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Entrepreneurship in the Population Survey

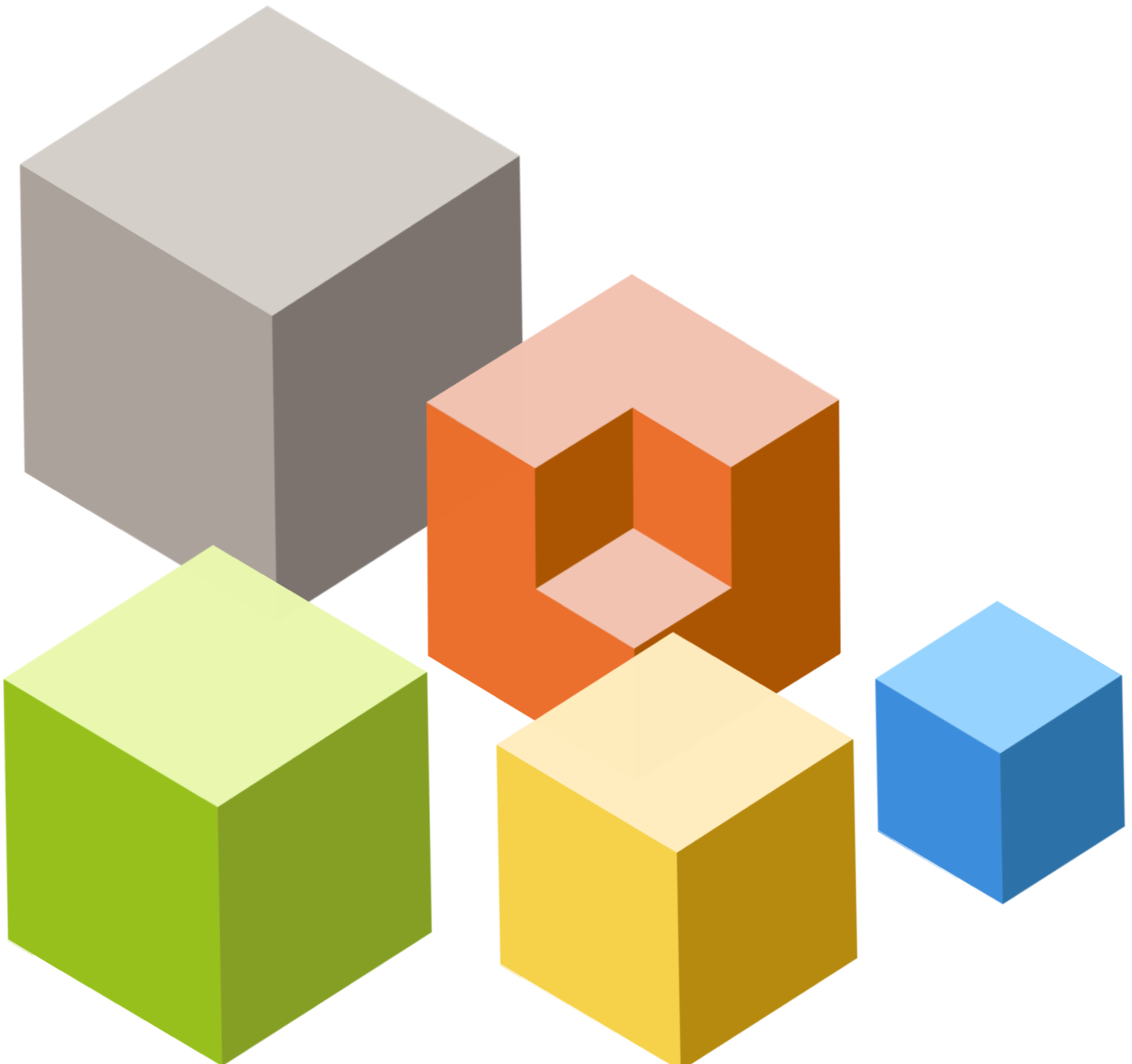
EPOP:2024 Questionnaire

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The Entrepreneurship in the Population Survey Project is being conducted by researchers at NORC at the University of Chicago with funding from a grant from the Ewing Marion Kauffman Foundation. Questions about this research project should be directed to EPOPresearch@norc.org.

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Entrepreneurship in the Population Survey: 2024

EPOP SURVEY OVERVIEW

The first Entrepreneurship in the Population (EPOP) Survey was conducted in 2022. EPOP:2024 is the third annual survey conducted. Two more annual collections are planned. The survey is designed to understand the scope of entrepreneurial activities from adults 18 years and up in United States and result in a variety of measures of entrepreneurial behavior including current and former business ownership, whether individuals are currently taking or have in the past taken steps towards starting a business, the extent to which individuals engage in freelance work, and engagement with the “gig economy.” In addition to capturing the characteristic profile of the individuals involved in these various entrepreneurial activities across the U.S., the collects information on the behaviors, challenges, and resources available to individuals during the entrepreneurial process.

Information about the EPOP Survey methods, data availability, publications, and access to data user support may be found on the project’s website: [EPOP.norc.org](https://www.norc.uchicago.edu/ePOP).

INSTRUCTIONS FOR DATA USERS AND READERS

The EPOP Survey sample was selected from three frame sources: (1) NORC’s AmeriSpeak Panel, (2) an addressed-based sample (ABS) frame built from the USPS Delivery Sequence (DSF) file; and a non-probability sample from opt-in panels. Samples selected from the AmeriSpeak Panel and the ABS frame are probability samples with explicit stratification and known sample selection probabilities, while the sample selected from opt-in panels is a nonprobability sample with unknown frame coverage and unknown selection probabilities. For efficiency reasons, the ABS and non-probability samples and the AmeriSpeak Panel sample had a different introduction to the survey. The ABS and non-probability sample were provided with an informed consent statement (i.e., agreement to participate) followed by demographic questions (see “ABS/Non-Probability Sample Start”). The AmeriSpeak Panel sample had a modified informed consent statement and skipped the demographic questions (see “AmeriSpeak Panel Sample Start”). After the two starting sections, respondents from all sample types followed the same path through the survey instrument beginning with the “Entrepreneurial Activity Screener” section.

- Text that appears in black or red font was displayed to the respondent.
- Text shown in bright orange and underlined was displayed to the respondent and included a link to explanatory hover text that could be displayed if the respondent wanted further explanation.
- Dark orange text shows variable names, skip logic, and instructions for programming the creation of variables and navigation through the instrument.
- Throughout the survey, Missing and Don’t Know are recorded as -3 and -5, respectively.

EPOP SURVEY USE AND CITATION

The full title of the survey is “The Entrepreneurship in the Population Survey” and the abbreviation is EPOP Survey. In referencing a specific year, follow these standards:

Full Project title: **The Entrepreneurship in the Population Survey: 2024**

Abbreviation: **EPOP:2024**

Citation: **“Entrepreneurship in the Population (EPOP) Survey Project Questionnaire: 2024.” NORC at the University of Chicago. November 14, 2024. [EPOP.norc.org](https://www.norc.uchicago.edu/ePOP).**

Researchers are welcome to use some or all the EPOP Survey questionnaire for other collections. However, we respectfully request you give prior notification to the EPOP Survey researchers at EPOPresearch@norc.org. And subsequently, you give appropriate credit to the NORC EPOP research team by mentioning this source using this provided citation.

Please note that there are a new set of survey items included in the EPOP:2024 asked of microbusiness owners (i.e., business owners with 0-9 employees) – those items were developed and funded by the Association of Enterprise Opportunity. The data related to these questions are provided in the EPOP:2024 Public Use File.

EPOP:2024 Questionnaire

ABS/NON-PROBABILITY SAMPLE START

[DISPLAY]

OPTINTRO. (Informed Consent)

Thank you for agreeing to participate in the EPOP Survey!

The EPOP or Entrepreneurship in the Population Survey is trying to understand the attitudes and experiences of people who own businesses or are self-employed; have thought about starting their own business; or used to own a business. This survey is also for people who have never owned a business and never wanted to – we want to hear everyone’s opinions about entrepreneurship in general.

Your responses to this survey are completely confidential – any information you provide will be held in strict confidence. NORC and the Kauffman Foundation (our funder) will use the information you provide for statistical purposes only. Answers to the survey will be kept anonymous and we will not share any of your personal information with anyone.

While we hope you will take the survey, please know your participation in this research is voluntary, and you have the right to stop at any time or skip any question you don’t wish to answer.

We estimate the survey will take 15-20 minutes depending on your past experiences.

Please use the "Continue" button to move forward within the questionnaire. Do not use your browser buttons.

DISPLAY_DEM_BEGIN.

First, we have just a few questions about yourself. This information helps the EPOP researchers understand who is included in the study results.

DEM_AGE.

What is your age?

[NUMBOX, RANGE 18-100, 777, 998, 999]

IF DEM_AGE < 18, SET QUAL = 2 AND GO TO SCR_UNDER18TERM

[SHOW IF DEM_AGE = 777, 998, 999]

DEM_AGE_RANGE.

This information helps the EPOP researchers understand who is included in the study results.

Please select your age range.

RESPONSE OPTIONS

1. Under 18 years
2. 18-24 years
3. 25-29 years
4. 30-39 years
5. 40-49 years
6. 50-59 years
7. 60-64 years
8. 65 years or older

IF DEM_AGE_RANGE = 1, SET QUAL = 2 AND GO TO SCR_UNDER18TERM
IF DEM_AGE_RANGE = 77,98,99, SET QUAL = 2 AND GO TO SCR_NOAGETERM

[SHOW IF DEM_AGE < 18 OR DEM_AGE_RANGE = 1]
SCR_UNDER18TERM.

Thank you for your time today. Unfortunately, you are not eligible for this study. Please ask an adult living in the household to visit voice.norc.org and enter the access code on the postcard or letter we mailed to your address to complete the survey. We appreciate your participation.

[SET QUAL=2 "Not Qualified" and END INTERVIEW, no incentive given]
[REDIRECT TO epopsurvey.norc.ORG]

[SHOW IF DEM_AGE_RANGE = 777,998,999]
SCR_NOAGETERM.

Thank you for your time today. Unfortunately, we need to have an answer to your age to be able to proceed. We appreciate your participation.

[SET QUAL=2 "NOT QUALIFIED" and END INTERVIEW, no incentive given]
[REDIRECT TO epopsurvey.norc.org]

[SHOW IF PANEL_TYPE=20,21]
DEM_STATE.

In what state do you currently live?

[DROPDOWN LIST OF STATES]

[SHOW IF PANEL_TYPE=20,21 AND DEM_STATE=CA, FL, TX]
TERMSORRY_SSI.

Thank you for your time today. Unfortunately, you are not eligible for this study. We appreciate your participation.

SET QUAL=2 AND REDIRECT TO HOME PANEL

[SHOW IF DEM_STATE = 77,98,99]
SCR_NOSTATETERM.

Thank you for your time today. Unfortunately, you need to provide your state of residence to be eligible for this study. We appreciate your participation.

[SET QUAL=2 “Not Qualified” and END INTERVIEW, no incentive given]
[REDIRECT TO epopsurvey.norc.ORG]

[SHOW IF PANEL_TYPE =20,21]
DEM_COUNTY.

In what county do you currently live?

[DROPDOWN LIST OF COUNTIES BASED ON STATE SELECTED IN DEM_STATE:
<https://www.census.gov/geographies/reference-files/2022/demo/popest/2022-fips.html>]
1000 I am not sure what county I live in

[SHOW IF DEM_COUNTY = 1000, 77,98, 999]
DEM_CITY.

In what city do you currently live?

[TEXTBOX]

[SHOW IF DEM_COUNTY = 1000, 777, 998, 999]
[NUMBOX]

DEM_ZIP.

For statistical purposes, please enter your ZIP code.

[00000-99999,777777,999998,999999]

[SHOW IF PANEL_TYPE>19]
DEM_GENDER.

What is your gender identity?

RESPONSE OPTIONS

1. Man
 2. Woman
 3. Non-binary
 4. Prefer to self-describe: [TEXTBOX]
-

[SHOW IF PANEL_TYPE>19]
DEM_HISPANIC.

Are you of Hispanic, Latino, or Spanish origin?

RESPONSE OPTIONS

1. No, not of Hispanic, Latino, or Spanish origin
2. Yes, Mexican, Mexican American, Chicano
3. Yes, Puerto Rican

4. Yes, Cuban
 5. Yes, another Hispanic, Latino, or Spanish origin
-

[SHOW IF PANEL_TYPE>19]
DEM_RACE.

To ensure a representative sample, please indicate your race.

Select all that apply.

RESPONSE OPTIONS

1. White
 2. Black or African American
 3. American Indian or Alaska Native
 4. Asian Indian
 5. Chinese
 6. Filipino
 7. Japanese
 8. Korean
 9. Vietnamese
 10. Other Asian, specify: [TEXTBOX]
 11. Native Hawaiian
 12. Guamanian or Chamorro
 13. Samoan
 14. Other Pacific Islander, specify: [TEXTBOX]
 15. Some other race, specify: [TEXTBOX]
-

AMERISPEAK PANEL SAMPLE START

[SHOW IF PANEL_TYPE<20]
[DISPLAY]

WINTRO_1. (Informed Consent)

Thank you for agreeing to participate in the EPOP Survey!

The EPOP or Entrepreneurship in the Population Survey is trying to understand the attitudes and experiences of people who own businesses or are self-employed; have thought about starting their own business; or used to own a business. This survey is also for people who have never owned a business and never wanted to – we want to hear everyone’s opinions about entrepreneurship in general.

Your responses to this survey are completely confidential – any information you provide will be held in strict confidence. NORC and the Kauffman Foundation (our funder) will use the information you provide for statistical purposes only. Answers to the survey will be kept anonymous and we will not share any of your personal information with anyone.

While we hope you will take the survey, please know your participation in this research is voluntary, and you have the right to stop at any time or skip any question you don’t wish to answer.

We estimate the survey will take 15-20 minutes depending on your past experiences.

To thank you for sharing your opinions, we will give you a reward of [INCENTWCOMMA] AmeriPoints after completing the survey.

Please use the "Continue" button to move forward within the questionnaire. Do not use your browser buttons.

ENTREPRENEURIAL ACTIVITY SCREENER

S_JOBSTAT_1.

In the last week, did you work for pay at a job or business?

Working for pay includes being self-employed but not earning income in the last week, freelancers and consultants who work intermittently, active military duty, or on any type of paid or unpaid leave, including vacation.

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF S_JOBSTAT_1 <> 1]

S_JOBSTAT_2.

In the last week, did you do ANY work for pay, even for as little as one hour?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF S_JOBSTAT_2 <> 1]

S_JOBSTAT_3.

In the last week, did you look for work?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF S_JOBSTAT_1 <> 1 AND S_JOBSTAT_2 <> 1]

S_JOBSTAT_4.

What were your reasons for not working during the last week?

Select all that apply.

RESPONSE OPTIONS

1. Retired
 2. On layoff from a job
 3. Student
 4. Family responsibilities
 5. Chronic illness or permanent disability
 6. Suitable job not available
 7. Did not need or want to work
 8. None of the above
-

[SHOW IF S_JOBSTAT_4 = 8,77,98,99]

S_JOBSTAT_5.

Were you not working for any of the following reasons during the last week?

Select all that apply.

RESPONSE OPTIONS

1. You were self-employed and not getting paid during this time.
 2. You were on vacation from work or traveling while holding a job.
 3. You were on paid sick leave, personal leave, or other temporary leave.
 4. You were on a job that did not pay but had other benefits.
 5. You were on a sabbatical.
 6. None of the above
-

[SHOW IF S_JOBSTAT_1 = 77,98,99 AND S_JOBSTAT_2 = 77,98,99 AND S_JOBSTAT_5 = 6,77,98,99]

S_JOBSTAT_6.

Without your job status, we cannot continue the survey. If you have questions about the Entrepreneurship in the Population Survey, contact us at EPOP@norc.org or 1-866-611-EPOP. Thank you!

To ask you the right questions, it is important to know your job status.

In the last week, did you work for pay at a job or business?

Working for pay includes being self-employed but not earning income in the last week, freelancers and consultants who work intermittently, active military duty, or on any type of paid or unpaid leave, including vacation.

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF S_JOBSTAT_6=77,98,99]

SUSPEND_AS.

Without your job status, we cannot continue the survey. If you would like to provide your job status and continue the survey, please click the 'Previous' button below and select a response for the last question. If you have questions about the Entrepreneurship in the Population Survey, contact us at EPOP@norc.org or 1-866-611-EPOP.

IF R CLICKS CONTINUE BUTTON AND S_JOBSTAT_6=77,98,99, SET QUAL=2 AND GO TO TERMSORRY.

COMPUTE WORKING STATUS

COMPUTE DOV_WORKING (THIS SETS THE CURRENTLY WORKING FLAG TO YES)

IF S_JOBSTAT_1 = 1
OR S_JOBSTAT_2 = 1
OR ANY(S_JOBSTAT_5_1 – S_JOBSTAT_5_5 = 1)
OR S_JOBSTAT_6 = 1 DOV_WORKING = 1.
ELSE DOV_WORKING = 0.

[SHOW IF DOV_WORKING = 1]
S_JOB_1.

Which one of the following best describes your main job/work arrangement in the last week?

If you had more than one job or work arrangement, report on the one for which you worked the most hours.

RESPONSE OPTIONS

I AM SELF-EMPLOYED or a BUSINESS OWNER

1. An owner of a business, professional practice, or farm (*excluding consultant, freelancer, and independent contractor work*)
2. A self-employed consultant, freelancer, or independent contractor (*you may receive a Form 1099 or be paid informally off the books*)

I WORK FOR A COMPANY or ORGANIZATION OWNED or RUN BY SOMEONE ELSE

1. A for-profit company or organization
2. A non-profit company or organization

I WORK FOR THE GOVERNMENT

3. A local government (*such as a city, county, school district*)
 4. A state government (*including state colleges*)
 5. The U.S. military service, active duty, or Commissioned Corps
 6. The U.S. government (*as a civilian employee*)
 7. A non-U.S. government
-

[SHOW IF S_JOB_1 = 2,3,4]
S_GIGCHECK_1.

