husband/wife
- ○ Natural-born or adopted son/daughter
- ○ Stepson/ stepdaughter
- ○ Brother/sister
- ○ Father/mother
- ○ Grandchild
- ○ Other relative ⟍

If NOT RELATED to Person 1:
- ○ Roomer, boarder, or foster child
- ○ Housemate, roommate ■
- ○ Unmarried partner
- ○ Other nonrelative

3. Sex
Fill ONE circle for each person.

PERSON 1: ○ Male　○ Female
PERSON 2: ○ Male　○ Female

4. Race
Fill ONE circle for the race that the person considers himself/herself to be.

If **Indian (Amer.)**, print the name of the enrolled or principal tribe. ⟶

If **Other Asian or Pacific Islander (API)**, print one group, for example: Hmong, Fijian, Laotian, Thai, Tongan, Pakistani, Cambodian, and so on. ⟶

If **Other race**, print race. ⟶

PERSON 1:
- ○ White
- ○ Black or Negro
- ○ Indian (Amer.) (Print the name of the enrolled or principal tribe.) ⟍
- ○ Eskimo
- ○ Aleut

Asian or Pacific Islander (API)
- ○ Chinese　■　○ Japanese
- ○ Filipino　○ Asian Indian
- ○ Hawaiian　○ Samoan
- ○ Korean　○ Guamanian
- ○ Vietnamese　○ Other API ⟍
- ○ Other race (Print race) ⟍

PERSON 2:
- ○ White
- ○ Black or Negro
- ○ Indian (Amer.) (Print the name of the enrolled or principal tribe.) ⟍
- ○ Eskimo
- ○ Aleut

Asian or Pacific Islander (API)
- ○ Chinese　■　○ Japanese
- ○ Filipino　○ Asian Indian
- ○ Hawaiian　○ Samoan
- ○ Korean　○ Guamanian
- ○ Vietnamese　○ Other API ⟍
- ○ Other race (Print race) ⟍

5. Age and year of birth

a. Print each person's age at last birthday. Fill in the matching circle below each box.

b. Print each person's year of birth and fill the matching circle below each box.

PERSON 1:
a. Age
0	0	0	0	0
1	0	1	0	1	0
2	0	2	0
3	0	3	0
4	0	4	0
5	0	5	0
6	0	6	0
7	0	7	0
8	0	8	0
9	0	9	0

b. Year of birth
1	●	8	0	0	0	0
9	0	1	0	1	0
2	0	2	0
3	0	3	0
■	4	0	4	0
5	0	5	0
6	0	6	0
7	0	7	0
8	0	8	0
9	0	9	0

PERSON 2:
a. Age
0	0	0	0	0
1	0	1	0	1	0
2	0	2	0
3	0	3	0
■	4	0	4	0
5	0	5	0
6	0	6	0
7	0	7	0
8	0	8	0
9	0	9	0

b. Year of birth
1	●	8	0	0	0	0
9	0	1	0	1	0
2	0	2	0
3	0	3	0
■	4	0	4	0
5	0	5	0
6	0	6	0
7	0	7	0
8	0	8	0
9	0	9	0

6. Marital status
Fill ONE circle for each person.

PERSON 1:
- ○ Now married　○ Separated
- ○ Widowed　○ Never married
- ○ Divorced

PERSON 2:
- ○ Now married　○ Separated
- ○ Widowed　○ Never married
- ○ Divorced

7. Is this person of Spanish/Hispanic origin?
Fill ONE circle for each person.

If Yes, other Spanish/Hispanic, print one group. ⟶

PERSON 1:
- ○ No (not Spanish/Hispanic)
- ○ Yes, Mexican, Mexican-Am., Chicano
- ○ Yes, Puerto Rican　■
- ○ Yes, Cuban
- ○ Yes, other Spanish/Hispanic (Print one group, for example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.) ⟍

