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

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.

<table>
<thead>
<tr>
<th>LAST</th>
<th>FIRST</th>
<th>INITIAL</th>
<th>LAST</th>
<th>FIRST</th>
<th>INITIAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td></td>
<td></td>
<td>9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td></td>
<td></td>
<td>10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td></td>
<td></td>
<td>11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td></td>
<td></td>
<td>12</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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.**
2. How is this person related to PERSON 1?
   Fill ONE circle for each person.
   If other relatives 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.

   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.

3. Sex
   Fill ONE circle for each person.
   Male  Female

4. Race
   Fill ONE circle for each person.
   White  Black or Negro  Indian (Amer.) (Print the name of the enrolled or principal tribe.)  Eskimo  Aleut  Asian or Pacific Islander (API)  Chinese  Filipino  Hawaiian  Korean  Vietnamese  Other API
   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.

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.

   0 0 0 0 0 1 8 0 0 0 0
   1 0 1 0 0 9 1 0 1 0
   2 0 2 0 0 3 0 3 0 0
   4 0 4 0 0 5 0 5 0 0
   6 0 6 0 0 7 0 7 0 0
   8 0 8 0 0 9 0 9 0 0
   a. Age
   b. Year of birth

6. Marital status
   Fill ONE circle for each person.
   Married  Separated  Widowed  Never married  Divorced

7. Is this person of Spanish/Hispanic origin?
   Fill ONE circle for each person.
   No (not Spanish/Hispanic)
   Yes, Mexican, Mexican-American, Chicano
   Yes, Puerto Rican
   Yes, Cuban
   Yes, other Spanish/Hispanic
   (Print one group, for example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.)
   (Print one group, for example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.)
**PERSON 7**

If a RELATIVE of Person 1:
- Husband/wife
- Brother/sister
- Natural-born
- Adopted
- Grandchild
- Stepchild
- Nonrelative

If NOT RELATED to Person 1:
- Roomer, boarder
- Unmarried partner
- Housemate
- Other relative
- Other

**Race**
- White
- Black or Negro
- Indian (Amer.)
- Asian Pacific Islander
- Chinese
- Filipino
- Hawaiian
- Japanese
- Korean
- Vietnamese
- Other Asian

**Other race**

**Sex**
- Male
- Female

**Highest grade completed**

**Marital status**
- Married
- Single
- Never married
- Separated
- Divorced
- Widowed

**Social security number**

**Household income**

**Other household income**

**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 one week and has no other home?
- Yes, please print the name(s) and reason(s).

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

- A mobile home or trailer
- An apartment in a one-family house detached from any other house
- A one-family house attached to one or more houses
- A building with 2 or more apartments
- A building with 5 to 9 apartments
- A building with 10 to 19 apartments
- A building with 20 to 49 apartments
- A building with 50 or more apartments

-- Other

**H3.** How many rooms do you have in this house or apartment? Do NOT count bathrooms, porches, balconies, foyers, halls, or half-rooms.
- 1 room
- 2 rooms
- 3 rooms
- 4 rooms
- 5 rooms
- 6 rooms
- 7 rooms
- 8 rooms
- 9 or more rooms

**H4.** Is this house or apartment:
- Owned by you or someone in this household with a mortgage or loan?
- Owned by you or someone in this household free and clear (without a mortgage)?
- Rented for cash rent?
- Occupied without payment of cash rent?

---

**Census Use**

- Total persons
- Type of unit
- Months vacant
- Complete after
- Is this unit boarded up?
- Gov.