Some people earn money through short, paid tasks or jobs online or in-person that are conducted through companies that coordinate payment for the service. This is sometimes referred to as “gig work.”

Is your main job or work arrangement gig work?

These tasks might include driving for Uber or Lyft, selling goods through Etsy, completing online tasks on Mechanical Turk, providing graphic design, music, or other services via Fiverr or Upwork, or other activities.

[HOVER TEXT ON “other activities”:

- App-based food delivery
- Babysitting, childcare services, dog walking and/or house sitting
- Disabled adult and/or elder care services
- Providing personal services to individuals
- Renting out property, such as your car, your phone, your place of residence, or other items]

RESPONSE OPTIONS

1. Yes
 2. No
 77. Unsure
-

[SHOW IF DOV_WORKING = 1]
S_PAIDJOB_1.

In addition to your main job/work arrangement you just described, in the last week did you work for pay at a second job (or business), including part-time, evening, or weekend work?

[HOVER TEXT: If you have multiple jobs in addition to your main job, report on the additional job for which you worked the most hours.]

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF S_PAIDJOB_1 = 1]
S_JOB_2.

Which one of the following best describes your second job/work arrangement over the last week?

RESPONSE OPTIONS

I AM SELF-EMPLOYED or a BUSINESS OWNER

1. An owner of a business, professional practice, or farm (*excluding consultant, freelancer, and independent contractor work*)
2. A self-employed consultant, freelancer, or independent contractor (*you may receive a Form 1099 or be paid informally off the books*)

I WORK FOR A COMPANY or ORGANIZATION OWNED or RUN BY SOMEONE ELSE

1. A for-profit company or organization
2. A non-profit company or organization

I WORK FOR THE GOVERNMENT

3. A local government (*such as a city, county, school district*)
4. A state government (*including state colleges*)
5. The U.S. military service, active duty, or Commissioned Corps
6. The U.S. government (*as a civilian employee*)
7. A non-U.S. government

[SHOW IF S_JOB_2 = 2,3,4]
S_GIGCHECK_2.

Some people earn money through short, paid tasks or jobs online or in-person that are conducted through companies that coordinate payment for the service. This is sometimes referred to as “gig work.”

Is your second job/work arrangement gig work?

These tasks might include driving for Uber or Lyft, selling goods through Etsy, completing online tasks on Mechanical Turk, providing graphic design, music, or other services via Fiverr or Upwork, or other activities.

[HOVER TEXT ON “other activities”:

- App-based food delivery
- Babysitting, childcare services, dog walking and/or house sitting
- Disabled adult and/or elder care services
- Providing personal services to individuals
- Renting out property, such as your car, your phone, your place of residence, or other items]

RESPONSE OPTIONS

1. Yes
2. No
77. Unsure

[SHOW IF S_JOB_1 = 3,4,5,6,7,8,9,77,98,99,MISSING AND S_JOB_2 = 3,4,5,6,7,8,9,77,98,99,MISSING]
S_FORMBIZ_1.

Have you ever owned a business, professional practice, or farm (*excluding consultant, freelancer, and independent contractor work*)?

RESPONSE OPTIONS

1. Yes
2. No

[SHOW IF (S_JOB_1 = 2 AND S_JOB_2=2,3,4,5,6,7,8,9,77,98,99,MISSING) OR (S_JOB_2 = 2 AND S_JOB_1 = 2,3,4,5,6,7,8,9,77,98,99,MISSING)]
S_FORMBIZ_2.

You reported you are currently working as a self-employed consultant, freelancer, or independent contractor.

Outside of this work activity, have you ever owned a business, professional practice, or farm (excluding consultant, freelancer, and independent contractor work)?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF S_JOB_1 = 1 OR S_JOB_2 = 1]
S_ADDBIZ_1.

You reported you currently own [IF S_JOB_1 = 1 & S_JOB_2 = 1: two businesses, professional practices, or farms /ELSE: a business, professional practice, or farm].

Outside of [IF S_JOB_1 = 1 & S_JOB_2 = 1: these businesses /ELSE: this business], do you currently own any other businesses, professional practices, or farms (excluding consultant, freelancer, and independent contractor work)?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF S_ADDBIZ_1 = 1]
S_ADDBIZ_2.

How many total businesses, professional practices, or farms do you own?

RESPONSE OPTIONS

1. 2
 2. 3
 3. 4
 4. 5 or more
-

[SHOW IF S_JOB_1 = 1 OR S_JOB_2 = 1]
S_ADDBIZ_3.

Outside of the business(es) you currently own, have you ever in the past owned a business, professional practice, or farm that you closed, sold, or left?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF S_FORMBIZ_1 = 1 OR S_FORMBIZ_2 = 1]
S_FORMBIZ_STAT_1.

Do you still own this business, professional practice, or farm?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF S_FORMBIZ_STAT_1 = 2 OR S_ADDBIZ_3 = 1]
S_FORMBIZ_STAT_2.

In what year did you close, sell, or leave this business, professional practice, or farm?

If you owned more than one, please provide the year that you most recently closed, sold, or left a business, professional practice, or farm.

[NUMBOX, Range 1920-2024]

[SHOW IF S_FORMBIZ_STAT_2 = 77,98,99]
S_FORMBIZ_STAT_3.

Approximately how long ago did you close, sell, or leave this business, professional practice, or farm?

If you owned more than one, please refer to the business, professional practice, or farm you most recently closed, sold, or left.

RESPONSE OPTIONS

1. Within the last 5 years
 2. 6 to 10 years ago
 3. 11 to 20 years ago
 4. More than 20 years ago
-

[SHOW IF S_JOB_1 = 1,3,4,5,6,7,8,9,77,98,99,MISSING AND S_JOB_2 = 1,3,4,5,6,7,8,9,77,98,99,MISSING]
S_FORMFREE_1.

Have you ever worked for yourself as a consultant, freelancer, or independent contractor either full-time or part-time (you may have received a Form 1099 or been paid informally off the books)?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF S_JOB_1 = 2 OR S_JOB_2 = 2]
S_ADDFREE_1.

You reported you are currently working [IF S_JOB_1 =2 & S_JOB_2 = 2: in two jobs] as a self-employed consultant, freelancer, or independent contractor.

Outside of this work, do you currently work for yourself in any other consultant, freelancer, or independent contractor roles?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF S_ADDFREE_1 = 1]

S_ADDFREE_2.

How many total consultant, freelancer, or independent contractor jobs do you have?

RESPONSE OPTIONS

1. 2
 2. 3
 3. 4
 4. 5 or more
-

[SHOW IF S_JOB_1 = 2 OR S_JOB_2 = 2]

S_ADDFREE_3.

Outside of your current consultant, freelance, or independent contractor work, did you do any consulting, freelance, or independent contractor work in the past that you no longer do now?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF S_FORMFREE_1 = 1]

S_FORMFREE_STAT_1.

Are you still working for yourself as a consultant, freelancer, or independent contractor either full-time or part-time?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF S_FORMFREE_STAT_1 = 2 OR S_ADDFREE_3 = 1]

S_FORMFREE_STAT_2.

In what year did you stop doing this previous work as a consultant, freelancer, or independent contractor?

[NUMBOX, Range 1920-2024]

[SHOW IF S_FORMFREE_STAT_2 = 77,98,99]

S_FORMFREE_STAT_3.

Approximately how long ago did you stop doing this previous work as a consultant, freelancer, or independent contractor?

If you held more than one position, please refer to the consultant, freelancer, or independent contractor role you most recently stopped.

RESPONSE OPTIONS

1. Within the last 5 years
 2. 6 to 10 years ago
 3. 11 to 20 years ago
 4. More than 20 years ago
-

S_NASCENT_1.

Are you, alone or with others, currently trying to start a new business, professional practice, or farm, including any form of self-employment, consulting, freelancing, or independent contracting, or selling any goods or services to others?

RESPONSE OPTIONS

1. Yes
 2. No
-

S_WITHDRAW_1.

[IF DOV_CUR_ENTR = 1: Outside of your current business, have] [ELSE IF DOV_CUR_FREE = 1: Outside of your current consultant, freelance, or independent contractor work, have] [ELSE IF DOV_FORM_ENTR = 1: Since you closed/ended your last business, have] [ELSE IF DOV_FORM_FREE = 1: Since you stopped working for yourself as a consultant, freelancer, or independent contractor, have] [ELSE: Have] you, alone or with others, ever considered starting a new business, professional practice, or farm, including any form of self-employment, consulting, freelancing, or independent contracting, or selling any goods or services to others but decided to wait or change your mind ?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF DOV_WITHDRAW = 1 AND DOV_CUR_ENTR = 0 AND DOV_FORM_ENTR = 0 AND DOV_CUR_FREE = 0 AND DOV_FORM_FREE = 0 AND DOV_NASCENT = 0]
S_INTEREST_2.

How interested were you in starting your own business, professional practice, or farm, or working for yourself as a consultant, freelancer, or independent contractor?

RESPONSE OPTIONS

1. Not at all interested
2. Slightly interested
3. Somewhat interested
4. Very interested
5. Extremely interested

[SHOW IF (S_GIGCHECK_1=2,77,98,99 OR MISSING(S_GIGCHECK_1)) AND (S_GIGCHECK_2=2,77,98,99 OR MISSING(S_GIGCHECK_2)) S_GIGCHECK_3.

Some people earn money through short, paid tasks or jobs online or in-person that are conducted through companies that coordinate payment for the service. This is sometimes referred to as “gig work.”

[IF DOV_WORKING=1: Outside of the forms of employment you have already mentioned, in/ELSE: In] the last 6 months have you been paid for any gig work?

These tasks might include driving for Uber or Lyft, selling goods through Etsy, completing online tasks on Mechanical Turk, providing graphic design, music, or other services via Fiverr or Upwork, or other activities.

[HOVER TEXT ON “other activities”]:

- App-based food delivery
- Babysitting, childcare services, dog walking and/or house sitting
- Disabled adult and/or elder care services
- Providing personal services to individuals
- Renting out property, such as your car, your phone, your place of residence, or other items]

RESPONSE OPTIONS

1. Yes
2. No
77. Unsure

[SHOW IF DOV_CUR_FREE = 1] S_GIGPLATFORM_1.

Is your consulting, freelance, or independent contract work conducted through a company that coordinates payments or relationships with clients?

RESPONSE OPTIONS

1. Yes
2. No
77. Unsure

[SHOW IF S_GIGPLATFORM_1 = 1 OR S_GIGCHECK_1 = 1 OR S_GIGCHECK_2 = 1 OR S_GIGCHECK_3 = 1] S_GIGPLATFORM_2.

Is the company that coordinates payments or relationships with clients for your [IF DOV_CUR_FREE = 1: consulting, freelance, or independent contract/ELSE: gig] work an online app?

RESPONSE OPTIONS

1. Yes
2. No

77. Unsure

[SHOW IF S_GIGPLATFORM_1 = 1 OR S_GIGCHECK_1 = 1 OR S_GIGCHECK_2 = 1 OR S_GIGCHECK_3 = 1]
S_GIGPLATFORM_3.

What is the name(s) of the company that coordinates payments or relationships with clients for your [IF DOV_CUR_FREE = 1: consulting, freelance, or independent contract/ELSE: gig] work?

[TEXTBOX]

[SHOW IF S_GIGCHECK_1 = 1 OR S_GIGCHECK_2 = 1 OR S_GIGCHECK_3 = 1]
PE_GIGREASON_1.

In the last 6 months, which of the following are the primary reasons why you have engaged in gig work activities?

These activities might include driving for Uber or Lyft, selling goods through Etsy, completing online tasks on Mechanical Turk, providing graphic design, music, or other services via Fiverr or Upwork, or other activities.

[HOVER TEXT ON “other activities”]:

- App-based food delivery
- Babysitting, childcare services, dog walking and/or house sitting
- Disabled adult and/or elder care services
- Providing personal services to individuals
- Renting out property, such as your car, your phone, your place of residence, or other items]

Select all that apply.

RESPONSE OPTIONS

1. To earn money as a primary source of income
 2. To earn extra money to supplement pay from my current employment, or other regular source of income
 3. To earn extra money to supplement my retirement, pension, or disability income
 4. To earn extra money to help family or friends
 5. To earn extra money while I am working to start my own business
 6. To earn extra money while I am making a career transition
 7. To maintain existing employment-related skills
 8. To acquire new employment-related skills
 9. To see what it is like working for myself
 10. To have flexibility in my work schedule
 11. To network/meet people
 12. Just for fun or as a hobby
 13. Other reason, specify: [TEXTBOX]
-

COMPUTE ENTREPRENEURSHIP STATUS

COMPUTE DOV_GIGWORK (SET THE GIG WORKER FLAG)

IF S_GIGCHECK_1 = 1 OR S_GIGCHECK_2 = 1 OR S_GIGCHECK_3 = 1
 DOV_GIGWORK = 1.
ELSE DOV_GIGWORK = 0.

[DISPLAY DOV_GIGWORK]

COMPUTE DOV_GENPOP (SET THE GENERAL POPULATION FLAG)

IF DOV_CUR_ENTR = 0 AND DOV_CUR_FREE = 0
AND DOV_FORM_ENTR = 0 AND DOV_FORM_FREE = 0
AND DOV_NASCENT = 0 AND DOV_WITHDRAW = 0
 DOV_GENPOP = 1.
ELSE DOV_GENPOP = 0.

[DISPLAY DOV_GENPOP]

COMPUTE DOV_GROUP

IF DOV_CUR_ENTR = 1 owner”	DOV_GROUP = 1 “current business
ELSE IF DOV_CUR_FREE = 1 freelancer”	DOV_GROUP = 2 “current
ELSE IF DOV_NASCENT = 1 entrepreneur”	DOV_GROUP = 3 “nascent
ELSE IF DOV_FORM_ENTR = 1 owner”	DOV_GROUP = 4 “former business
ELSE IF DOV_FORM_FREE = 1 freelancer”	DOV_GROUP = 5 “former
ELSE IF DOV_WITHDRAW = 1 entrepreneur”	DOV_GROUP = 6 “withdrawn
ELSE IF DOV_GENPOP = 1	DOV_GROUP = 7 “non-entrepreneur”

<u>DOV_GROUP ASSIGNMENT</u>	<u>Priority</u>
DOV_CUR_ENTR	1
DOV_CUR_FREE	2
DOV_NASCENT	3
DOV_FORM_ENTR	4
DOV_FORM_FREE	5
DOV_WITHDRAW	6
DOV_GENPOP	7

DISPLAY DOV_GROUP

COMPUTE DOV_ACTIVITY

IF DOV_GROUP = 1 OR 4
business”

IF DOV_GROUP = 2 OR 5

IF DOV_GROUP = 3 OR 6
ELSE DOV_ACTIVITY = “”.

DOV_ACTIVITY = 1 “owning your own

DOV_ACTIVITY = 2 “working for yourself as
a consultant, freelancer or independent
contractor”

DOV_ACTIVITY = 3 “working for yourself”

COMPUTE DOV_JOB

IF DOV_GROUP = 1 DOV_JOB = “a current business owner”

IF DOV_GROUP = 2 DOV_JOB = “a current consultant, freelancer, or independent contractor”

IF DOV_GROUP = 3 DOV_JOB = “an aspiring business owner”

IF DOV_GROUP = 4 DOV_JOB = “a former business owner”

IF DOV_GROUP = 5 DOV_JOB = “a former consultant, freelancer, or independent contractor”

IF DOV_GROUP = 6 DOV_JOB = “a former business planner”

IF DOV_GROUP=7 DOV_JOB=GEN POP (NO INSERT TEXT)

PURSUING ENTREPRENEURSHIP: SECTION 1 QUESTIONS

[SHOW IF DOV_GROUP <> 4,5, OR 7]
DISPLAY_PE.

You said that you are [INSERT DOV_JOB]. This first set of questions will focus on the steps you took or have taken to pursue this type of work.

[SHOW IF DOV_GROUP <> 4,5, OR 7]
PE_EMPSTAT_1.

When you first started pursuing the idea of [INSERT DOV_ACTIVITY], what was your employment status?

RESPONSE OPTIONS

1. Employed
 2. Not employed
-

[SHOW IF PE_EMPSTAT_1 = 2]
PE_EMPSTAT_2.

What were your reasons for not working when you first started pursuing the idea of [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Retired
 2. On layoff from a job
 3. Student
 4. Family responsibilities
 5. Chronic illness or permanent disability
 6. Suitable job not available
 7. Did not need or want to work
 8. None of the above
-

[SHOW IF DOV_GROUP <> 4,5, OR 7]

PE_REASONS_1.

How important to you were each of the following reasons for pursuing [INSERT DOV_ACTIVITY]?

GRID ITEMS

1. Wanted to be my own boss
2. Flexible hours
3. Balance work and family
4. Opportunity for greater income
5. Ability to supplement my income from my job
6. Best avenue for my ideas/goods/services
7. Unable to find employment
8. Did not feel valued by my place of employment
9. Did not feel that there were adequate opportunities to advance in my career
10. Did not feel like I was being paid fairly given my skills in the labor market
11. Working for someone didn't appeal to me
12. Always wanted to start my own business
13. An entrepreneurial friend or family member was a role model
14. Wanted to carry on the family business
15. Wanted to help and/or become more involved in my community

RESPONSE OPTIONS

1. Very important
 2. Somewhat important
 3. Not important
-

[SHOW IF DOV_REASON1>1 AND DOV_GROUP=1, 2, 3]

PE_REASONS_2.

You reported the following were very important reasons for pursuing [INSERT DOV_ACTIVITY].

Of these reasons for pursuing [INSERT DOV_ACTIVITY], which is the most important to you?

Select one.