PERSON 2:
- ○ No (not Spanish/Hispanic)
- ○ Yes, Mexican, Mexican-Am., Chicano
- ○ Yes, Puerto Rican
- ○ Yes, Cuban
- ○ Yes, other Spanish/Hispanic (Print one group, for example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.) ⟍

FOR CENSUS USE ⟶

PERSON 1: ○　○　□
PERSON 2: ○　○

PERSON 7

Last name

First name / Middle initial

If a RELATIVE of Person 1:

- O Husband/wife
- O Brother/sister
- O Natural-born or adopted son/daughter
- O Father/mother
- O Grandchild
- C Other relative ⌐

- O Stepson/ stepdaughter

If NOT RELATED to Person 1:

- O Roomer, boarder, or foster child
- O Unmarried partner
- O Housemate, roommate ■
- O Other nonrelative

- O Male
- O Female

- O White
- O Black or Negro
- O Indian (Amer.) (Print the name of the enrolled or principal tribe.)⌐

- O Eskimo
- O Aleut

Asian or Pacific Islander (API)

- O Chinese
- O Japanese
- O Filipino ■
- O Asian Indian
- O Hawaiian
- O Samoan
- O Korean
- O Guamanian
- O Vietnamese
- O Other API ⌐

- O Other race (Print race)

a. Age	b. Year of birth
	1

0 0 0 C 0 0	1 ● 8 0 0 0 0 0
1 0 1 C 1 0	9 0 1 0 1 0
2 0 2 0	2 0 2 0
3 0 3 0	3 0 3 0
4 0 4 0 ■	4 0 4 0
5 0 5 0	5 0 5 0
6 0 6 0	6 0 6 0
7 0 7 0	7 0 7 0
8 0 8 0	8 0 8 0
9 0 9 0	9 0 9 0

- O Now married
- O Separated
- O Widowed
- O Never married
- O Divorced

- O No (not Spanish/Hispanic)
- O Yes, Mexican, Mexican-Am., Chicano
- O Yes, Puerto Rican
- O Yes, Cuban ■
- O Yes, other Spanish/Hispanic (Print one group, for example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.)⌐

- O
- O

H1a. Did you leave anyone out of your list of persons for Question 1a on page 1 because you were not sure if the person should be listed — for example, someone temporarily away on a business trip or vacation, a newborn baby still in the hospital, or a person who stays here once in a while and has no other home?

- O Yes, please print the name(s) and reason(s). ⌐
- O No ■

---

b. Did you include anyone in your list of persons for Question 1a on page 1 even though you were not sure that the person should be listed — for example, a visitor who is staying here temporarily or a person who usually lives somewhere else?

- O Yes, please print the name(s) and reason(s). ⌐
- O No

H2. Which best describes this building? Include all apartments, flats, etc., even if vacant.

- O A mobile home or trailer
- O A one-family house detached from any other house ■
- O A one-family house attached to one or more houses
- O A building with 2 apartments
- O A building with 3 or 4 apartments
- O A building with 5 to 9 apartments
- O A building with 10 to 19 apartments
- O A building with 20 to 49 apartments
- O A building with 50 or more apartments
- O Other

H3. How many rooms do you have in this house or apartment? Do NOT count bathrooms, porches, balconies, foyers, halls, or half-rooms.

- O 1 room ■
- O 4 rooms
- O 7 rooms
- O 2 rooms
- O 5 rooms
- O 8 rooms
- O 3 rooms
- O 6 rooms
- O 9 or more rooms

H4. Is this house or apartment —

- O Owned by you or someone in this household with a mortgage or loan?
- O Owned by you or someone in this household free and clear (without a mortgage)? ■
- O Rented for cash rent?
- O Occupied without payment of cash rent?

If this is a ONE-FAMILY HOUSE —

H5a. Is this house on ten or more acres?

- O Yes
- O No

b. Is there a business (such as a store or barber shop) or a medical office on this property?

- O Yes
- O No

Answer only if you or someone in this household OWNS OR IS BUYING this house or apartment —

H6. What is the value of this property; that is, how much do you think this house and lot or condominium unit would sell for if it were for sale?