---

**Note:** The image contains a table and various questions related to household and personal information. The table includes options for race, sex, marital status, income, and other details relevant to census data collection.
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?
   ○ No bedroom
   ○ 1 bedroom
   ○ 2 bedrooms
   ○ 3 bedrooms
   ○ 4 bedrooms
   ○ 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?
   ○ Yes, have all three facilities
   ○ 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?
   ○ Yes
   ○ No

H12. Do you have a telephone in this house or apartment?
   ○ Yes
   ○ 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?
   ○ None
   ○ 1
   ○ 2
   ○ 3
   ○ 4
   ○ 5
   ○ 6
   ○ 7 or more

H14. Which fuel is used MOST for heating this house or apartment?
   ○ Gas from underground pipes serving the neighborhood
   ○ Gas: bottled, tank, or LP
   ○ Electricity
   ○ Fuel oil, kerosene, etc.
   ○ Coal or coke
   ○ Wood
   ○ Solar energy
   ○ Other fuel
   ○ No fuel used

H15. Do you get water from —
   ○ A public system such as a city water department, or private company?
   ○ An individual drilled well?
   ○ An individual dug well?
   ○ Some other source such as a spring, creek, river, stream, etc.?

H16. Is the building connected to a public sewer?
   ○ Yes, connected to public sewer
   ○ No, connected to septic tank or cesspool
   ○ No, use other means

H17. About when was this building first built?
   ○ 1969 or 1990
   ○ 1965 to 1988
   ○ 1980 to 1984
   ○ 1970 to 1979
   ○ 1969 to 1969
   ○ 1950 to 1959
   ○ 1940 to 1949
   ○ 1939 or earlier
   ○ Don't know

H18. Is this house or apartment part of a condominium?
   ○ Yes
   ○ No

H19a. Is this house on less than 1 acre?
   ○ Yes — Skip to H20
   ○ No

H19b. In 1989, what were the actual sales of all agricultural products from this property?
   ○ None
   ○ $1 to $999
   ○ $1,000 to $2,499
   ○ $2,500 to $4,999
   ○ $5,000 to $9,999
   ○ $10,000 or more

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

   Yearly cost — Dollars
   0.00

   OR

   b. Gas

   Yearly cost — Dollars
   0.00

   OR

   c. Water

   Yearly cost — Dollars
   0.00

   OR

   d. Oil, coal, kerosene, wood, etc.

   Yearly cost — Dollars
   0.00

   OR
14a. Did this person live in this house or apartment five years ago (on April 1, 1985)?
   - Yes — Skip to 15a
   - No

14b. Where did this person live five years ago (on April 1, 1985)?
   - Name of U.S. State or foreign country
   - Name of county in the U.S.
   - Name of city or town in the U.S.

15a. Does this person speak a language other than English at home?
   - Yes
   - No — Skip to 16

15b. What is this language?
   - (For example: Chinese, Italian, Spanish, Vietnamese)

15c. How well does this person speak English?
   - Very well
   - Not well
   - 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 Reserve or the National Guard? If so, was it 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 in 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?

18. Does this person have a physical, mental, or other health condition that has lasted for 6 or more months and which —
   - Limits the kind or amount of work this person can do at a job?
     - Yes
     - No
   - 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 —
   - Going outside the home alone, for example, to shop or visit a doctor's office?
     - Yes
     - No
   - 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 in 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 in this circle if this person did not work, or only worked 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.

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.
   - Address (Number and street)
   - City
   - State
   - ZIP Code

   (If the exact address is not known, give a description of the location such as the building name or the nearest street or intersection.)
23a. How did this person usually get to work LAST WEEK? If this person usually used more than one method of transportation during the week, fill in 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
- Walked
- Railroad
- Ferryboat
- Taxi cab
- Other method
- Not applicable

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?

- 1 person
- 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.

24b. How many minutes did this person usually take to get from home to work LAST WEEK?

- Minutes — Skip to 25

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

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

25a. 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 had 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

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.

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 tester)

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

- Manufacturing
- Other (agriculture, wholesale trade, construction, service, retail trade, government, etc.)

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

31c. 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.

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

- Yes
- No

- Annual amount — Dollars

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

- Yes
- No

- Annual amount — Dollars

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

- Yes
- No

- 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

- Annual amount — Dollars

e. Social Security or Railroad Retirement

- Yes
- No

- 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

- Annual amount — Dollars

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

- Yes
- No

- Annual amount — Dollars

h. Any other source 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 horse.

- Yes
- No

- Annual amount — Dollars

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

- None

- Annual amount — Dollars