RESPONSE OPTIONS

1. [SHOW IF PE_REASONS_11 = 1] Wanted to be my own boss
2. [SHOW IF PE_REASONS_12 = 1] Flexible hours
3. [SHOW IF PE_REASONS_13 = 1] Balance work and family

4. [SHOW IF PE_REASONS_14 = 1] Opportunity for greater income
5. [SHOW IF PE_REASONS_15 = 1] Ability to supplement my income from my job
6. [SHOW IF PE_REASONS_16 = 1] Best avenue for my ideas/goods/services
7. [SHOW IF PE_REASONS_17 = 1] Unable to find employment
8. [SHOW IF PE_REASONS_18 = 1] Did not feel valued by my place of employment
9. [SHOW IF PE_REASONS_19 = 1] Did not feel that there were adequate opportunities to advance in my career
10. [SHOW IF PE_REASONS_110 = 1] Did not feel like I was being paid fairly given my skills in the labor market
11. [SHOW IF PE_REASONS_111 = 1] Working for someone didn't appeal to me
12. [SHOW IF PE_REASONS_112 = 1] Always wanted to start my own business
13. [SHOW IF PE_REASONS_113 = 1] An entrepreneurial friend or family member was a role model
14. [SHOW IF PE_REASONS_114 = 1] Wanted to carry on the family business
15. [SHOW IF PE_REASONS_115 = 1] Wanted to help and/or become more involved in my community

[SHOW IF DOV_REASON1>2 AND ANY(PE_REASON_2_1 - PE_REASON_2_15 = 1)]
PE_REASONS_3.

Of the remaining very important reasons for pursuing [INSERT DOV_ACTIVITY], which was the second most important to you?

Select one.

RESPONSE OPTIONS

1. [SHOW IF PE_REASONS_11 = 1] Wanted to be my own boss
2. [SHOW IF PE_REASONS_12 = 1] Flexible hours
3. [SHOW IF PE_REASONS_13 = 1] Balance work and family
4. [SHOW IF PE_REASONS_14 = 1] Opportunity for greater income
5. [SHOW IF PE_REASONS_15 = 1] Ability to supplement my income from my job
6. [SHOW IF PE_REASONS_16 = 1] Best avenue for my ideas/goods/services
7. [SHOW IF PE_REASONS_17 = 1] Unable to find employment
8. [SHOW IF PE_REASONS_18 = 1] Did not feel valued by my place of employment
9. [SHOW IF PE_REASONS_19 = 1] Did not feel that there were adequate opportunities to advance in my career
10. [SHOW IF PE_REASONS_110 = 1] Did not feel like I was being paid fairly given my skills in the labor market
11. [SHOW IF PE_REASONS_111 = 1] Working for someone didn't appeal to me
12. [SHOW IF PE_REASONS_112 = 1] Always wanted to start my own business
13. [SHOW IF PE_REASONS_113 = 1] An entrepreneurial friend or family member was a role model
14. [SHOW IF PE_REASONS_114 = 1] Wanted to carry on the family business
15. [SHOW IF PE_REASONS_115 = 1] Wanted to help and/or become more involved in my community

[SHOW IF DOV_GROUP = 1,2,3,4,5,6]
PE_MOTIVE_1.

To what extent do the following statements reflect the reasons you [IF DOV_GROUP = 1,2,4,5: started/IF DOV_GROUP = 3: want to start/ELSE: wanted to start] [INSERT DOV_ACTIVITY]. You can strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree.

GRID ITEMS

- A. To make a difference in the world
- B. To build great wealth or a very high income
- C. To continue a family tradition
- D. To earn a living because jobs are scarce

RESPONSE OPTIONS

1. Strongly agree
 2. Somewhat agree
 3. Neither agree nor disagree
 4. Somewhat disagree
 5. Strongly disagree
-

[SHOW IF DOV_GROUP <> 4,5, OR 7]

ENTR_EXPERIENCE_1.

[IF DOV_GROUP = 1,2: Is your current work as [INSERT DOV_JOB] similar to work you did in prior employment?] [IF DOV_GROUP = 3,6: Is the work related to your [IF DOV_GROUP = 6: former] business idea similar to work you are doing now or in prior employment?]

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF DOV_GROUP <> 4,5, OR 7]

ENTR_EXPERIENCE_2.

[IF DOV_GROUP = 1,2: Before you started [INSERT DOV_ACTIVITY], did you have any prior experience starting and/or operating this same type of business?] [IF DOV_GROUP = 3,6: Do you have any prior experience starting and/or operating a business similar to your [IF DOV_GROUP = 6: former] business idea?]

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF ENTR_EXPERIENCE_2 = 1]

ENTR_EXPERIENCE_3.

[IF DOV_GROUP = 1,2: Before you started [INSERT DOV_ACTIVITY], how many years of experience did you have starting and/or operating this same type of business?] [IF DOV_GROUP = 3,6: How many years of experience do you have starting and/or operating a business similar to your [IF DOV_GROUP = 6: former] business idea?]

RESPONSE OPTIONS

1. 1-4 years
2. 5-9 years
3. 10-14 years
4. 15-19 years
5. 20+ years

PURSUING ENTREPRENEURSHIP: SECTION 2 QUESTIONS

[SHOW IF DOV_GROUP <> 4,5, OR 7]
DISPLAY_PE_STEPS.

The next few questions ask about different steps you may have taken to pursue or develop your business or working for yourself.

[SHOW IF DOV_GROUP <> 4,5, OR 7]
PE_STEPS_1.

Which of the following networking steps did you (or you and your co-developers/collaborators) take to pursue [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Discussed the idea with a friend, work colleague, classmate, or acquaintance
 2. Discussed the idea with a family member
 3. Identified and worked with a mentor(s)
 4. Networking with experts, colleagues, or acquaintances in the field
 5. None of the above
-

[SHOW IF DOV_GROUP <> 4,5, OR 7]
PE_STEPS_2.

Which of the following technical or market research steps did you (or you and your co-developers/collaborators) take to pursue [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Consulted established business leaders in the industry on the idea or market
 2. Sought out professional advice (*such as from a lawyer, accountant, or another professional related to the operation of a business*)
 3. Researched the market or considered how potential customers or other firms might respond if you launched the business
 4. Learned about or applied for patents, copyrights, or trademarks to protect the business idea
 5. Made a prototype
 6. Tested the market and/or collected feedback from customers
 7. None of the above
-

[SHOW IF DOV_GROUP <> 4,5, OR 7]
PE_STEPS_3.

Which of the following business development steps did you (or you and your co-developers/collaborators) take with business support organizations to pursue [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Attended trainings, workshops, or webinars relating to starting and operating a business
 2. Applied to a support program for new business
 3. None of the above
-

[SHOW IF DOV_GROUP <> 4,5, OR 7]
PE_STEPS_4.

Which of the following business financing steps did you (or you and your co-developers/collaborators) take to pursue [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Explored financing options with a bank, investors, or grant program
 2. Applied for or requested financing with a bank, investors, or a grant program
 3. Had conversations with acquaintances, friends, and family about potentially funding the business
 4. Put forward my own capital
 5. None of the above
-

[SHOW IF DOV_GROUP <> 4,5, OR 7]
PE_STEPS_5.

Which of the following organizational planning steps did you (or you and your co-developers/collaborators) take to pursue [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Created spreadsheets, financial models, or other analyses to determine feasibility
 2. Created a website for the business
 3. Created a social media presence for the business
 4. Registered the business for a tax ID
 5. Wrote a business plan
 6. Created a pitch deck, executive summary, or other promotional materials
 7. None of the above
-

[SHOW IF DOV_GROUP <> 4,5, OR 7]
PE_STEPS_6.

Which of the following staffing and growth steps did you (or you and your co-developers/collaborators) take to pursue [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Found a first customer or client
 2. Made a sale or provided the product/service on a pilot basis
 3. Hired an employee (non-cofounder)
 4. Quit your job to devote more time to work on launching the business
 5. None of the above
-

[SHOW IF DOV_GROUP <> 4,5, OR 7]
PE_STEPS_7.

Besides the steps already discussed, did you (or you and your co-developers/collaborators) take any other steps to pursue [INSERT DOV_ACTIVITY]?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF PE_STEPS_7 = 1]
PE_STEPS_8.

What other steps did you (or you and your co-developers/collaborators) take to pursue [INSERT DOV_ACTIVITY]?

[TEXTBOX]

[SHOW IF PE_STEPS_1_5=1 OR PE_STEPS_2_7=1 OR PE_STEPS_3_3=1 OR
PE_STEPS_4_5=1 OR PE_STEPS_5_7=1 OR PE_STEPS_6_5=1]
PE_STEPS_REASONS.

You indicated that you took none of the following types of steps. For each of the following, what is the primary reason that you did not engage in this type of step?

GRID ITEMS

- A. [SHOW IF PE_STEPS_1_5=1] Networking steps
- B. [SHOW IF PE_STEPS_2_7=1] Technical or market research steps
- C. [SHOW IF PE_STEPS_3_3=1] Business development steps
- D. [SHOW IF PE_STEPS_4_5=1] Business financing steps
- E. [SHOW IF PE_STEPS_5_7=1] Organizational planning steps
- F. [SHOW IF PE_STEPS_6_5=1] Staffing and growth steps

RESPONSE OPTIONS

1. I did not think I needed to
2. Not necessary for my type of business
3. I did not know where to start/what to do
4. I did not know who to talk to/which resources to consult

5. I did not have any connections to people that could help me
-

PURSUING ENTREPRENEURSHIP: SECTION 3 QUESTIONS

[SHOW IF DOV_GROUP = 3 OR 6]
DISPLAY_CHALLENGES.

Now we want to ask you about some challenges you may or may not have encountered while pursuing [INSERT DOV_ACTIVITY].

[SHOW IF DOV_GROUP = 3 OR 6]
PE_CHALLENGE_1.

Which of the following financial or economic security challenges [IF DOV_GROUP = 3: have you encountered/ELSE: did you encounter] while pursuing [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Not being able to access and/or afford health insurance
 2. Not having access to other employer-provided benefits (*aside from health care*)
 3. Challenges with personal/family finances while the business is getting started
 4. Not having enough savings for start-up costs
 5. Accessing capital to cover start-up costs
 6. Poor credit score or insufficient credit limit
 7. Limited or no relationship with a bank or financial institution
 8. None of the above
-

[SHOW IF DOV_GROUP = 3 or 6]
PE_CHALLENGE_2.

Which of the following business operations challenges [IF DOV_GROUP = 3: have you encountered/ELSE: did you encounter] while pursuing [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Getting the business licensed/registered
 2. Not knowing where to start
 3. Doing my taxes
 4. Navigating local, state, or federal government regulations
 5. Obtaining any relevant insurance related to the work performed
 6. None of the above
-

[SHOW IF DOV_GROUP = 3 OR 6]
PE_CHALLENGE_3.

Which of the following customer reach challenges [IF DOV_GROUP = 3: have you encountered/ELSE: did you encounter] while pursuing [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Finding customers
 2. Setting up the business' digital/online presence
 3. Securing a physical location for the business
 4. None of the above
-

[SHOW IF DOV_GROUP = 3 OR 6]

PE_CHALLENGE_4.

Which of the following resource or support challenges [IF DOV_GROUP = 3: have you encountered/ELSE: did you encounter] while pursuing [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Finding professional support like lawyers, accountants, or tax professionals
 2. Finding support, advice, or finding role models in my network
 3. Getting support from my family or friends
 4. Getting support from my community
 5. Balancing work and family
 6. Major life event (such as a new child, own or family medical issue)
 7. Finding time to pursue the idea
 8. None of the above
-

[SHOW IF DOV_GROUP = 3 OR 6]

PE_CHALLENGE_5.

Which of the following economy or market challenges [IF DOV_GROUP = 3: have you encountered/ELSE: did you encounter] while pursuing [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Finding and retaining qualified employees
 2. Competing against other/larger businesses
 3. Supply chain issues
 4. Unfavorable economy
 5. None of the above
-

[SHOW IF DOV_GROUP = 3 OR 6]

PE_CHALLENGE_6.

Besides the challenges already discussed, have you encountered any other challenges while pursuing [INSERT DOV_ACTIVITY]?

RESPONSE OPTIONS

1. Yes

2. No

[SHOW IF PE_CHALLENGE_6 = 1]
PE_CHALLENGE_7.

What other challenges have you encountered while pursuing [INSERT DOV_ACTIVITY]?

[TEXTBOX]

PURSUING ENTREPRENEURSHIP: SECTION 4 QUESTIONS

[SHOW IF DOV_GROUP <> 7]
DISPLAY_CAPITAL.

Now we would like to ask you some questions about the different sources and amounts of capital you used to start [INSERT DOV_ACTIVITY]. When entering the dollar amounts for each funding source, please give your best estimate.

[SHOW IF DOV_GROUP <> 7]
PE_CAPITAL_1.

Did you use any of the following sources of capital to cover the costs related to pursuing or starting up your business [IF DOV_GROUP = 3 OR 6: idea]?

Select all that apply.

RESPONSE OPTIONS

1. Personal/family savings of owner(s)
 2. Personal/family assets other than savings of owner(s)
 3. Personal/family home equity loan
 4. Personal credit card(s) carrying balances
 5. Business credit card(s) carrying balances
 6. Government-guaranteed business loan from a bank or financial institutions, including SBA-guaranteed loans
 7. Business loan from a bank or financial institution (including online lenders)
 8. Business loan from a federal, state, or local government
 9. Business loan/investment from family/friend(s)
 10. Investment by venture capitalist(s)/angel investor(s)
 11. Crowdfunding (Kickstarter, Indiegogo, etc.)
 12. Grants
 13. Other capital source(s), specify: [TEXTBOX]
 14. None needed
-

[SHOW IF PE_CAPITAL_1 = 6 OR 7]
PE_CAPITAL_INSTITUTION_1.

Which of the following describe the bank or financial institution from which you received capital?

Select all that apply.

RESPONSE OPTIONS

1. Small local bank
2. Large national bank
3. [Financial services company](#)
4. [Online lender/fintech lender](#)
5. Credit union
6. [Finance company](#)
7. [Alternative financial source](#)
8. [Community development financial institution \(CDFI\)](#)
9. Other institution, specify: [TEXTBOX]

[HOVER TEXT on “Financial services company”: Includes nonbanks that provide business financial services (payroll processing, merchant services, accounting, etc.)]

[HOVER TEXT on “Online lender/fintech lender”: Online lenders, also called fintech lenders, are lending institutions that operate solely through a website or app. Examples include Lending Club, OnDeck, CAN Capital, Paypal Working Capital, and Kabbage.]

[HOVER TEXT on “Finance company”: Includes nonbank lenders such as mortgage companies, equipment dealers, insurance companies, and auto finance companies.]

[HOVER TEXT on “Alternative Financial Source”: Examples include payday lender, check cashing, pawn shop, money order/ transmission service, etc.]

[HOVER TEXT on “Community development financial institution (CDFI)”: Community development financial institutions are financial institutions that provide credit and financial services to underserved markets and populations. CDFIs are certified by the CDFI Fund at the US Department of the Treasury.]

[SHOW IF PE_CAPITAL_1 = 12]

PE_GRANT_TYPE_1.

Which of the following describe the source from which you received grant capital?

Select all that apply.

RESPONSE OPTIONS

1. Government source
2. Private institution
3. Non-profit organization
4. Other grant source, specify: [TEXTBOX]

[SHOW IF ANY(PE_CAPITAL_1_1-PE_CAPITAL_1_5=1 OR PE_CAPITAL_INSTITUTION_1_1-PE_CAPITAL_INSTITUTION_1_9=1 OR PE_CAPITAL_1_8-PE_CAPITAL_1_11=1 OR PE_GRANT_TYPE_1_1-PE_GRANT_TYPE_1_4=1 OR PE_CAPITAL_1_13=1)]

PE_CAPITAL_WS.

You reported using the following sources of capital [IF DOV_GROUP = 1, 2, 4, OR 5: to start [INSERT DOV_ACTIVITY]] [IF DOV_GROUP = 3: so far to start up your business idea or working for yourself] [IF DOV_GROUP = 6: when you were trying to start up your business idea or working for yourself]. For each source of capital listed, please type the dollar amount you received from each source. Your best estimate is fine. Please enter in whole dollar amounts.

GRID ITEMS:

CAPITAL SOURCE	AMOUNT RECEIVED
[SHOW IF PE_CAPITAL_1_1 = 1] Personal/family savings of owner(s)	[\$[NUMBOX, 0-30000000]] .00 dollars
[SHOW IF PE_CAPITAL_1_2 = 1] Personal/family assets other than savings of owner(s)	[\$[NUMBOX, 0-30000000]] .00 dollars
[SHOW IF PE_CAPITAL_1_3 = 1] Personal/family home equity loan	[\$[NUMBOX, 0-30000000]] .00 dollars
[SHOW IF PE_CAPITAL_1_4 = 1] Personal credit card(s) carrying balances	[\$[NUMBOX, 0-30000000]] .00 dollars
[SHOW IF PE_CAPITAL_1_5 = 1] Business credit card(s) carrying balances	[\$[NUMBOX, 0-30000000]] .00 dollars
[SHOW IF PE_CAPITAL_INSTITUTION_1_1 = 1] Small local bank	[\$[NUMBOX, 0-30000000]] .00 dollars
[SHOW IF PE_CAPITAL_INSTITUTION_1_2 = 1] Large national bank	[\$[NUMBOX, 0-30000000]] .00 dollars
[SHOW IF PE_CAPITAL_INSTITUTION_1_3 = 1] Financial services company	[\$[NUMBOX, 0-30000000]] .00 dollars
[SHOW IF PE_CAPITAL_INSTITUTION_1_4 = 1] Online lender/fintech lender	[\$[NUMBOX, 0-30000000]] .00 dollars
[SHOW IF PE_CAPITAL_INSTITUTION_1_5 = 1] Credit union	[\$[NUMBOX, 0-30000000]] .00 dollars
[SHOW IF PE_CAPITAL_INSTITUTION_1_6 = 1] Finance company	[\$[NUMBOX, 0-30000000]] .00 dollars
[SHOW IF PE_CAPITAL_INSTITUTION_1_7 = 1] Alternative financial source	[\$[NUMBOX, 0-30000000]] .00 dollars

CAPITAL SOURCE	AMOUNT RECEIVED
[SHOW IF PE_CAPITAL_INSTITUTION_1_8 = 1] Community development financial institution (CDFI)	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF PE_CAPITAL_INSTITUTION_1_9 = 1] [INSERT TEXTBOX RESPONSE FROM PE_CAPITAL_INSTITUTION_1_9_OE]	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF PE_CAPITAL_1_8 = 1] Business loan from a federal, state, or local government	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF PE_CAPITAL_1_9 = 1] Business loan/investment from family/friend(s)	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF PE_CAPITAL_1_10 = 1] Investment by venture capitalist(s)/angel investor(s)	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF PE_CAPITAL_1_11 = 1] Crowdfunding (Kickstarter, Indiegogo, etc.)	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF PE_GRANT_TYPE_1_1 = 1] Government source	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF PE_GRANT_TYPE_1_2 = 1] Private institution	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF PE_GRANT_TYPE_1_3 = 1] Non-profit organization	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF PE_GRANT_TYPE_1_4 = 1] [INSERT TEXTBOX RESPONSE FROM PE_GRANT_TYPE_1_4_OE]	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF PE_CAPITAL_1_13 = 1] [INSERT TEXTBOX RESPONSE FROM PE_CAPITAL_1_13_OE]	[\$[NUMBOX, 0-30000000] .00 dollars
TOTAL	[\$[COMPUTE TOTAL DOLLAR AMOUNT FROM ALL AMOUNT RECEIVED TEXTBOXES] .00 dollars

RESPONSE OPTIONS:
 \$[NUMBOX, 0-30000000] .00 dollars

[SHOW IF PE_CAPITAL_WS_TOTAL IS GREATER THAN \$0 AND AT LEAST ONE ROW
PE_CAPITAL_WS <>77777777,999999998,999999999]
PE_CAPITAL_CONF.