- O Less than $10,000
- O $70,000 to $74,999
- O $10,000 to $14,999
- O $75,000 to $79,999
- O $15,000 to $19,999
- O $80,000 to $89,999
- O $20,000 to $24,999
- O $90,000 to $99,999
- O $25,000 to $29,999
- O $100,000 to $124,999
- O $30,000 to $34,999
- O $125,000 to $149,999
- O $35,000 to $39,999
- O $150,000 to $174,999
- O $40,000 to $44,999
- O $175,000 to $199,999
- O $45,000 to $49,999
- O $200,000 to $249,999
- O $50,000 to $54,999
- O $250,000 to $299,999
- O $55,000 to $59,999
- O $300,000 to $399,999
- O $60,000 to $64,999
- O $400,000 to $499,999
- O $65,000 to $69,999
- O $500,000 or more

Answer only if you PAY RENT for this house or apartment —

H7a. What is the monthly rent?

- O Less than $80
- O $375 to $399
- O $80 to $99
- O $400 to $424
- O $100 to $124
- O $425 to $449
- O $125 to $149
- O $450 to $474
- O $150 to $174
- O $475 to $499
- O $175 to $199
- O $500 to $524
- O $200 to $224 ■
- O $525 to $549
- O $225 to $249
- O $550 to $599
- O $250 to $274
- O $600 to $649
- O $275 to $299
- O $650 to $699
- O $300 to $324
- O $700 to $749
- O $325 to $349
- O $750 to $999
- O $350 to $374
- O $1,000 or more

b. Does the monthly rent include any meals?

- O Yes
- O No

FOR CENSUS USE

A. Total persons

0	0
I	I
2	2
■	3
	4
	5
	6
	7
	8
	9

B. Type of unit

Occupied	Vacant
O First form	O Regular
O Cont'n	O Usual home elsewhere

C1. Vacancy status

- O For rent
- O For seas/ rec/occ
- O For sale only
- O Rented or sold, not occupied
- O For migrant workers
- O Other vacant

C2. Is this unit boarded up?

- O Yes
- O No

D. Months vacant

- C Less than 1
- O 6 up to 12
- C 1 up to 2
- O 12 up to 24
- C 2 up to 6
- O 24 or more

E. Complete after

- O LR
- O TC
- Q QA · JlC 1
- O P/F
- O RE
- O I/T · O
- O MV
- O ED
- O EN ■

- O P0
- O P3
- O P6
- O P1
- O P4
- O IA · JlC 2
- O P2
- O P5
- O SM · O

F. Cov.

- O 1b
- O 1a
- O 7
- O H1

G. DO

ID ■

0	0	0	0	0	0	0	0	0	0	0
I	I	I	I	I	I	I	I	I	I	I
2	2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9	9

9 8 7 6 3 4 3 2 ● 0

9 8 7 6 5 4 ● 2 1 0

H8. When did the person listed in column 1 on page 2 move into this house or apartment?

- O 1989 or 1990
- O 1985 to 1988
- O 1980 to 1984
- O 1970 to 1979
- O 1960 to 1969
- O 1959 or earlier ▪

H9. How many bedrooms do you have; that is, how many bedrooms would you list if this house or apartment were on the market for sale or rent?

- O No bedroom
- O 1 bedroom
- O 2 bedrooms
- O 3 bedrooms
- O 4 bedrooms
- O 5 or more bedrooms ▪

H10. Do you have COMPLETE plumbing facilities in this house or apartment; that is, 1) hot and cold piped water, 2) a flush toilet, and 3) a bathtub or shower?

- O Yes, have all three facilities
- O No

H11. Do you have COMPLETE kitchen facilities; that is, 1) a sink with piped water, 2) a range or cookstove, and 3) a refrigerator?

- O Yes
- O No ▪

H12. Do you have a telephone in this house or apartment?

- O Yes
- O No

H13. How many automobiles, vans, and trucks of one-ton capacity or less are kept at home for use by members of your household?

- O None ▪
- O 1
- O 2
- O 3
- O 4
- O 5
- O 6
- O 7 or more

H14. Which FUEL is used MOST for heating this house or apartment?

- O Gas: from underground pipes serving the neighborhood
- O Gas: bottled, tank, or LP
- O Electricity
- O Fuel oil, kerosene, etc.
- O Coal or coke
- O Wood
- O Solar energy
- O Other fuel
- O No fuel used ▪

H15. Do you get water from —

- O A public system such as a city water department, or private company?
- O An individual drilled well?
- O An individual dug well?
- O Some other source such as a spring, creek, river, cistern, etc.?

H16. Is this building connected to a public sewer?

- O Yes, connected to public sewer
- O No, connected to septic tank or cesspool
- O No, use other means

H17. About when was this building first built?

- ▪ 1989 or 1990
- O 1985 to 1988
- O 1980 to 1984
- O 1970 to 1979
- O 1960 to 1969
- O 1950 to 1959
- O 1940 to 1949
- O 1939 or earlier
- O Don't know

H18. Is this house or apartment part of a condominium?

- O Yes
- O No

If you live in an apartment building, skip to H20.

H19a. Is this house on less than 1 acre?

- O Yes — Skip to H20
- O No ▪

b. In 1989, what were the actual sales of all agricultural products from this property?

- O None
- O $1 to $999
- O $1,000 to $2,499
- O $2,500 to $4,999
- O $5,000 to $9,999
- O $10,000 or more

H20. What are the yearly costs of utilities and fuels for this house or apartment?
If you have lived here less than 1 year, estimate the yearly cost. ▪

a. Electricity

```
$          .00
```
Yearly cost — Dollars

OR

- O Included in rent or in condominium fee
- O No charge or electricity not used

b. Gas ▪

```
$          .00
```
Yearly cost — Dollars

OR

- O Included in rent or in condominium fee
- O No charge or gas not used

c. Water

```
$          .00
```
Yearly cost — Dollars

OR

- O Included in rent or in condominium fee
- O No charge

d. Oil, coal, kerosene, wood, etc. ▪

```
$          .00
```
Yearly cost — Dollars

OR

- O Included in rent or in condominium fee
- O No charge or these fuels not used

INSTRUCTION:

Answer questions H21 TO H26, if this is a one-family house, a condominium, or a mobile home that someone in this household OWNS OR IS BUYING; otherwise, go to page 6.

H21. What were the real estate taxes on THIS property last year?

$ _____ .00
Yearly amount — Dollars

OR

○ None

H22. What was the annual payment for fire, hazard, and flood insurance on THIS property?

$ _____ .00
Yearly amount — Dollars

OR

○ None

H23a. Do you have a mortgage, deed of trust, contract to purchase, or similar debt on THIS property?

○ Yes, mortgage, deed of trust, or similar debt ⎫
○ Yes, contract to purchase ⎬ Go to H23b

○ No — *Skip to H24a*

b. How much is your regular monthly mortgage payment on THIS property? Include payment only on first mortgage or contract to purchase.

$ _____ .00
Monthly amount — Dollars

OR

○ No regular payment required — *Skip to H24a*

c. Does your regular monthly mortgage payment include payments for real estate taxes on THIS property?

○ Yes, taxes included in payment
○ No, taxes paid separately or taxes not required

d. Does your regular monthly mortgage payment include payments for fire, hazard, or flood insurance on THIS property?

○ Yes, insurance included in payment
○ No, insurance paid separately or no insurance

H24a. Do you have a second or junior mortgage or a home equity loan on THIS property?

○ Yes
○ No — *Skip to H25*

b. How much is your regular monthly payment on all second or junior mortgages and all home equity loans?

$ _____ .00
Monthly amount — Dollars

OR

○ No regular payment required

Answer ONLY if this is a CONDOMINIUM —

H25. What is the monthly condominium fee?