The reported total amount of capital you received [IF DOV_GROUP = 1, 2, 4, OR 5: to start [INSERT DOV_ACTIVITY]] [IF DOV_GROUP = 3: so far to start up your business idea or working for yourself] [IF DOV_GROUP = 6: when you were trying to start up your business idea or working for yourself] was \$[INSERT PE_CAPITAL_WS_TOTAL]. Does that sound about right?

RESPONSE OPTIONS

1. Yes, the total is about the correct amount of capital I received
2. No, the total is more than the amount of capital I received
3. No, the total is less than the amount of capital I received

[SHOW IF ANY(PE_CAPITAL_1_5-PE_CAPITAL_1_13=1) AND AT LEAST ONE
PE_CAPITAL_WS5-PE_CAPITAL_WS23<>0]
PE_CAPITAL_2.

Of the sources of capital you used [IF DOV_GROUP = 1, 2, 4, OR 5: to start [INSERT DOV_ACTIVITY]] [IF DOV_GROUP = 3: so far to start up your business idea or working for yourself] [IF DOV_GROUP = 6: when you were trying to start up your business idea or working for yourself], did you receive as much funding as you requested?

GRID ITEMS

- A. [SHOW IF PE_CAPITAL_1_5 = 1 AND PE_CAPITAL_WS5 > 0 AND < 77777777,999999998,999999999] Business credit card(s) carrying balances
- B. [SHOW IF PE_CAPITAL_1_6 = 1 AND SUM(PE_CAPITAL_WS6-PE_CAPITAL_WS14) > 0 AND < 77777777,999999998,999999999] Government-guaranteed business loan from a bank or financial institutions, including SBA-guaranteed loans
- C. [SHOW IF PE_CAPITAL_1_7 = 1 AND SUM(PE_CAPITAL_WS6-PE_CAPITAL_WS14) > 0 AND < 77777777,999999998,999999999] Business loan from a bank or financial institution (including online lenders)
- D. [SHOW IF PE_CAPITAL_1_8 = 1 AND PE_CAPITAL_WS15 > 0 AND < 77777777,999999998,999999999] Business loan from a federal, state, or local government
- E. [SHOW IF PE_CAPITAL_1_9 = 1 AND PE_CAPITAL_WS16 > 0 AND < 77777777,999999998,999999999] Business loan/investment from family/friend(s)
- F. [SHOW IF PE_CAPITAL_1_10 = 1 AND PE_CAPITAL_WS17 > 0 AND < 77777777,999999998,999999999] Investment by venture capitalist(s)/angel investor(s)
- G. [SHOW IF PE_CAPITAL_1_11 = 1 AND PE_CAPITAL_WS18 > 0 AND < 77777777,999999998,999999999] Crowdfunding (Kickstarter, Indiegogo, etc.)
- H. [SHOW IF PE_CAPITAL_1_12 = 1 AND SUM(PE_CAPITAL_WS19-PE_CAPITAL_WS22) > 0 AND < 77777777,999999998,999999999] Grants
- I. [SHOW IF PE_CAPITAL_1_13 = 1 AND PE_CAPITAL_WS23 <> 0] [INSERT TEXTBOX RESPONSE FROM PE_CAPITAL_1_13_OE]

RESPONSE OPTIONS

1. Yes, I received as much (or more) funding as I requested from this source
2. No, I received less funding than I requested from this source

[SHOW IF DOV_GROUP<>7 AND AND PE_CAPITAL_1_14=0 AND ANY(PE_CAPITAL_1_5 – PE_CAPITAL_1_12 = 0) OR ((PE_CAPITAL_WS5=0) OR (SUM(PE_CAPITAL_WS6- PE_CAPITAL_WS14)=0) OR (PE_CAPITAL_WS15=0) OR (PE_CAPITAL_WS16=0) OR (PE_CAPITAL_WS17=0) OR (PE_CAPITAL_WS18=0) OR (SUM(PE_CAPITAL_WS19- PE_CAPITAL_WS22)=0))] PE_CAPITAL_3.

Of the sources of capital you did not use [IF DOV_GROUP = 1, 2, 4, OR 5: to start [INSERT DOV_ACTIVITY]] [IF DOV_GROUP = 3: so far to start up your business idea or working for yourself] [IF DOV_GROUP = 6: when you were trying to start up your business idea or working for yourself], did you request funding but not receive any?

GRID ITEMS

- A. [SHOW IF PE_CAPITAL_1_5 = 0 OR PE_CAPITAL_WS5=0,77777777,999999998,999999999,MISSING] Business credit card(s) carrying balances
- B. [SHOW IF PE_CAPITAL_1_6 = 0 OR SUM(PE_CAPITAL_WS6 to PE_CAPITAL_WS14)=0 OR ALL(PE_CAPITAL_WS6 to PE_CAPITAL_WS14)=77777777,999999998,999999999,MISSING] Government-guaranteed business loan from a bank or financial institutions, including SBA-guaranteed loans
- C. [SHOW IF PE_CAPITAL_1_7 = 0 OR SUM(PE_CAPITAL_WS6 to PE_CAPITAL_WS14)=0 OR ALL(PE_CAPITAL_WS6 to PE_CAPITAL_WS14)=77777777,999999998,999999999,MISSING] Business loan from a bank or financial institution (including online lenders)
- D. [SHOW IF PE_CAPITAL_1_8 = 0 OR PE_CAPITAL_WS15=0,77777777,999999998,999999999,MISSING] Business loan from a federal, state, or local government
- E. [SHOW IF PE_CAPITAL_1_9 = 0 OR PE_CAPITAL_WS16=0,77777777,999999998,999999999,MISSING] Business loan/investment from family/friend(s)
- F. [SHOW IF PE_CAPITAL_1_10 = 0 OR PE_CAPITAL_WS17=0,77777777,999999998,999999999,MISSING] Investment by venture capitalist(s)/angel investor(s)
- G. [SHOW IF PE_CAPITAL_1_11 = 0 OR PE_CAPITAL_WS18=0,77777777,999999998,999999999,MISSING] Crowdfunding (Kickstarter, Indiegogo, etc.)
- H. [SHOW IF PE_CAPITAL_1_12 = 0 OR SUM(PE_CAPITAL_WS19- PE_CAPITAL_WS22)=0 OR ALL(PE_CAPITAL_WS19- PE_CAPITAL_WS22)=77777777,999999998,999999999,MISSING] Grants

RESPONSE OPTIONS

- 1. Yes, I requested funding from this source but did not receive any
- 2. No, I did not request funding from this source

[SHOW IF DOV_GROUP <> 7 AND ANY(PE_CAPITAL_3_A-PE_CAPITAL_3_F = 1)] PE_CAPITAL_4.

What reason(s) were you given as to why you were declined funding?

Select all that apply.

RESPONSE OPTIONS

1. Low or poor credit score
 2. Limited credit history
 3. History of late/missed payments
 4. Age of business
 5. Personal background
 6. Insufficient collateral
 7. Inadequate business plan
 8. Business was too risky
 9. Business located in an undesirable industry
 10. Business located in an undesirable location
 11. No or limited pre-existing relationship with the bank
 12. I was not given a reason
 13. Other (specify): [TEXTBOX]
-

[SHOW IF DOV_GROUP <> 7 AND (PE_CAPITAL_3_H = 2)]
PE_CAPITAL_5.

You reported not requesting grant funding [IF DOV_GROUP = 1, 2, 4, OR 5: to start [INSERT DOV_ACTIVITY]] [IF DOV_GROUP = 3: so far to start up your business idea or working for yourself] [IF DOV_GROUP = 6: when you were trying to start up your business idea or working for yourself]. Why did you choose not to request grant funding?

Select all that apply.

RESPONSE OPTIONS

1. I did not know about or how to find grant opportunities
 2. I or my business did not qualify for the grant
 3. I thought it was unlikely I would receive the grant
 4. Too difficult to apply for grants
 5. Available grant funding amount was too small
 6. Other (specify): [TEXTBOX]
 7. I did not need grant funding
-

[SHOW IF DOV_GROUP <> 7 AND PE_CAPITAL_3_B = 2 AND PE_CAPITAL_3_C = 2]
PE_CAPITAL_6.

You reported not requesting funding from a bank [IF DOV_GROUP = 1, 2, 4, OR 5: to start [INSERT DOV_ACTIVITY]] [IF DOV_GROUP = 3: so far to start up your business idea or working for yourself] [IF DOV_GROUP = 6: when you were trying to start up your business idea or working for yourself]. Why did you choose not to request funding from a bank?

Select all that apply.

RESPONSE OPTIONS

1. Low or poor credit score
2. Lack of relationship with bank/financial institution

3. Expected unfavorable interest rate or loan repayment terms
 4. Expected to be declined
 5. Other (specify): [TEXTBOX]
 6. I did not need funding from a bank
-

[SHOW IF DOV_GROUP <> 7 AND (PE_CAPITAL_3_A=2 OR PE_CAPITAL_3_D=2 OR PE_CAPITAL_3_E=2 OR PE_CAPITAL_3_F=2 OR PE_CAPITAL_3_G=2)]
PE_CAPITAL_7.

You reported not requesting funding from the following [IF COUNT_PECAP3>1: sources /else: source]:

- [SHOW IF PE_CAPITAL_3_A = 2] Business credit card(s) carrying balances
- [SHOW IF PE_CAPITAL_3_D = 2] Business loan from a federal, state, or local government
- [SHOW IF PE_CAPITAL_3_E = 2] Business loan/investment from family/friend(s)
- [SHOW IF PE_CAPITAL_3_F = 2] Investment by venture capitalist(s)/angel investor(s)
- [SHOW IF PE_CAPITAL_3_G = 2] Crowdfunding (Kickstarter, Indiegogo, etc.)

Why did you choose not to request funding from [IF COUNT_PECAP3>1: these sources /else: this source] [IF DOV_GROUP = 1, 2, 4, OR 5: to start [INSERT DOV_ACTIVITY]] [IF DOV_GROUP = 3: so far to start up your business idea or working for yourself] [IF DOV_GROUP = 6: when you were trying to start up your business idea or working for yourself]?

Select all that apply.

RESPONSE OPTIONS

1. Low or poor credit score
 2. Lack of relationship with bank/financial institution
 3. Expected unfavorable interest rate or loan repayment terms
 4. Expected to be declined
 5. Other (specify): [TEXTBOX]
 6. I did not need funding from [IF COUNT_PECAP3>1: these sources /else: this source]
-

[SHOW IF DOV_GROUP = 6]
PE_STOPREASON_1.

What were the primary factors that contributed to your decision to stop pursuing working for yourself?

Select all that apply.

RESPONSE OPTIONS, RANDOMIZE

1. Lack of financial resources
2. Lack of time
3. Lost focus, interest, and/or motivation or felt burnt out
4. I needed help, but did not know where to go for support
5. Difficulties with partners or investors
6. Family/friends were not supportive
7. I decided it was too risky

8. Major life event (such as a new child, own or family medical issue)
 9. I decided to take a new job/enter employment
 10. I received a promotion at work
 11. I decided to go back to school
 12. I needed employer-provided health insurance
 13. Other factor, specify: [TEXTBOX]
-

[SHOW IF DOV_REASON2>1]
PE_STOPREASON_2.

You reported the following contributed to your decision to stop pursuing working for yourself.

Of these reasons for stopping your business pursuit, which was the primary reason?

Select one.

RESPONSE OPTIONS:

1. [SHOW IF PE_STOPREASON_1 = 1] Lack of financial resources
 2. [SHOW IF PE_STOPREASON_1 = 2] Lack of time
 3. [SHOW IF PE_STOPREASON_1 = 3] Lost focus, interest, and/or motivation or felt burnt out
 4. [SHOW IF PE_STOPREASON_1 = 4] I needed help, but did not know where to go for support
 5. [SHOW IF PE_STOPREASON_1 = 5] Difficulties with partners or investors
 6. [SHOW IF PE_STOPREASON_1 = 6] Family/friends were not supportive
 7. [SHOW IF PE_STOPREASON_1 = 7] I decided it was too risky
 8. [SHOW IF PE_STOPREASON_1 = 8] Major life event (such as a new child, own or family medical issue)
 9. [SHOW IF PE_STOPREASON_1 = 9] I decided to take a new job/enter employment
 10. [SHOW IF PE_STOPREASON_1 = 10] I received a promotion at work
 11. [SHOW IF PE_STOPREASON_1 = 11] I decided to go back to school
 12. [SHOW IF PE_STOPREASON_1 = 12] I needed employer-provided health insurance
 13. [SHOW IF PE_STOPREASON_1 = 13] [INSERT TEXT FROM PE_STOPREASON_1_13]
-

[SHOW IF DOV_REASON2>2 AND ANY(PE_STOPREASON_2_1 - PE_STOPREASON_2_13 = 1)]

PE_STOPREASON_3

Of the remaining reasons for stopping your business pursuit, which was the second most important reason?

Select one.

[DISPLAY IF NOT SELECTED IN PE_STOPREASON_2]

RESPONSE OPTIONS:

1. [SHOW IF PE_STOPREASON_1 = 1] Lack of financial resources
2. [SHOW IF PE_STOPREASON_1 = 2] Lack of time

3. [SHOW IF PE_STOPREASON_1 = 3] Lost focus, interest, and/or motivation or felt burnt out
 4. [SHOW IF PE_STOPREASON_1 = 4] I needed help, but did not know where to go for support
 5. [SHOW IF PE_STOPREASON_1 = 5] Difficulties with partners or investors
 6. [SHOW IF PE_STOPREASON_1 = 6] Family/friends were not supportive
 7. [SHOW IF PE_STOPREASON_1 = 7] I decided it was too risky
 8. [SHOW IF PE_STOPREASON_1 = 8] Major life event (such as a new child, own or family medical issue)
 9. [SHOW IF PE_STOPREASON_1 = 9] I decided to take a new job/enter employment
 10. [SHOW IF PE_STOPREASON_1 = 10] I received a promotion at work
 11. [SHOW IF PE_STOPREASON_1 = 11] I decided to go back to school
 12. [SHOW IF PE_STOPREASON_1 = 12] I needed employer-provided health insurance
 13. [SHOW IF PE_STOPREASON_1 = 13] [INSERT TEXT FROM PE_STOPREASON_1_13]
-

BUSINESS OPERATIONS: SECTION 1 QUESTIONS

[SHOW IF DOV_GROUP = 1,2,4, OR 5]
DISPLAY_BO.

This next set of questions ask more about [INSERT DOV_ACTIVITY] and the day-to-day operations once you were up and running. If you own more than one business, please focus on the business for which you work the most hours.

[IF DOV_GROUP = 4: If you no longer own your own business, please answer these questions in reference to the last year when your business was in operation.]

[IF DOV_GROUP = 5: If you no longer work for yourself as a consultant, freelancer, or independent contractor, please answer these questions in reference to the last year when you were working as such.]

[SHOW IF DOV_GROUP = 1,2,4, OR 5]
BO_STARTBIZ_1.

In what year did you start [INSERT DOV_ACTIVITY]?

[NUMBOX, RANGE 1920-2024]

[SHOW IF DOV_GROUP = 1 OR 4]
BO_ACQOWN_1.

How did you initially acquire ownership of this business?

RESPONSE OPTIONS

1. Founded or started
 2. Purchased
 3. Inherited
 4. Received transfer of ownership or gift
-

[SHOW IF DOV_GROUP = 1 OR 4]
BO_OWNERSHIP_1.

[IF DOV_GROUP = 1: Is/ELSE: Was] this business owned only by yourself, only by yourself and your spouse, or by yourself and some other people or businesses?

RESPONSE OPTIONS

1. Self only
 2. Self and spouse only
 3. Self and other
-

[SHOW IF BO_OWNERSHIP_1 = 3]
BO_OWNERSHIP_2.

Including yourself, how many total people or other businesses or financial institutions [IF DOV_GROUP = 1: share, ELSE IF DOV_GROUP = 4: shared] ownership of your business?

RESPONSE OPTIONS

1. Two
 2. Three
 3. Four
 4. Five
 5. Six or more
-

[SHOW IF DOV_GROUP = 1 OR 4]
BO_LEGALSTAT_1.

What [IF DOV_GROUP = 1:is/ELSE,was] this business' legal form of organization?

RESPONSE OPTIONS

1. Sole proprietorship, unincorporated
 2. LLC
 3. C-Corporation
 4. S-Corporation
 5. Partnership (*such as a partner in a professional practice*)
 6. Non-profit
 7. Other (*such as trusts, estates, cooperatives with undetermined tax status, unregistered or unlicensed businesses, etc.*)
-

[SHOW IF DOV_GROUP = 1 OR 4]
BO_BIZTYPE_1.