$ _____ .00
Monthly amount — Dollars

Answer ONLY if this is a MOBILE HOME —

H26. What was the total cost for personal property taxes, site rent, registration fees, and license fees on this mobile home and its site last year? Exclude real estate taxes.

$ _____ .00
Yearly amount — Dollars

Please turn to page 6. ↗

PERSON 1

Last name   First name   Middle initial

8. In what U.S. State or foreign country was this person born?

(Name of State or foreign country; or Puerto Rico, Guam, etc.)

9. Is this person a CITIZEN of the United States?

- ○ Yes, born in the United States — *Skip to 11*
- ○ Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas
- ○ Yes, born abroad of American parent or parents
- ○ Yes, U.S. citizen by naturalization
- ○ No, not a citizen of the United States

10. When did this person come to the United States to stay?

- ○ 1987 to 1990
- ○ 1985 or 1986
- ○ 1982 to 1984
- ○ 1980 or 1981
- ○ 1975 to 1979
- ○ 1970 to 1974
- ○ 1965 to 1969
- ○ 1960 to 1964
- ○ 1950 to 1959
- ○ Before 1950

11. At any time since February 1, 1990, has this person attended regular school or college?
Include only nursery school, kindergarten, elementary school, and schooling which leads to a high school diploma or a college degree.

- ○ No, has not attended since February 1
- ○ Yes, public school, public college
- ○ Yes, private school, private college

12. How much school has this person COMPLETED?
Fill ONE circle for the highest level COMPLETED or degree RECEIVED. If currently enrolled, mark the level of previous grade attended or highest degree received.

- ○ No school completed
- ○ Nursery school
- ○ Kindergarten
- ○ 1st, 2nd, 3rd, or 4th grade
- ○ 5th, 6th, 7th, or 8th grade
- ○ 9th grade
- ○ 10th grade
- ○ 11th grade
- ○ 12th grade, NO DIPLOMA
- ○ HIGH SCHOOL GRADUATE - high school DIPLOMA or the equivalent (For example: GED)
- ○ Some college but no degree
- ○ Associate degree in college - Occupational program
- ○ Associate degree in college - Academic program
- ○ Bachelor's degree (For example: BA, AB, BS)
- ○ Master's degree (For example: MA, MS, MEng, MEd, MSW, MBA)
- ○ Professional school degree (For example: MD, DDS, DVM, LLB, JD)
- ○ Doctorate degree (For example: PhD, EdD)

13. What is this person's ancestry or ethnic origin?
(See instruction guide for further information.)

(For example: German, Italian, Afro-Amer., Croatian, Cape Verdean, Dominican, Ecuadoran, Haitian, Cajun, French Canadian, Jamaican, Korean, Lebanese, Mexican, Nigerian, Irish, Polish, Slovak, Taiwanese, Thai, Ukrainian, etc.)

14a. Did this person live in this house or apartment 5 years ago (on April 1, 1985)?

- ○ Born after April 1, 1985 — *Go to questions for the next person*
- ○ Yes — *Skip to 15a*
- ○ No

b. Where did this person live 5 years ago (on April 1, 1985)?

(1) Name of U.S. State or foreign country

(If outside U.S., print answer above and skip to 15a.)

(2) Name of county in the U.S.

(3) Name of city or town in the U.S.

(4) Did this person live inside the city or town limits?

- ○ Yes
- ○ No, lived outside the city/town limits

15a. Does this person speak a language other than English at home?

- ○ Yes
- ○ No — *Skip to 16*

b. What is this language?

(For example: Chinese, Italian, Spanish, Vietnamese)

c. How well does this person speak English?

- ○ Very well
- ○ Well
- ○ Not well
- ○ Not at all

16. When was this person born?

- ○ Born before April 1, 1975 — *Go to 17a*
- ○ Born April 1, 1975 or later — *Go to questions for the next person*

17a. Has this person ever been on active-duty military service in the Armed Forces of the United States or ever been in the United States military Reserves or the National Guard? If service was in Reserves or National Guard only, see instruction guide.

- ○ Yes, now on active duty
- ○ Yes, on active duty in past, but not now
- ○ Yes, service in Reserves or National Guard only — *Skip to 18*
- ○ No — *Skip to 18*

b. Was active-duty military service during —
Fill a circle for each period in which this person served.

- ○ September 1980 or later
- ○ May 1975 to August 1980
- ○ Vietnam era (August 1964—April 1975)
- ○ February 1955—July 1964
- ○ Korean conflict (June 1950—January 1955)
- ○ World War II (September 1940—July 1947)
- ○ World War I (April 1917—November 1918)
- ○ Any other time

c. In total, how many years of active-duty military service has this person had?

Years

---

18. Does this person have a physical, mental, or other health condition that has lasted for 6 or more months and which —

a. Limits the kind or amount of work this person can do at a job?

- ○ Yes
- ○ No

b. Prevents this person from working at a job?

- ○ Yes
- ○ No

19. Because of a health condition that has lasted for 6 or more months, does this person have any difficulty —

a. Going outside the home alone, for example, to shop or visit a doctor's office?

- ○ Yes
- ○ No

b. Taking care of his or her own personal needs, such as bathing, dressing, or getting around inside the home?

- ○ Yes
- ○ No

If this person is a female —
20. How many babies has she ever had, not counting stillbirths? Do not count her stepchildren or children she has adopted.

None 1 2 3 4 5 6 7 8 9 10 11 12 or more
○ ○○○○○○○○○ ○ ○ ○

21a. Did this person work at any time LAST WEEK?

- ○ Yes — Fill this circle if this person worked full time or part time. (Count part-time work such as delivering papers, or helping without pay in a family business or farm. Also count active duty in the Armed Forces.)
- ○ No — Fill this circle if this person did not work, or did only own housework, school work, or volunteer work. — *Skip to 25*

b. How many hours did this person work LAST WEEK (at all jobs)? Subtract any time off; add overtime or extra hours worked.

Hours

22. 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)

(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

c. Is the work location inside the limits of that city or town?

- ○ Yes
- ○ No, outside the city/town limits

d. County

e. State

f. ZIP Code

9 8 7 6 5 4 3 2 ● 0   9 8 7 ● 5 4 3 2 1 0

23a. How did this person usually get to work LAST WEEK? If this person usually used more than one method of transportation during the trip, fill the circle of the one used for most of the distance.

- ○ Car, truck, or van
- ○ Bus or trolley bus
- ○ Streetcar or trolley car
- ○ Subway or elevated
- ○ Railroad
- ○ Ferryboat
- ○ Taxicab
- ○ Motorcycle
- ○ Bicycle
- ○ Walked
- ○ Worked at home — *Skip to 28*
- ○ Other method

If "car, truck, or van" is marked in 23a, go to 23b. Otherwise, skip to 24a.

b. How many people, including this person, usually rode to work in the car, truck, or van LAST WEEK?

- ○ Drove alone
- ○ 2 people
- ○ 3 people
- ○ 4 people
- ○ 5 people
- ○ 6 people
- ○ 7 to 9 people
- ○ 10 or more people

24a. What time did this person usually leave home to go to work LAST WEEK?

○ a.m.
○ p.m.

b. How many minutes did it usually take this person to get from home to work LAST WEEK?

Minutes — Skip to 28

25. Was this person TEMPORARILY absent or on layoff from a job or business LAST WEEK?

- ○ Yes, on layoff
- ○ Yes, on vacation, temporary illness, labor dispute, etc.
- ○ No

26a. Has this person been looking for work during the last 4 weeks?

- ○ Yes
- ○ No — Skip to 27

b. Could this person have taken a job LAST WEEK if one had been offered?