Would you describe this [IF DOV_GROUP = 1 : current/ELSE: former] business as a/an...

RESPONSE OPTIONS

1. Independent business
2. Purchase/takeover of an existing business
3. Franchise
4. Multi-level marketing initiative
5. Other business type, specify: [TEXTBOX]

[SHOW IF DOV_GROUP = 2 OR 5]

BO_CLIENT_1.

[IF DOV_GROUP = 2:Do/ELSE,Did] you work primarily for one client/organization?

RESPONSE OPTIONS

1. Yes, one primary client
 2. No, multiple clients
-

[SHOW IF DOV_GROUP = 1,2,4, OR 5]

BO_WORKHOME_1.

How would you describe the primary location where you [IF DOV_GROUP = 1 OR 2:work/ELSE:worked] as [INSERT DOV_JOB]?

RESPONSE OPTIONS

1. A residence such as a home or garage
 2. A rented or leased space
 3. Space the business purchased
 4. A site where a client is located
 5. Co-working space
 6. A vehicle
 7. Other work location, specify: [TEXTBOX]
-

[SHOW IF DOV_GROUP <> 7]

BO_BIZEMERGE_1.

[IF DOV_GROUP = 6: Even though you decided not to pursue your business idea, where did your idea for your business originate? /ELSE: Which of the following best describes the origin of your work as [INSERT DOV_JOB]?

RESPONSE OPTIONS

1. Your [IF DOV_GROUP = 1 OR 2 OR 4 OR 5:previous/ELSE:current] work activity
 2. A separate business you now own and manage
 3. A hobby or recreational pastime
 4. Academic, scientific, or applied research
 5. An idea from yourself or other member of a start-up team
 6. You inherited the business
 7. Other origin, specify: [TEXTBOX]
-

[SHOW IF DOV_GROUP <> 7]

BO_COLLAB_1.

Did you come up with the idea for your business concept on your own, or were you collaborating with other people?

RESPONSE OPTIONS

1. I came up with it on my own
2. I was working with one other person

3. I was working with several other people

[SHOW IF DOV_GROUP = 1,2,4, OR 5]
BO_ADDFINANCE_1.

At any time since you started your work as [INSERT DOV_JOB], did you apply for or use additional financing?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF BO_ADDFINANCE_1 = 1]
DISPLAY_ADDFINANCE.

Now we would like to ask you some questions about the additional sources and amounts of capital you applied for or used to continue your work as [INSERT DOV_JOB]. Here, we are referring to funding you received after starting your work as [INSERT DOV_JOB]. When entering the dollar amounts for each funding source, please give your best estimate. These amounts should not include startup funding.

[SHOW IF BO_ADDFINANCE_1 = 1]
BO_ADDFINANCE_2.

Did you use any of the following sources of capital for additional financing of your business after start-up?

Select all that apply.

RESPONSE OPTIONS

1. Personal/family home equity loan
 2. Personal credit card(s) carrying balances
 3. Business credit card(s) carrying balances
 4. Government-guaranteed business loan from a bank or financial institutions, including SBA-guaranteed loans
 5. Business loan from a bank or financial institution (including online lenders)
 6. Business loan from a federal, state, or local government
 7. Business loan/investment from family/friend(s)
 8. Investment by venture capitalist(s)/angel investor(s)
 9. Crowdfunding (Kickstarter, Indiegogo, etc.)
 10. Grants
 11. Other capital source(s), specify: [TEXTBOX]
-

[SHOW IF BO_ADDFINANCE_2 = 4 OR 5]
BO_ADDFINANCE_INSTITUTION_1.

Which of the following describe the bank or financial institution from which you received additional capital after start-up?

Select all that apply.

RESPONSE OPTIONS

1. Small local bank
2. Large national bank
3. [Financial services company](#)
4. [Online lender/fintech lender](#)
5. Credit union
6. [Finance company](#)
7. [Alternative financial source](#)
8. [Community development financial institution \(CDFI\)](#)
9. Other institution, specify: [TEXTBOX]

[HOVER TEXT on “Financial services company”: Includes nonbanks that provide business financial services (payroll processing, merchant services, accounting, etc.)]

[HOVER TEXT on “Online lender/fintech lender”: Online lenders, also called fintech lenders, are lending institutions that operate solely through a website or app. Examples include Lending Club, OnDeck, CAN Capital, Paypal Working Capital, and Kabbage.]

[HOVER TEXT on “Finance company”: Includes nonbank lenders such as mortgage companies, equipment dealers, insurance companies, and auto finance companies.]

[HOVER TEXT on “Alternative Financial Source”: Examples include payday lender, check cashing, pawn shop, money order/ transmission service, etc.]

[HOVER TEXT on “Community development financial institution (CDFI)”: Community development financial institutions are financial institutions that provide credit and financial services to underserved markets and populations. CDFIs are certified by the CDFI Fund at the US Department of the Treasury.]

[SHOW IF BO_ADDFINANCE_2 = 10]

BO_GRANT_TYPE_1.

Which of the following describe the source from which you received grant capital after start-up?

Select all that apply.

RESPONSE OPTIONS

1. Government source
2. Private institution
3. Non-profit organization
4. Other grant source, specify: [TEXTBOX]

[SHOW IF ANY(BO_ADDFINANCE_2_1-BO_ADDFINANCE_2_3=1 OR BO_ADDFINANCE_INSTITUTION_1_1-BO_ADDFINANCE_INSTITUTION_1_9=1 OR BO_ADDFINANCE_2_6-BO_ADDFINANCE_2_9=1 OR BO_GRANT_TYPE_1_1-BO_GRANT_TYPE_1_4=1 OR BO_ADDFINANCE_2_11=1)]
BO_ADDFINANCE_WS.

You reported receiving the following sources of additional capital to continue your work as [INSERT DOV_JOB]. For each source of capital listed, please [CAWI: type; CATI: tell me] the dollar amount of the additional funding you received from each source. Your best estimate is fine. Please [CAWI: enter; CATI: tell me] in whole dollar amounts.

GRID ITEMS

CAPITAL SOURCE	AMOUNT RECEIVED
[SHOW IF BO_ADDFINANCE_2_1 = 1] Personal/family home equity loan	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_2_2 = 1] Personal credit card(s) carrying balances	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_2_3 = 1] Business credit card(s) carrying balances	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_INSTITUTION_1_1 = 1] Small local bank	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_INSTITUTION_1_2 = 1] Large national bank	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_INSTITUTION_1_3 = 1] Financial services company	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_INSTITUTION_1_4 = 1] Online lender/fintech lender	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_INSTITUTION_1_5 = 1] Credit union	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_INSTITUTION_1_6 = 1] Finance company	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_INSTITUTION_1_7 = 1] Alternative financial source	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_INSTITUTION_1_8 = 1] Community development financial institution (CDFI)	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_INSTITUTION_1_9 = 1] [INSERT TEXTBOX RESPONSE FROM BO_ADDFINANCE_INSTITUTION_1_9_OE]	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_2_6 = 1] Business loan from a federal, state, or local government	[\$[NUMBOX, 0-30000000] .00 dollars

CAPITAL SOURCE	AMOUNT RECEIVED
[SHOW IF BO_ADDFINANCE_2_7 = 1] Business loan/investment from family/friend(s)	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_2_8 = 1] Investment by venture capitalist(s)/angel investor(s)	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_2_9 = 1] Crowdfunding (Kickstarter, Indiegogo, etc.)	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_GRANT_TYPE_1_1 = 1] Government source	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_GRANT_TYPE_1_2 = 1] Private institution	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_GRANT_TYPE_1_3 = 1] Non-profit organization	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_GRANT_TYPE_1_4 = 1] [INSERT TEXTBOX RESPONSE FROM BO_GRANT_TYPE_1_4_OE]	[\$[NUMBOX, 0-30000000] .00 dollars
[SHOW IF BO_ADDFINANCE_2_11 = 1] [INSERT TEXTBOX RESPONSE FROM BO_ADDFINANCE_2_11_OE]	[\$[NUMBOX, 0-30000000] .00 dollars
TOTAL	[\$[COMPUTE TOTAL DOLLAR AMOUNT FROM ALL AMOUNT RECEIVED TEXTBOXES] .00 dollars

RESPONSE OPTIONS:
 \$[NUMBOX, 0-30000000] .00 dollars

[SHOW IF BO_ADDFINANCE_WS_TOTAL IS GREATER THAN \$0 AND AT LEAST ONE ROW BO_ADDFINANCE_WS <>77777777,999999998,999999999]
 BO_ADDFINANCE_CONF.

The reported total amount of additional capital you received after start-up was \$[INSERT BO_ADDFINANCE_WS_TOTAL]. Does that sound about right?

RESPONSE OPTIONS

1. Yes, the total is about the correct amount of additional capital [CAWI: I; CATI: you] received
2. No, the total is more than the amount of additional capital [CAWI: I; CATI: you] received

3. No, the total is less than the amount of additional capital [CAWI: I; CATI: you] received

IF OPTION 2 OR OPTION 3 IS SELECTED, SHOW TEXT BELOW ON SAME PAGE:

Please click continue and re-enter the correct amount of additional capital you received.

IF BO_ADDFINANCE_CONF=2,3, GO BACK TO BO_ADDFINANCE_WS TO ALLOW R TO UPDATE NUMBOX VALUES

[SHOW IF ANY(BO_ADDFINANCE_2_3 – BO_ADDFINANCE_2_11 = 1) AND AT LEAST ONE BO_ADDFINANCE_WS3-BO_ADDFINANCE_WS21<>0]

BO_ADDFINANCE_3.

Of the sources of capital you used for additional financing after start-up, did you receive as much funding as you requested?

GRID ITEMS

- A. [SHOW IF BO_ADDFINANCE_2_3 = 1 AND BO_ADDFINANCE_WS3 > 0 AND < 777777777,999999998,999999999] Business credit card(s) carrying balances
- B. [SHOW IF BO_ADDFINANCE_2_4 = 1 AND SUM(BO_ADDFINANCE_WS4-BO_ADDFINANCE_WS12) > 0 AND < 777777777,999999998,999999999] Government-guaranteed business loan from a bank or financial institutions, including SBA-guaranteed loans
- C. [SHOW IF BO_ADDFINANCE_2_5 = 1 AND SUM(BO_ADDFINANCE_WS4-BO_ADDFINANCE_WS12) > 0 AND < 777777777,999999998,999999999] Business loan from a bank or financial institution (including online lenders)
- D. [SHOW IF BO_ADDFINANCE_2_6 = 1 AND BO_ADDFINANCE_WS13 > 0 AND < 777777777,999999998,999999999] Business loan from a federal, state, or local government
- E. [SHOW IF BO_ADDFINANCE_2_7 = 1 AND BO_ADDFINANCE_WS14 > 0 AND < 777777777,999999998,999999999] Business loan/investment from family/friend(s)
- F. [SHOW IF BO_ADDFINANCE_2_8 = 1 AND BO_ADDFINANCE_WS15 > 0 AND < 777777777,999999998,999999999] Investment by venture capitalist(s)/angel investor(s)
- G. [SHOW IF BO_ADDFINANCE_2_9 = 1 AND BO_ADDFINANCE_WS16 > 0 AND < 777777777,999999998,999999999] Crowdfunding (Kickstarter, Indiegogo, etc.)
- H. [SHOW IF BO_ADDFINANCE_2_10 = 1 AND SUM(BO_ADDFINANCE_WS17-BO_ADDFINANCE_WS20) > 0 AND < 777777777,999999998,999999999] Grants
- I. [SHOW IF BO_ADDFINANCE_2_11 = 1 AND BO_ADDFINANCE_WS21 > 0 AND < 777777777,999999998,999999999] [INSERT TEXTBOX RESPONSE FROM BO_ADDFINANCE_2_11_OE]

RESPONSE OPTIONS

- 1. Yes, I received as much (or more) funding as I requested from this source
- 2. No, I received less funding than I requested from this source

[SHOW IF BO_ADDFINANCE_1 = 1 AND (ANY(BO_ADDFINANCE_2_3 – BO_ADDFINANCE_2_10 = 0) OR ((BO_ADDFINANCE_WS3=0) OR (SUM(BO_ADDFINANCE_WS4-BO_ADDFINANCE_WS12)=0) OR (BO_ADDFINANCE_WS13=0) OR (BO_ADDFINANCE_WS14=0) OR (BO_ADDFINANCE_WS15=0) OR (BO_ADDFINANCE_WS16=0) OR (SUM(BO_ADDFINANCE_WS17-BO_ADDFINANCE_WS20)=0))))]

BO_ADDFINANCE_4.

Of the sources of capital you did not use for additional financing after start-up, did you apply for or request funding but not receive any?

GRID ITEMS

- A. [SHOW IF BO_ADDFINANCE_2_3 = 0 OR BO_ADDFINANCE_WS3=0] Business credit card(s) carrying balances
- B. [SHOW IF BO_ADDFINANCE_2_4 = 0 OR SUM(BO_ADDFINANCE_WS4-BO_ADDFINANCE_WS12)=0] Government-guaranteed business loan from a bank or financial institutions, including SBA-guaranteed loans
- C. [SHOW IF BO_ADDFINANCE_2_5 = 0 OR SUM(BO_ADDFINANCE_WS4-BO_ADDFINANCE_WS12)=0] Business loan from a bank or financial institution (including online lenders)
- D. [SHOW IF BO_ADDFINANCE_2_6 = 0 OR BO_ADDFINANCE_WS13=0] Business loan from a federal, state, or local government
- E. [SHOW IF BO_ADDFINANCE_2_7 = 0 OR BO_ADDFINANCE_WS14=0] Business loan/investment from family/friend(s)
- F. [SHOW IF BO_ADDFINANCE_2_8 = 0 OR BO_ADDFINANCE_WS15=0] Investment by venture capitalist(s)/angel investor(s)
- G. [SHOW IF BO_ADDFINANCE_2_9 = 0 OR BO_ADDFINANCE_WS16=0] Crowdfunding (Kickstarter, Indiegogo, etc.)
- H. [SHOW IF BO_ADDFINANCE_2_10 = 0 OR SUM(BO_ADDFINANCE_WS17-BO_ADDFINANCE_WS20)=0] Grants

RESPONSE OPTIONS

- 1. Yes, I requested funding from this source but did not receive any
- 2. No, I did not request funding from this source

[SHOW IF ANY(BO_ADDFINANCE_4_A-BO_ADDFINANCE_4_F= 1)]
BO_ADDFINANCE_5.

What reason(s) were you given as to why you were declined funding?

Select all that apply.

RESPONSE OPTIONS

- 1. Low or poor credit score
- 2. Limited credit history
- 3. History of late/missed payments
- 4. Age of business
- 5. Personal background
- 6. Insufficient collateral
- 7. Inadequate business plan
- 8. Business was too risky
- 9. Business located in an undesirable industry
- 10. Business located in an undesirable location
- 11. No or limited pre-existing relationship with the bank
- 12. I was not given a reason
- 13. Other (specify): [TEXTBOX]

[SHOW IF BO_ADDFINANCE_1 = 1 AND BO_ADDFINANCE_4_H = 2]
BO_ADDFINANCE_6.

You reported not requesting grant funding for additional financing after start-up. Why did you choose not to request grant funding?

Select all that apply.

RESPONSE OPTIONS

1. I did not know about or how to find grant opportunities
2. I or my business did not qualify for the grant
3. I thought it was unlikely I would receive the grant
4. Too difficult to apply for grants
5. Available grant funding amount was too small
6. Other (specify): [TEXTBOX]
7. I did not need grant funding

[SHOW IF BO_ADDFINANCE_1 = 1 AND BO_ADDFINANCE_4_B = 2 AND
BO_ADDFINANCE_4_C = 2]
BO_ADDFINANCE_7.

You reported not requesting funding from a bank for additional financing after start-up. Why did you choose not to request funding from a bank?

Select all that apply.

RESPONSE OPTIONS

1. Low or poor credit score
2. Lack of relationship with bank/financial institution
3. Expected unfavorable interest rate or loan repayment terms
4. Expected to be declined
5. Other (specify): [TEXTBOX]
6. I did not need funding from a bank

[SHOW IF BO_ADDFINANCE_1 = 1 AND (BO_ADDFINANCE_4_A=2 OR
BO_ADDFINANCE_4_D=2 OR BO_ADDFINANCE_4_E=2 OR BO_ADDFINANCE_4_F=2 OR
BO_ADDFINANCE_4_G=2)]
BO_ADDFINANCE_8.

You reported not requesting funding from the following [IF COUNT_BOFN4>1: sources /else: source]:

- [SHOW IF BO_ADDFINANCE_4_A = 2] Business credit card(s) carrying balances
- [SHOW IF BO_ADDFINANCE_4_D = 2] Business loan from a federal, state, or local government
- [SHOW IF BO_ADDFINANCE_4_E = 2] Business loan/investment from family/friend(s)
- [SHOW IF BO_ADDFINANCE_4_F = 2] Investment by venture capitalist(s)/angel investor(s)
- [SHOW IF BO_ADDFINANCE_4_G = 2] Crowdfunding (Kickstarter, Indiegogo, etc.)

Why did you choose not to request funding from [IF COUNT_BOFN4>1: these sources /else: this source] for additional financing after start-up?

Select all that apply.

RESPONSE OPTIONS

1. Low or poor credit score
2. Lack of relationship with bank/financial institution
3. Expected unfavorable interest rate or loan repayment terms
4. Expected to be declined
5. Other (specify): [TEXTBOX]
6. I did not need funding from [IF COUNT_BOFN4>1: these sources /else: this source]

[SHOW IF BO_ADDFINANCE_1 = 1]

BO_ADDFINANCE_REASON.

For what reason(s) did your business seek additional financing after start-up?

Select all that apply.

RESPONSE OPTIONS

1. Meeting current operating expenses (i.e., payroll, accounts payable, rent, etc.)
2. Refinancing or paying down debt
3. Hiring new employees
4. Securing a new location(s) for the business
5. Adopting or developing new technologies
6. Acquiring new/improved equipment
7. Exploring new business relationships
8. Investing in trainings or professional development
9. Other (specify): [TEXTBOX]

BUSINESS OPERATIONS: SECTION 2 QUESTIONS

[SHOW IF DOV_GROUP = 1,2,4, OR 5]

BO_EMPLOYEES_1.

Which of the following types of workers [IF DOV_GROUP = 1 OR 2:are/ELSE:were] used by your business/self-employment? (Do not include yourself or your co-owners.)

Select all that apply.

RESPONSE OPTIONS

1. Full-time paid employees (workers who received a W-2 from this business)
2. Part-time paid employees (workers who received a W-2 from this business)
3. Paid day laborers
4. Temporary staffing obtained from a temporary help service
5. Leased employees from a leasing service or professional employer organization
6. Contractors, subcontractors, independent contractors, or outside consultants (workers who received a 1099 or payment from another company)

7. Unpaid family members
8. Unpaid non-family members, volunteers, or interns
9. Other worker type, specify: [TEXTBOX]
10. There are no workers other than me in this business

[SHOW IF ANY BO_EMPLOYEES_1_1 THROUGH BO_EMPLOYEES_1_9 SELECTED]
BO_NUMEMPLOY_1.

How many of the following types of workers [IF DOV_GROUP = 1 OR 2: are/ELSE: were] used by your business/self-employment? (Do not include yourself or your co-owners.)

Your best estimate is fine.

GRID ITEMS

- A. [SHOW IF BO_EMPLOYEES_1_1=1] Full-time paid employees (workers who received a W-2 from this business)
- B. [SHOW IF BO_EMPLOYEES_1_2=1] Part-time paid employees (workers who received a W-2 from this business)
- C. [SHOW IF BO_EMPLOYEES_1_3=1] Paid day laborers
- D. [SHOW IF BO_EMPLOYEES_1_4=1] Temporary staffing obtained from a temporary help service
- E. [SHOW IF BO_EMPLOYEES_1_5=1] Leased employees from a leasing service or professional employer organization
- F. [SHOW IF BO_EMPLOYEES_1_6=1] Contractors, subcontractors, independent contractors, or outside consultants (workers who received a 1099 or payment from another company)
- G. [SHOW IF BO_EMPLOYEES_1_7=1] Unpaid family members
- H. [SHOW IF BO_EMPLOYEES_1_8=1] Unpaid non-family members, volunteers, or interns
- I. [SHOW IF BO_EMPLOYEES_1_9=1] [TEXTBOX RESPONSE AT BO_EMPLOYEES_1_9]

RESPONSE OPTIONS

1. Number of workers [NUMBOX, RANGE 0-10,000]

COMPUTE DOV_MICROBIZ (THIS SETS THE MICRO BUSINESS FLAG TO YES)

IF DOV_GROUP = 1

AND

(BO_EMPLOYEES_1 = 10 OR (SUM(BO_NUMEMPLOY_1_A : BO_NUMEMPLOY_1_B) < 10

AND SUM(BO_NUMEMPLOY_1_A : BO_NUMEMPLOY_1_B) > 0))

DOV_MICROBIZ = 1.

IF DOV_GROUP=1 AND ANY(BO_EMPLOYEES_1_1 THROUGH BO_EMPLOYEES_1_2 = 1)

AND ALL BO_NUMEMPLOY_1_A THROUGH BO_NUMEMPLOY_1_B = 777777, 999998,

999999,MISSING

DOV_MICROBIZ=0.

IF DOV_GROUP=1 AND BO_EMPLOYEES_1=77,98,99

DOV_MICROBIZ=0.

ELSE DOV_MICROBIZ = 0.

[SHOW IF DOV_MICROBIZ = 1]
BO_IMPACT_1.

Is your business mission-driven, with a focus on environmental sustainability and/or social impact?

RESPONSE OPTIONS

1. Yes
2. No
77. Unsure

[SHOW IF DOV_MICROBIZ = 1 AND BO_IMPACT_1 = 1]
BO_IMPACT_2.

How is your business mission-driven?

Select all that apply.

RESPONSE OPTIONS

1. My business has a social mission (e.g., my business creates economic opportunities for traditionally underserved populations)
2. My business supports a local cause to support my community (e.g., my business donates to community programs)
3. My business cares about environmental sustainability (i.e., my business has taken steps to reduce its emissions or environmental impact)
4. Other (specify): [TEXTBOX]

[SHOW IF DOV_MICROBIZ = 1]
BO_TAX_FILING_1.

How confident do you feel in your ability to maximize tax credits and deductions available to your business? (*Please answer regardless of if you handle tax filing personally or rely on a tax professional.*)

RESPONSE OPTIONS

1. Not at all confident
2. Somewhat confident
3. Very confident
77. Don't know

[SHOW IF DOV_GROUP = 1 OR 2]
BO_WEEKSWK_1.

During the past 12 months (52 weeks), how many weeks did you spend managing or working in this business? Include paid time off and weeks when you worked for a few hours.

Your best estimate is fine.

[NUMBOX, RANGE 0-52]

[SHOW IF DOV_GROUP = 1 OR 2]

BO_HOURSWK_1.

In the past year, what was the average number of hours per week you spent managing or working in your business?

Your best estimate is fine.

[NUMBOX, RANGE 0-99]

[SHOW IF DOV_GROUP = 4 OR 5]

BO_WEEKSWK_2.

In the last year [IF DOV_GROUP = 4: of your business/ELSE: working for yourself], how many weeks did you spend managing or working in your [IF DOV_GROUP = 5: freelance or consulting] business? Include paid time off and weeks when you worked for a few hours.

Your best estimate is fine.

[NUMBOX, RANGE 0-52]

[SHOW IF DOV_GROUP = 4 OR 5]

BO_HOURSWK_2.

In the last year [IF DOV_GROUP = 4:of your business/ELSE: working for yourself], what was the average number of hours per week you spent managing or working in your [IF DOV_GROUP = 5:freelance or consulting] business?

Your best estimate is fine.

[NUMBOX, RANGE 0-99]

[SHOW IF DOV_GROUP = 1 OR 4]

BO_EMPBENEFIT_1.

Which of the following employee benefits [IF DOV_GROUP = 1: are/ELSE: were] paid totally or partly by your business?

Select all that apply.

RESPONSE OPTIONS

1. Health insurance
2. Contributions to retirement plans, including 401(k), Keogh, etc.
3. Profit sharing and/or stock options
4. Paid holidays or vacation
5. Paid sick leave
6. Paid parental or family leave
7. Tuition assistance and/or reimbursement
8. Other benefit, specify: [TEXTBOX]

9. None of the above

[SHOW IF DOV_GROUP = 1,2,4,5]
BO_ONLINE_1.

[IF DOV_GROUP = 1 OR 2: Do/ELSE: Did] you have a website and/or social media presence (such as Facebook, Twitter/X, or Instagram) related to your business?

RESPONSE OPTIONS

1. Yes, website only
 2. Yes, social media only
 3. Yes, both
 4. No
-

[SHOW IF DOV_GROUP = 1,2]
REMOTE_2.

Thinking of your work as [INSERT DOV_JOB], which of the following best describes whether you telecommute or work remotely?

RESPONSE OPTIONS

1. I telecommuted/worked remotely only during the coronavirus pandemic
 2. I telecommute and work in person as needed regardless of the coronavirus pandemic
 3. I always telecommute/work remotely regardless of the coronavirus pandemic
 4. Telecommuting/working remotely does not make sense for my work
-

[SHOW IF DOV_GROUP = 1,2 AND ANY(BO_EMPLOYEES_1_1-BO_EMPLOYEES_1_9 = 1)]
REMOTE_3.

Thinking of your employees, which of the following best describes your firm's current telecommuting or remote work policy?

Telecommuting/working remotely...

RESPONSE OPTIONS

1. Does not make sense for my employees
 2. Is not allowed for my employees
 3. Is allowed for some employees or some portion of the employees' work hours
 4. Is generally allowed and employees decide to work remotely or work in person
 5. Is expected for all employees
-

BUSINESS OPERATIONS: SECTION 3 QUESTIONS

[SHOW IF DOV_GROUP = 1 or 2]
BO_CASH.

How would you describe the current availability of cash on hand for this business, including any financial assistance or loans? Currently, cash on hand will cover:

RESPONSE OPTIONS

1. 1-7 days of business operations
2. 1-2 weeks of business operations
3. 3-4 weeks of business operations
4. 1-2 months of business operations
5. 3 or more months of business operations
6. No cash available for business operations
7. Don't know

[SHOW IF DOV_GROUP = 1 OR 2]

BO_REVENUE_1.

What was the amount of your income or sales and operating revenues, including grants, during 2023 from your work as [INSERT DOV_JOB]?

Your best estimate is fine. Please report whole dollar amounts. If none, report 0.

#[NUMBOX, 0-100,000,000] .00 dollars

[SHOW IF DOV_GROUP = 4 OR 5]

BO_REVENUE_2.

What was the amount of your income or sales and operating revenues, including grants, during the last year you ran your former [IF DOV_GROUP = 4:business/ELSE:self-employed business]?

Your best estimate is fine. Please report whole dollar amounts. If none, report 0.

#[NUMBOX, 0-100,000,000] .00 dollars

[SHOW IF DOV_GROUP = 1,2]

BUSINESS_INTERRUPTIONS_1.

In the last year, did you have any of the following?

Select all that apply.

RESPONSE OPTIONS

1. Domestic supplier delays
2. Foreign supplier delays
3. Difficulty locating alternative domestic suppliers
4. Difficulty locating alternative foreign suppliers
5. Production delays at this business
6. Delays in delivery/shipping to customers
7. Other (Specify): [TEXTBOX]
8. None of the above

[SHOW IF DOV_GROUP = 1,2,4, OR 5]

BO_PLMARGIN_1.

[IF DOV_GROUP = 1 OR 2: In 2023/ELSE: During the last year of your business' operation], did you have profits, losses, or break even?

RESPONSE OPTIONS

1. Profits
 2. Losses
 3. Break even
 4. Not applicable (My business started in 2024)
-

[SHOW IF DOV_GROUP = 1 OR 2]

BO_PRIMARYINC_1.

Does your work as [INSERT DOV_JOB] provide your primary source of household income?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF DOV_GROUP = 4 OR 5]

BO_PRIMARYINC_2.

In the last year of your business' operation, did your work as [INSERT DOV_JOB] provide your primary source of household income?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF DOV_GROUP = 1 OR 2]

BO_GOALS_1.

What would you say your top goal is for the next five years related to work as [INSERT DOV_JOB]?

RESPONSE OPTIONS

1. Grow the business
 2. Maintain the business' current level of operations
 3. Scale back the business' operations
 4. Exit the business (such as close, sell, or transfer ownership)
 5. Other goal, specify: [TEXTBOX]
-

[SHOW IF DOV_GROUP = 1 OR 2]

BO_GOALS_2.

To what extent do you feel that you have access to the support and resources you need in your community to successfully meet your business' goals?

RESPONSE OPTIONS

1. Not at all
2. Somewhat

3. Moderately
 4. Completely
-

BUSINESS OPERATIONS: SECTION 4 QUESTIONS

[SHOW IF DOV_GROUP = 1,2,4, OR 5]
DISPLAY_BO_CHALLENGES.

Now we want to ask you about some challenges you may or may not have encountered while [INSERT DOV_ACTIVITY].

[SHOW IF DOV_GROUP = 1,2,4, OR 5]
BO_CHALLENGE_1.

Which of the following financial or economic security challenges [IF DOV_GROUP = 1 OR 2: are you currently facing /ELSE: did you face in your last year of operation] [INSERT DOV_ACTIVITY])?

Select all that apply.

RESPONSE OPTIONS

1. Not being able to access and/or afford health insurance
 2. Not having access to other employer-provided benefits (*aside from health care*)
 3. Challenges with personal/family finances
 4. Accessing capital to cover business operations
 5. Making rent/mortgage payments on my business location(s)
 6. Decreasing sales
 7. Increasing business or operational costs
 8. None of the above
-

[SHOW IF DOV_GROUP = 1,2,4, OR 5]
BO_CHALLENGE_2.

Which of the following business operations challenges [IF DOV_GROUP = 1 OR 2: are you currently facing /ELSE: did you face in your last year of operation] [INSERT DOV_ACTIVITY])?

Select all that apply.

RESPONSE OPTIONS

1. Maintaining the business' license/registration
 2. Doing my taxes
 3. Navigating local, state, or federal government regulations
 4. None of the above
-

[SHOW IF DOV_GROUP = 1,2,4, OR 5]
BO_CHALLENGE_3.

Which of the following customer reach challenges [IF DOV_GROUP = 1 OR 2: are you currently facing /ELSE: did you face in your last year of operation] [INSERT DOV_ACTIVITY])?

Select all that apply.

RESPONSE OPTIONS

1. Finding customers
 2. Keeping existing customers
 3. Setting up/maintaining the business' digital/online presence
 4. Identifying business opportunities in the market
 5. None of the above
-

[SHOW IF DOV_GROUP = 1,2,4, OR 5]

BO_CHALLENGE_4.

Which of the following resource or support challenges [IF DOV_GROUP = 1 OR 2: are you currently facing /ELSE: did you face in your last year of operation] [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Finding and/or affording professional support like lawyers, accountants, or tax professionals
 2. Finding support, advice, or finding role models in my network
 3. Getting support from my family or friends
 4. Getting support from my community
 5. Balancing work and family
 6. Feeling burnt out, or losing focus, interest, and/or motivation
 7. Major life event (such as a new child, own or family medical issue)
 8. Finding time to devote to the business; not enough time
 9. Growing my network with like-minded entrepreneurs
 10. Accessing educational materials/content related to [INSERT DOV_ACTIVITY]
 11. None of the above
-

[SHOW IF DOV_GROUP = 1,2,4, OR 5]

BO_CHALLENGE_5.

Which of the following economy or market challenges [IF DOV_GROUP = 1 OR 2: are you currently facing /ELSE: did you face in your last year of operation] [INSERT DOV_ACTIVITY]?

Select all that apply.

RESPONSE OPTIONS

1. Finding, affording, and/or retaining qualified employees
 2. Competing against other/larger businesses
 3. Supply chain issues
 4. Decreasing demand for my product or service
 5. Unfavorable economy
 6. Understanding and navigating administrative and/or regulatory requirements related to hiring employees
 7. None of the above
-

[SHOW IF DOV_GROUP = 1,2,4, OR 5]

BO_CHALLENGE_6.

Besides the challenges already discussed, [IF DOV_GROUP = 1 OR 2: are you currently facing any other challenges /ELSE: did you face any other challenges in your last year of operation] [INSERT DOV_ACTIVITY]?

RESPONSE OPTIONS

1. Yes
2. No

[SHOW IF BO_CHALLENGE_6 = 1]

BO_CHALLENGE_7.

What other challenges [IF DOV_GROUP = 1 OR 2: are you currently facing /ELSE: did you face in your last year of operation] [INSERT DOV_ACTIVITY]?

[TEXTBOX]

[SHOW IF ANY(BO_CHALLENGE_1_1 - BO_CHALLENGE_1_7=1) OR ANY(BO_CHALLENGE_2_1 - BO_CHALLENGE_2_3=1) OR ANY(BO_CHALLENGE_3_1 - BO_CHALLENGE_3_4=1) OR ANY(BO_CHALLENGE_4_1 - BO_CHALLENGE_4_10=1) OR ANY(BO_CHALLENGE_5_1 - BO_CHALLENGE_5_6=1)]

BO_CHALLENGE_ADDRESS1.

Among the challenges you reported, did you take any of the following actions to obtain support or help?

Select all that apply.

You reported the following challenges:

- [SHOW IF BO_CHALLENGE_1_1 = 1] Not being able to access and/or afford health insurance
- [SHOW IF BO_CHALLENGE_1_2 = 1] Not having access to other employer-provided benefits (*aside from health care*)
- [SHOW IF BO_CHALLENGE_1_3 = 1] Challenges with personal/family finances
- [SHOW IF BO_CHALLENGE_1_4 = 1] Accessing capital to cover business operations
- [SHOW IF BO_CHALLENGE_1_5 = 1] Making rent/mortgage payments on my business location(s)
- [SHOW IF BO_CHALLENGE_1_6 = 1] Decreasing sales
- [SHOW IF BO_CHALLENGE_1_7 = 1] Increasing business or operational costs
- [SHOW IF BO_CHALLENGE_2_1 = 1] Maintaining the business' license/registration
- [SHOW IF BO_CHALLENGE_2_2 = 1] Doing my taxes
- [SHOW IF BO_CHALLENGE_2_3 = 1] Navigating local, state, or federal government regulations
- [SHOW IF BO_CHALLENGE_3_1 = 1] Finding customers
- [SHOW IF BO_CHALLENGE_3_2 = 1] Keeping existing customers

- [SHOW IF BO_CHALLENGE_3_3 = 1] Setting up/maintaining the business' digital/online presence
- [SHOW IF BO_CHALLENGE_3_4 = 1] Identifying business opportunities in the market
- [SHOW IF BO_CHALLENGE_4_1 = 1] Finding and/or affording professional support like lawyers, accountants, or tax professionals
- [SHOW IF BO_CHALLENGE_4_2 = 1] Finding support, advice, or finding role models in my network
- [SHOW IF BO_CHALLENGE_4_3 = 1] Getting support from my family or friends
- [SHOW IF BO_CHALLENGE_4_4 = 1] Getting support from my community
- [SHOW IF BO_CHALLENGE_4_5 = 1] Balancing work and family
- [SHOW IF BO_CHALLENGE_4_6 = 1] Feeling burnt out, or losing focus, interest, and/or motivation
- [SHOW IF BO_CHALLENGE_4_7 = 1] Major life event (such as a new child, own or family medical issue)
- [SHOW IF BO_CHALLENGE_4_8 = 1] Finding time to devote to the business
- [SHOW IF BO_CHALLENGE_4_9 = 1] Growing my network with like-minded entrepreneurs
- [SHOW IF BO_CHALLENGE_4_10 = 1] Accessing educational materials/content related to [INSERT DOV_ACTIVITY]
- [SHOW IF BO_CHALLENGE_5_1 = 1] Finding, affording, and/or retaining qualified employees
- [SHOW IF BO_CHALLENGE_5_2 = 1] Competing against other/larger businesses
- [SHOW IF BO_CHALLENGE_5_3 = 1] Supply chain issues
- [SHOW IF BO_CHALLENGE_5_4 = 1] Decreasing demand for my product or service
- [SHOW IF BO_CHALLENGE_5_5 = 1] Unfavorable economy
- [SHOW IF BO_CHALLENGE_5_6 = 1] Understanding and navigating administrative and/or regulatory requirements related to hiring employees

RESPONSE OPTIONS

1. Spoke with a friend or family member
2. Worked with a mentor
3. Consulted with industry experts
4. Sought out professional advice from a lawyer, accountant, marketing consultant or other business service provider
5. Attended trainings or workshops on relevant topics
6. Applied to a business support program
7. Other (specify): [TEXTBOX]
8. None of the above

[SHOW IF ((DOV_GROUP = 4 OR 5) AND ANY(BO_CHALLENGE_1_1 - BO_CHALLENGE_1_7 SELECTED) OR (ANY(BO_CHALLENGE_2_1 - BO_CHALLENGE_2_3=1)) OR (ANY(BO_CHALLENGE_3_1 - BO_CHALLENGE_3_4=1) OR ANY(BO_CHALLENGE_4_1 - BO_CHALLENGE_4_10=1)) OR ANY(BO_CHALLENGE_5_1 - BO_CHALLENGE_5_6=1))]

BO_CHALLENGE_END.