- ○ No, already has a job
- ○ No, temporarily ill
- ○ No, other reasons (in school, etc.)
- ○ Yes, could have taken a job

27. When did this person last work, even for a few days?

- ○ 1990
- ○ 1989
- ○ 1988
- ○ 1985 to 1987
} Go to 28
- ○ 1980 to 1984
- ○ 1979 or earlier
- ○ Never worked
} Skip to 32

28-30. 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 since 1985.

28. Industry or Employer

a. For whom did this person work? If now on active duty in the Armed Forces, fill this circle ——→ ○ and print the branch of the Armed Forces.

(Name of company, business, or other employer)

b. What kind of business or industry was this? Describe the activity at location where employed.

(For example: hospital, newspaper publishing, mail order house, auto engine manufacturing, retail bakery)

c. Is this mainly — Fill ONE circle

- ○ Manufacturing
- ○ Wholesale trade
- ○ Retail trade
- ○ Other (agriculture, construction, service, government, etc.)

29. Occupation

a. What kind of work was this person doing?

(For example: registered nurse, personnel manager, supervisor of order department, gasoline engine assembler, cake icer)

b. What were this person's most important activities or duties?

(For example: patient care, directing hiring policies, supervising order clerks, assembling engines, icing cakes)

30. Was this person — Fill ONE circle

- ○ Employee of a PRIVATE FOR PROFIT company or business or of an individual, for wages, salary, or commissions
- ○ Employee of a PRIVATE NOT-FOR-PROFIT, tax-exempt, or charitable organization
- ○ Local GOVERNMENT employee (city, county, etc.)
- ○ State GOVERNMENT employee
- ○ 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

31a. Last year (1989), did this person work, even for a few days, at a paid job or in a business or farm?

- ○ Yes
- ○ No — Skip to 32

b. How many weeks did this person work in 1989? Count paid vacation, paid sick leave, and military service.

Weeks

c. During the weeks WORKED in 1989, how many hours did this person usually work each week?

Hours

32. INCOME IN 1989 —

Fill the "Yes" circle below for each income source received during 1989. Otherwise, fill the "No" circle. If "Yes," enter the total amount received during 1989.

For income received jointly, see instruction guide.

If exact amount is not known, please give best estimate.

If net income was a loss, write "Loss" above the dollar amount.

a. Wages, salary, commissions, bonuses, or tips from all jobs — Report amount before deductions for taxes, bonds, dues, or other items.

- ○ Yes ——→
- ○ No

$ .00
Annual amount — Dollars

b. Self-employment income from own nonfarm business, including proprietorship and partnership — Report NET income after business expenses.

- ○ Yes ——→
- ○ No

$ .00
Annual amount — Dollars

c. Farm self-employment income — Report NET income after operating expenses. Include earnings as a tenant farmer or sharecropper.

- ○ Yes ——→
- ○ No

$ .00
Annual amount — Dollars

d. Interest, dividends, net rental income or royalty income, or income from estates and trusts — Report even small amounts credited to an account.

- ○ Yes ——→
- ○ No

$ .00
Annual amount — Dollars

e. Social Security or Railroad Retirement

- ○ Yes ——→
- ○ No

$ .00
Annual amount — Dollars

f. Supplemental Security Income (SSI), Aid to Families with Dependent Children (AFDC), or other public assistance or public welfare payments.

- ○ Yes ——→
- ○ No

$ .00
Annual amount — Dollars

g. Retirement, survivor, or disability pensions — Do NOT include Social Security.

- ○ Yes ——→
- ○ No

$ .00
Annual amount — Dollars

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 ——→
- ○ No

$ .00
Annual amount — Dollars

33. What was this person's total income in 1989? Add entries in questions 32a through 32h; subtract any losses. If total amount was a loss, write "Loss" above amount.

○ None   OR $ .00
Annual amount — Dollars

9 8 7 6 5 4 3 2 ● 0

9 8 ● 6 5 4 3 2 1 0

Please turn the page and answer questions for Person 2 listed on page 1. If this is the last person listed in question 1a on page 1, go to the back of the form.