Among the challenges you reported, which, if any, of these were among the primary reasons you closed your business or stopped working for yourself as a freelancer, consultant, or independent contractor?

GRID ITEMS

- A. [SHOW IF BO_CHALLENGE_1_1 = 1] Not being able to access and/or afford health insurance
- B. [SHOW IF BO_CHALLENGE_1_2 = 1] Not having access to other employer-provided benefits (*aside from health care*)
- C. [SHOW IF BO_CHALLENGE_1_3 = 1] Challenges with personal/family finances
- D. [SHOW IF BO_CHALLENGE_1_4 = 1] Accessing capital to cover business operations
- E. [SHOW IF BO_CHALLENGE_1_5 = 1] Making rent/mortgage payments on my business location(s)
- F. [SHOW IF BO_CHALLENGE_1_6 = 1] Decreasing sales
- G. [SHOW IF BO_CHALLENGE_1_7 = 1] Increasing business or operational costs
- H. [SHOW IF BO_CHALLENGE_2_1 = 1] Maintaining the business' license/registration
- I. [SHOW IF BO_CHALLENGE_2_2 = 1] Doing my taxes
- J. [SHOW IF BO_CHALLENGE_2_3 = 1] Navigating local, state, or federal government regulations
- K. [SHOW IF BO_CHALLENGE_3_1 = 1] Finding customers
- L. [SHOW IF BO_CHALLENGE_3_2 = 1] Keeping existing customers
- M. [SHOW IF BO_CHALLENGE_3_3 = 1] Setting up/maintaining the business' digital/online presence
- N. [SHOW IF BO_CHALLENGE_3_4 = 1] Identifying business opportunities in the market
- O. [SHOW IF BO_CHALLENGE_4_1 = 1] Finding and/or affording professional support like lawyers, accountants, or tax professionals
- P. [SHOW IF BO_CHALLENGE_4_2 = 1] Finding support, advice, or finding role models in my network
- Q. [SHOW IF BO_CHALLENGE_4_3 = 1] Getting support from my family or friends
- R. [SHOW IF BO_CHALLENGE_4_4 = 1] Getting support from my community
- S. [SHOW IF BO_CHALLENGE_4_5 = 1] Balancing work and family
- T. [SHOW IF BO_CHALLENGE_4_6 = 1] Feeling burnt out, or losing focus, interest, and/or motivation
- U. [SHOW IF BO_CHALLENGE_4_7 = 1] Major life event (such as a new child, own or family medical issue)
- V. [SHOW IF BO_CHALLENGE_4_8 = 1] Finding time to devote to the business
- W. [SHOW IF BO_CHALLENGE_4_9 = 1] Growing my network with like-minded entrepreneurs
- X. [SHOW IF BO_CHALLENGE_4_10 = 1] Accessing educational materials/content related to [INSERT DOV_ACTIVITY]
- Y. [SHOW IF BO_CHALLENGE_5_1 = 1] Finding, affording, and/or retaining qualified employees
- Z. [SHOW IF BO_CHALLENGE_5_2 = 1] Competing against other/larger businesses
- AA. [SHOW IF BO_CHALLENGE_5_3 = 1] Supply chain issues
- BB. [SHOW IF BO_CHALLENGE_5_4 = 1] Decreasing demand for my product or service
- CC. [SHOW IF BO_CHALLENGE_5_5 = 1] Unfavorable economy
- DD. [SHOW IF BO_CHALLENGE_5_6 = 1] Understanding and navigating administrative and/or regulatory requirements related to hiring employees

RESPONSE OPTIONS

1. Yes

2. No

[SHOW IF DOV_REASON3>1 AND DOV_GROUP = 4, 5]
BO_REASONS_1.

You reported the following reasons for closing your business or stopping working for yourself as a consultant, freelancer, or independent contractor.

Of these reasons for closing your business or stopping working for yourself, which was the primary reason?

Select one.

RESPONSE OPTIONS

1. [SHOW IF BO_CHALLENGE_ENDA = 1] Not being able to access and/or afford health insurance
2. [SHOW IF BO_CHALLENGE_ENDB = 1] Not having access to other employer-provided benefits (*aside from health care*)
3. [SHOW IF BO_CHALLENGE_ENDC = 1] Challenges with personal/family finances
4. [SHOW IF BO_CHALLENGE_ENDD = 1] Accessing capital to cover business operations
5. [SHOW IF BO_CHALLENGE_ENDE = 1] Making rent/mortgage payments on my business location(s)
6. [SHOW IF BO_CHALLENGE_ENDF = 1] Decreasing sales
7. [SHOW IF BO_CHALLENGE_ENDG = 1] Increasing business or operational costs
8. [SHOW IF BO_CHALLENGE_ENDH = 1] Maintaining the business' license/registration
9. [SHOW IF BO_CHALLENGE_ENDI = 1] Doing my taxes
10. [SHOW IF BO_CHALLENGE_ENDJ = 1] Navigating local, state, or federal government regulations
11. [SHOW IF BO_CHALLENGE_ENDK = 1] Finding customers
12. [SHOW IF BO_CHALLENGE_ENDL = 1] Keeping existing customers
13. [SHOW IF BO_CHALLENGE_ENDM = 1] Setting up/maintaining the business' digital/online presence
14. [SHOW IF BO_CHALLENGE_ENDN = 1] Identifying business opportunities in the market
15. [SHOW IF BO_CHALLENGE_ENDO = 1] Finding and/or affording professional support like lawyers, accountants, or tax professionals
16. [SHOW IF BO_CHALLENGE_ENDP = 1] Finding support, advice, or finding role models in my network
17. [SHOW IF BO_CHALLENGE_ENDQ = 1] Getting support from my family or friends
18. [SHOW IF BO_CHALLENGE_ENDR = 1] Getting support from my community
19. [SHOW IF BO_CHALLENGE_ENDS = 1] Balancing work and family
20. [SHOW IF BO_CHALLENGE_ENDT = 1] Feeling burnt out, or losing focus, interest, and/or motivation
21. [SHOW IF BO_CHALLENGE_ENDU = 1] Major life event (such as a new child, own or family medical issue)
22. [SHOW IF BO_CHALLENGE_ENDV = 1] Finding time to devote to the business
23. [SHOW IF BO_CHALLENGE_ENDW = 1] Growing my network with like-minded entrepreneurs
24. [SHOW IF BO_CHALLENGE_ENDX = 1] Accessing educational materials/content related to [INSERT DOV_ACTIVITY]

25. [SHOW IF BO_CHALLENGE_ENDY = 1] Finding, affording, and/or retaining qualified employees
26. [SHOW IF BO_CHALLENGE_ENDZ = 1] Competing against other/larger businesses
27. [SHOW IF BO_CHALLENGE_ENDAA = 1] Supply chain issues
28. [SHOW IF BO_CHALLENGE_ENDBB = 1] Decreasing demand for my product or service
29. [SHOW IF BO_CHALLENGE_ENDCC = 1] Unfavorable economy
30. [SHOW IF BO_CHALLENGE_ENDDD = 1] Understanding and navigating administrative and/or regulatory requirements related to hiring employees

[SHOW IF DOV_REASON3>2 AND ANY(BO_REASONS_1_1 – BO_REASONS_1_30 = 1) AND DOV_GROUP = 4, 5]
BO_REASONS_2.

Of the remaining reasons for closing your business or stopping working for yourself as a consultant, freelancer, or independent contractor, which was the second most important reason?

Select one.

RESPONSE OPTIONS

1. [SHOW IF BO_CHALLENGE_ENDA = 1] Not being able to access and/or afford health insurance
2. [SHOW IF BO_CHALLENGE_ENDB = 1] Not having access to other employer-provided benefits (*aside from health care*)
3. [SHOW IF BO_CHALLENGE_ENDC = 1] Challenges with personal/family finances
4. [SHOW IF BO_CHALLENGE_ENDD = 1] Accessing capital to cover business operations
5. [SHOW IF BO_CHALLENGE_ENDE = 1] Making rent/mortgage payments on my business location(s)
6. [SHOW IF BO_CHALLENGE_ENDF = 1] Decreasing sales
7. [SHOW IF BO_CHALLENGE_ENDG = 1] Increasing business or operational costs
8. [SHOW IF BO_CHALLENGE_ENDH = 1] Maintaining the business' license/registration
9. [SHOW IF BO_CHALLENGE_ENDI = 1] Doing my taxes
10. [SHOW IF BO_CHALLENGE_ENDJ = 1] Navigating local, state, or federal government regulations
11. [SHOW IF BO_CHALLENGE_ENDK = 1] Finding customers
12. [SHOW IF BO_CHALLENGE_ENDL = 1] Keeping existing customers
13. [SHOW IF BO_CHALLENGE_ENDM = 1] Setting up/maintaining the business' digital/online presence
14. [SHOW IF BO_CHALLENGE_ENDN = 1] Identifying business opportunities in the market
15. [SHOW IF BO_CHALLENGE_ENDO = 1] Finding and/or affording professional support like lawyers, accountants, or tax professionals
16. [SHOW IF BO_CHALLENGE_ENDP = 1] Finding support, advice, or finding role models in my network
17. [SHOW IF BO_CHALLENGE_ENDQ = 1] Getting support from my family or friends
18. [SHOW IF BO_CHALLENGE_ENDR = 1] Getting support from my community
19. [SHOW IF BO_CHALLENGE_ENDS = 1] Balancing work and family

20. [SHOW IF BO_CHALLENGE_ENDT = 1] Feeling burnt out, or losing focus, interest, and/or motivation
 21. [SHOW IF BO_CHALLENGE_ENDU = 1] Major life event (such as a new child, own or family medical issue)
 22. [SHOW IF BO_CHALLENGE_ENDV = 1] Finding time to devote to the business
 23. [SHOW IF BO_CHALLENGE_ENDW = 1] Growing my network with like-minded entrepreneurs
 24. [SHOW IF BO_CHALLENGE_ENDX = 1] Accessing educational materials/content related to [INSERT DOV_ACTIVITY]
 25. [SHOW IF BO_CHALLENGE_ENDY = 1] Finding, affording, and/or retaining qualified employees
 26. [SHOW IF BO_CHALLENGE_ENDZ = 1] Competing against other/larger businesses
 27. [SHOW IF BO_CHALLENGE_ENDAA = 1] Supply chain issues
 28. [SHOW IF BO_CHALLENGE_ENDBB = 1] Decreasing demand for my product or service
 29. [SHOW IF BO_CHALLENGE_ENDCC = 1] Unfavorable economy
 30. [SHOW IF BO_CHALLENGE_ENDDD = 1] Understanding and navigating administrative and/or regulatory requirements related to hiring employees
-

[SHOW IF DOV_MICROBIZ = 1]
DISPLAY_BO_SERVICES.

Now we want to ask you some questions to help us understand the local availability of services and what supports you want that you may not have access to.

[SHOW IF DOV_MICROBIZ = 1]
BO_SERVICES_1.

Which of the following business support services do you have access to in your local community?

[HOVER TEXT ON “access”: Access refers to the availability or opportunity for you to utilize or benefit from services available at no cost, for a flexible fee, or at a discounted rate.]

Select all that apply.

RESPONSE OPTIONS

1. Finding, affording, and/or retaining qualified employees
2. Competing against other/larger businesses
3. Networking opportunities
4. Mentorship
5. Consultation with industry experts
6. Professional advice from business experts (e.g., attorneys, accountants, marketing consultants, or other business service provider)
7. Personalized, one-on-one business coaching
8. Trainings or workshops to help develop key areas of your business
9. Business cohort programs [HOVER TEXT: Group-based training programs designed to help you launch or grow your business]
10. Services run through Small Business Development Centers (SBDCs)
11. Services run through local educational institutions
12. Other (specify): [TEXTBOX]

[SHOW IF DOV_MICROBIZ = 1 AND COUNT(BO_SERVICES_1_1-BO_SERVICES_1_11 = 0)>1 AND BO_SERVICES_1<>77,98,99]

BO_SERVICES_2.

You reported not having access to the following business support services. Which of the following business support services would you most like to have access to in your local community?

[HOVER TEXT ON “access”: Access refers to the availability or opportunity for you to utilize or benefit from services available at no cost, for a flexible fee, or at a discounted rate.]

RESPONSE OPTIONS

1. [SHOW IF BO_SERVICES_1_1 = 0] Finding, affording, and/or retaining qualified employees
2. [SHOW IF BO_SERVICES_1_2 = 0] Competing against other/larger businesses
3. [SHOW IF BO_SERVICES_1_3 = 0] Networking opportunities
4. [SHOW IF BO_SERVICES_1_4 = 0] Mentorship
5. [SHOW IF BO_SERVICES_1_5 = 0] Consultation with industry experts
6. [SHOW IF BO_SERVICES_1_6 = 0] Professional advice from business experts (e.g., attorneys, accountants, marketing consultants, or other business service provider)
7. [SHOW IF BO_SERVICES_1_7 = 0] Personalized, one-on-one business coaching
8. [SHOW IF BO_SERVICES_1_8 = 0] Trainings or workshops to help develop key areas of your business
9. [SHOW IF BO_SERVICES_1_9 = 0] Business cohort programs [HOVER TEXT: Group-based training programs designed to help you launch or grow your business]
10. [SHOW IF BO_SERVICES_1_10 = 0] Services run through Small Business Development Centers (SBDCs)
11. [SHOW IF BO_SERVICES_1_11 = 0] Services run through local educational institutions

[SHOW IF DOV_MICROBIZ = 1 AND ANY(BO_SERVICES_1_1-BO_SERVICES_1_11 = 0) AND COUNT(BO_SERVICES_1_1-BO_SERVICES_1_11 = 0) > 2 AND BO_SERVICES_2<>77,98, 99]

BO_SERVICES_3.

Which of the remaining business support services would you second most like to have access to in your local community?

[HOVER TEXT ON “access”: Access refers to the availability or opportunity for you to utilize or benefit from services available at no cost, for a flexible fee, or at a discounted rate.]

RESPONSE OPTIONS

1. [SHOW IF BO_SERVICES_1_1 = 0 AND BO_SERVICES_2 <> 1] Finding, affording, and/or retaining qualified employees
2. [SHOW IF BO_SERVICES_1_2 = 0 AND BO_SERVICES_2 <> 2] Competing against other/larger businesses
3. [SHOW IF BO_SERVICES_1_3 = 0 AND BO_SERVICES_2 <> 3] Networking opportunities

4. [SHOW IF BO_SERVICES_1_4 = 0 AND BO_SERVICES_2 <> 4] Mentorship
 5. [SHOW IF BO_SERVICES_1_5 = 0 AND BO_SERVICES_2 <> 5] Consultation with industry experts
 6. [SHOW IF BO_SERVICES_1_6 = 0 AND BO_SERVICES_2 <> 6] Professional advice from business experts (e.g., attorneys, accountants, marketing consultants, or other business service provider)
 7. [SHOW IF BO_SERVICES_1_7 = 0 AND BO_SERVICES_2 <> 7] Personalized, one-on-one business coaching
 8. [SHOW IF BO_SERVICES_1_8 = 0 AND BO_SERVICES_2 <> 8] Trainings or workshops to help develop key areas of your business
 9. [SHOW IF BO_SERVICES_1_9 = 0 AND BO_SERVICES_2 <> 9] [Business cohort programs](#) [HOVER TEXT: Group-based training programs designed to help you launch or grow your business]
 10. [SHOW IF BO_SERVICES_1_10 = 0 AND BO_SERVICES_2 <> 10] Services run through Small Business Development Centers (SBDCs)
 11. [SHOW IF BO_SERVICES_1_11 = 0 AND BO_SERVICES_2 <> 11] Services run through local educational institutions
-

BUSINESS OPERATIONS: SECTION 5 QUESTIONS

[SHOW IF DOV_GROUP = 1 OR 2]
DISPLAY_BO_POSTPLANS.

Now we want to ask you some questions about what you did or what you plan to do after you finish [INSERT DOV_ACTIVITY].

[SHOW IF DOV_GROUP = 1 OR 2]
BO_LENGTH_1.

How long do you see yourself [INSERT DOV_ACTIVITY]?

RESPONSE OPTIONS

1. Less than a year longer
 2. 1 to 2 years longer
 3. 3 to 4 years longer
 4. 5 to 9 years longer
 5. 10 or more years longer
-

[SHOW IF DOV_GROUP = 1 OR 2]
BO_POSTPLANS_1.

What are your plans for after you finish [INSERT DOV_ACTIVITY]?

RESPONSE OPTIONS

1. Continue to work at another job in which I am currently employed
2. Take a new job/enter employment
3. Start another business
4. Retire

5. Go back to school
 6. Take a break from work
 7. Provide care for children and/or family/friends in need of care
 8. Other (Specify) [TEXTBOX]
-

[SHOW IF DOV_GROUP = 4 OR 5]

BO_POSTPLANS_2.

What did you do immediately after you finished [INSERT DOV_ACTIVITY]?

RESPONSE OPTIONS

1. Continue to work at another job in which I am currently employed
 2. Took a new job/enter employment
 3. Started another business
 4. Retired
 5. Went back to school
 6. Took a break from work
 7. Provided care for children and/or family/friends in need of care
 8. Other (Specify) [TEXTBOX]
-

[SHOW IF DOV_GROUP = 1,2,4, OR 5]

BO_NUMPREVBIZ_1.

Prior to establishing, purchasing, or acquiring this business/self-employment, how many previous businesses have you owned?

RESPONSE OPTIONS

1. 0
 2. 1
 3. 2
 4. 3
 5. 4
 6. 5 or more
-

[SHOW IF DOV_GROUP = 4 OR 5]

BO_EXITSTRAT_1.

Which of the following best characterizes how you closed or ended your business or stopped working for yourself as a freelancer, consultant, or independent contractor?

RESPONSE OPTIONS

1. Sold your business at a loss
2. Sold your business at more or less break even
3. Sold your business at a profit
4. Bankruptcy or liquidation
5. Transferred business to a family member
6. Did not complete any forms/paperwork, just stopped working or taking work
7. Transferred business to a non-family member
8. Converted the business to an employee ownership model
9. Other, specify: [TEXTBOX]

[SHOW IF DOV_GROUP = 1,2,3,4,5,6]

BO_INDUSTRY_1.

[DISPLAY FOR DOV_GROUP = 1, 2, 4, OR 5: What industry best classifies your job as

[INSERT DOV_JOB]?]

[DISPLAY FOR DOV_GROUP = 3 or 6: What industry best classifies your business idea?]

RESPONSE OPTIONS

1. Accommodation and Food Services

[HOVER TEXT FOR RESPONSE OPTION 1:

- Traveler Accommodation
- RV Parks and Recreational Camps
- Rooming and Boarding Houses, Dormitories, and Workers' Camps
- Special Food Services
- Drinking Places (Alcoholic Beverages)
- Restaurants and Other Eating Places]

2. Administrative and Support and Waste Management and Remediation Services

[HOVER TEXT FOR RESPONSE OPTION 2:

- Office Administrative Services
- Facilities Support Services
- Employment Services
- Business Support Services
- Travel Arrangement and Reservation Services
- Investigation and Security Services
- Services to Buildings and Dwellings
- Waste Collection
- Waste Treatment and Disposal
- Remediation and Other Waste Management Services]

3. Agriculture, Forestry, Fishing and Hunting

4. Arts, Entertainment, and Recreation

[HOVER TEXT FOR RESPONSE OPTION 4:

- Performing Arts Companies
- Spectator Sports
- Promoters of Performing Arts, Sports, and Similar Events
- Agents and Managers for Artists, Athletes, Entertainers, and Other Public Figures
- Independent Artists, Writers, and Performers
- Museums, Historical Sites, and Similar Institutions
- Amusement Parks and Arcades
- Gambling Industries
- Other Amusement and Recreation Industries]

5. Construction

6. Educational Services

[HOVER TEXT FOR RESPONSE OPTION 6:

- Elementary and Secondary Schools
- Junior Colleges
- Colleges, Universities, and Professional Schools
- Business Schools and Computer and Management Training

- Technical and Trade Schools
 - Other Schools and Instruction
 - Educational Support Services]
7. [Finance and Insurance](#)
[HOVER TEXT FOR RESPONSE OPTION 7:
- Monetary Authorities-Central Bank
 - Depository Credit Intermediation
 - Nondepository Credit Intermediation
 - Activities Related to Credit Intermediation
 - Securities and Commodity Contracts Intermediation and Brokerage
 - Securities and Commodity Exchanges
 - Other Financial Investment Activities
 - Insurance Carriers
 - Agencies, Brokerages, and Other Insurance Related Activities
 - Insurance and Employee Benefit Funds
 - Other Investment Pools and Funds]
8. [Health Care and Social Assistance](#)
[HOVER TEXT FOR RESPONSE OPTION 8:
- Offices of Physicians
 - Offices of Dentists
 - Offices of Other Health Practitioners
 - Outpatient Care Centers
 - Medical and Diagnostic Laboratories
 - Home Health Care Services
 - Other Ambulatory Health Care Services
 - General Medical and Surgical Hospitals
 - Psychiatric and Substance Abuse Hospitals
 - Specialty (except Psychiatric and Substance Abuse) Hospitals
 - Nursing Care Facilities (Skilled Nursing Facilities)
 - Residential Intellectual and Developmental Disability, Mental Health, and Substance Abuse Facilities
 - Continuing Care Retirement Communities and Assisted Living Facilities for the Elderly
 - Other Residential Care Facilities
 - Individual and Family Services
 - Community Food and Housing, and Emergency and Other Relief Services
 - Vocational Rehabilitation Services
 - Child Day Care Services]
9. [Information \(such as publishers and telecommunications\)](#)
[HOVER TEXT FOR RESPONSE OPTION 9:
- Newspaper, Periodical, Book, and Directory Publishers
 - Software Publishers
 - Motion Picture and Video Industries
 - Sound Recording Industries
 - Radio and Television Broadcasting
 - Cable and Other Subscription Programming
 - Wired and Wireless Telecommunications Carriers
 - Satellite Telecommunications

- Other Telecommunications
 - Data Processing, Hosting, and Related Services
 - Other Information Services]
10. Management of Companies and Enterprises
11. Manufacturing
12. Mining, Quarrying, and Oil and Gas Extraction
13. Other Services (such as repair and maintenance services)
 [HOVER TEXT FOR RESPONSE OPTION 13:
- Automotive Repair and Maintenance
 - Electronic and Precision Equipment Repair and Maintenance
 - Commercial and Industrial Machinery and Equipment (except Automotive and Electronic) Repair and Maintenance
 - Personal and Household Goods Repair and Maintenance
 - Personal Care Services including Personal Trainer, Hair or Nail Salons, and Barbers
 - Death Care Services
 - Drycleaning and Laundry Services
 - Other Personal Services
 - Religious Organizations
 - Grantmaking and Giving Services
 - Social Advocacy Organizations
 - Civic and Social Organizations
 - Business, Professional, Labor, Political, and Similar Organizations
 - Private Households]
14. Professional, Scientific, and Technical Services
 [HOVER TEXT FOR RESPONSE OPTION 14:
- Legal Services
 - Accounting, Tax Preparation, Bookkeeping, and Payroll Services
 - Architectural, Engineering, and Related Services
 - Specialized Design Services
 - Computer Systems Design and Related Services
 - Management, Scientific, and Technical Consulting Services
 - Scientific Research and Development Services
 - Advertising, Public Relations, and Related Services]
15. Public Administration
 [HOVER TEXT FOR RESPONSE OPTION 15:
- Executive, Legislative, and Other General Government Support
 - Justice, Public Order, and Safety Activities
 - Administration of Human Resource Programs
 - Administration of Environmental Quality Programs
 - Administration of Housing Programs, Urban Planning, and Community Development
 - Administration of Economic Programs
 - Space Research and Technology
 - National Security and International Affairs]
16. Real Estate Rental and Leasing
17. Retail Trade
18. Transportation and Warehousing
19. Utilities

GENERAL POPULATION QUESTIONS

[SHOW IF DOV_GROUP = 7]

GP_CONSIDER_1.

Earlier, you said you are not planning to start a new business or become self-employed.

What are the primary reasons why you have not considered starting your own business, working for yourself, or doing freelance or contract work, etc.?

Select all that apply.

RESPONSE OPTIONS, RANDOMIZE

1. I don't know what kind of business I would start
2. It seems too risky
3. I'm not sure how well a business would do in my local community
4. I don't have enough savings or financial cushion to pursue starting a business
5. I don't know how to go about accessing financing to start a business
6. Family/friends are not supportive
7. It seems too challenging
8. The economy is too uncertain or unfavorable
9. It might take too much time
10. I like my current job/work arrangement
11. I need employer-provided benefits (such as health insurance)
12. I don't have the skills needed to run a business
13. I don't know where to go for help getting started
14. Major life event (such as a new child, own or family medical issue)
15. Retired or planning to retire
16. Health reasons
17. My credit score is too low to obtain the needed funding
18. Other reason, specify: [TEXTBOX]

COMPUTE DOV_REASON4=COUNT # OF RESPONSE OPTIONS SELECTED IN
GP_CONSIDER_1

[SHOW IF DOV_REASON4>1]

GP_CONSIDER_2.

You reported the following reasons for not starting your own business or working for yourself as a consultant, freelancer, or independent contractor.

Of these reasons, which is the primary reason for not starting your own business or working for yourself?

Select one.

RESPONSE OPTIONS, RANDOMIZE

1. [SHOW IF GP_CONSIDER_1 =1] I don't know what kind of business I would start
2. [SHOW IF GP_CONSIDER_1 =2] It seems too risky
3. [SHOW IF GP_CONSIDER_1 =3] I'm not sure how well a business would do in my local community
4. [SHOW IF GP_CONSIDER_1 =4] I don't have enough savings or financial cushion to pursue starting a business
5. [SHOW IF GP_CONSIDER_1 =5] I don't know how to go about accessing financing to start a business
6. [SHOW IF GP_CONSIDER_1 =6] Family/friends are not supportive
7. [SHOW IF GP_CONSIDER_1 =7] It seems too challenging
8. [SHOW IF GP_CONSIDER_1 =8] The economy is too uncertain or unfavorable
9. [SHOW IF GP_CONSIDER_1 =9] It might take too much time
10. [SHOW IF GP_CONSIDER_1 =10] I like my current job/work arrangement
11. [SHOW IF GP_CONSIDER_1 =11] I need employer-provided benefits (such as health insurance)
12. [SHOW IF GP_CONSIDER_1 =12] I don't have the skills needed to run a business
13. [SHOW IF GP_CONSIDER_1 =13] I don't know where to go for help getting started
14. [SHOW IF GP_CONSIDER_1 =14] Major life event (such as a new child, own or family medical issue)
15. [SHOW IF GP_CONSIDER_1 =15] Retired or planning to retire
16. [SHOW IF GP_CONSIDER_1 =16] Health reasons
17. [SHOW IF GP_CONSIDER_1 = 17] My credit score is too low to obtain the needed funding
18. [SHOW IF GP_CONSIDER_1 =18] [INSERT TEXT RESPONSE FROM GP_CONSIDER_1_18]

[SHOW IF DOV_REASON4>2 AND ANY(GP_CONSIDER_2_1-GP_CONSIDER_2_18=1)]A GP_CONSIDER_3.

You reported the following reasons for not starting your own business or working for yourself as a consultant, freelancer, or independent contractor.

Of these remaining reasons, which is the second most important reason for not starting your own business or working for yourself?

Select one.

RESPONSE OPTIONS, RANDOMIZE

1. [SHOW IF GP_CONSIDER_1 =1] I don't know what kind of business I would start
2. [SHOW IF GP_CONSIDER_1 =2] It seems too risky
3. [SHOW IF GP_CONSIDER_1 =3] I'm not sure how well a business would do in my local community
4. [SHOW IF GP_CONSIDER_1 =4] I don't have enough savings or financial cushion to pursue starting a business
5. [SHOW IF GP_CONSIDER_1 =5] I don't know how to go about accessing financing to start a business
6. [SHOW IF GP_CONSIDER_1 =6] Family/friends are not supportive
7. [SHOW IF GP_CONSIDER_1 =7] It seems too challenging

8. [SHOW IF GP_CONSIDER_1 =8] The economy is too uncertain or unfavorable
 9. [SHOW IF GP_CONSIDER_1 =9] It might take too much time
 10. [SHOW IF GP_CONSIDER_1 =10] I like my current job/work arrangement
 11. [SHOW IF GP_CONSIDER_1 =11] I need employer-provided benefits (such as health insurance)
 12. [SHOW IF GP_CONSIDER_1 =12] I don't have the skills needed to run a business
 13. [SHOW IF GP_CONSIDER_1 =13] I don't know where to go for help getting started
 14. [SHOW IF GP_CONSIDER_1 =14] Major life event (such as a new child, own or family medical issue)
 15. [SHOW IF GP_CONSIDER_1 =15] Retired or planning to retire
 16. [SHOW IF GP_CONSIDER_1 =16] Health reasons
 17. [SHOW IF GP_CONSIDER_1 = 17] My credit score is too low to obtain the needed funding
 18. [SHOW IF GP_CONSIDER_1 =18]
-

[SHOW IF DOV_GROUP = 2,3,5,6,7]
ENTR_CHALLENGES_1.

In your opinion, what are the three biggest challenges business owners and self-employed people are facing today?

Select up to three response options.

RESPONSE OPTIONS

1. Not being able to access and/or afford health insurance
 2. Affording tax payments
 3. Finding customers
 4. Balancing work and family
 5. Working long hours
 6. Feeling burnt out, or losing focus, interest, and/or motivation
 7. Not making enough money
 8. Navigating government regulations
 9. Finding and retaining qualified employees
 10. Competing against other/larger businesses
 11. Unfavorable economy
-

[SHOW IF DOV_GROUP = 7]
GP_EMPLOYEELENGTH_1.

Thinking about your [IF DOV_WORKING = 0: most recent job/ELSE: main job (the one that you spend the most time working at)], about how long have you worked there?

RESPONSE OPTIONS

1. Less than 1 year
2. 1 to 2 years
3. 3 to 4 years
4. 5 to 9 years
5. 10 to 14 years
6. 15 to 19 years
7. 20 years or more

[SHOW IF DOV_GROUP = 7]
GP_EMPLOYEELENGTH_1.

Thinking about your [IF DOV_WORKING = 0: most recent job/ELSE: main job (the one that you spend the most time working at)], about how long have you worked there?

RESPONSE OPTIONS

1. Less than 1 year
2. 1 to 2 years
3. 3 to 4 years
4. 5 to 9 years
5. 10 to 14 years
6. 15 to 19 years
7. 20 years or more

[SHOW IF DOV_GROUP = 7]
GP_NUMEMPSTART_1.

Please think about your [IF DOV_WORKING = 0: most recent job/ELSE: main job (the one that you spend the most time working at)].

Counting all locations where your [IF DOV_WORKING = 0: most recent] employer operates, how many people work for this employer? Your best estimate is fine.

RESPONSE OPTIONS

1. 10 or fewer employees
2. 11 – 24 employees
3. 25 – 99 employees
4. 100 – 499 employees
5. 500 – 999 employees
6. 1,000 – 4,999 employees
7. 5,000 – 24,999 employees
8. 25,000+ employees

[SHOW IF DOV_GROUP = 7 AND DOV_WORKING = 1]
GP_WEEKSWK_1.

During the past 12 months, how many weeks did you work? Include paid time off and weeks when you worked for a few hours.

Your best estimate is fine.

[NUMBOX, RANGE 0-52]

[SHOW IF DOV_GROUP = 7 AND DOV_WORKING = 1]
GP_HOURSWK_1.

During the past 12 months, in the weeks worked, how many hours did you usually work each week?

Your best estimate is fine.

[NUMBOX, RANGE 0-99]

[SHOW IF DOV_GROUP = 7 AND DOV_WORKING = 1]

GP_EMPBENEFIT_1.

Which of the following employee benefits are paid totally or partly by your primary employer?

Select all that apply.

RESPONSE OPTIONS

1. Health insurance
 2. Contributions to retirement plans, including 401(k), Keogh, etc.
 3. Profit sharing and/or stock options
 4. Paid holidays or vacation
 5. Paid sick leave
 6. Paid parental or family leave
 7. Tuition assistance and/or reimbursement
 8. Other benefit, specify: [TEXTBOX]
 9. None of the above
-

[SHOW IF DOV_GROUP <> 1,2 AND DOV_WORKING = 1]

REMOTE_1.

Thinking of your main job, which of the following best describes whether you are allowed or required to telecommute or work remotely?

RESPONSE OPTIONS

1. I was allowed or required to telecommute/work remotely only during the coronavirus pandemic
 2. I am allowed or required to telecommute/work remotely regardless of the coronavirus pandemic
 3. I am not allowed to telecommute/work remotely
 4. Telecommuting/working remotely does not make sense for my job
-

[SHOW IF DOV_GROUP = 7 AND DOV_WORKING = 1]

GP_NEWJOB_1.

In the next year, how likely is it that you will...

GRID ITEMS

- A. Stay with your current employment arrangement
- B. Look for/take a different job
- C. Look for/take another job in addition to your current job(s)
- D. Start your own business as a primary source of income
- E. Start working for yourself as a freelancer, consultant, or independent contractor
- F. Engage in [gig work](#) as a primary source of income
- G. Engage in [gig work](#) as a secondary source of income

- H. Retire
- I. Exit the labor force (not for retirement)
- J. Go back to school

[HOVER TEXT ON “gig work”: Some people earn money through short, paid tasks or jobs online or in-person that are conducted through companies that coordinate payment for the service. This is sometimes referred to as “gig work.” These tasks might include driving for Uber or Lyft, selling goods through Etsy, completing online tasks on Mechanical Turk, providing graphic design, music, or other services via Fiverr or Upwork, or other activities.]

RESPONSE OPTIONS

- 1. Not at all likely
- 2. Somewhat likely
- 3. Moderately likely
- 4. Very likely

[SHOW IF DOV_GROUP = 7 AND DOV_WORKING = 0]
GP_NEWJOB_2.

In the next year, how likely is it that you will...

GRID ITEMS

- A. Take a job
- B. Start your own business as a primary source of income
- C. Start working for yourself as a freelancer, consultant, or independent contractor
- D. Engage in [gig work](#) as a primary source of income
- E. Engage in [gig work](#) as a secondary source of income
- F. Go back to school

[HOVER TEXT ON “gig work”: Some people earn money through short, paid tasks or jobs online or in-person that are conducted through companies that coordinate payment for the service. This is sometimes referred to as “gig work.” These tasks might include driving for Uber or Lyft, selling goods through Etsy, completing online tasks on Mechanical Turk, providing graphic design, music, or other services via Fiverr or Upwork, or other activities.]

RESPONSE OPTIONS

- 1. Not at all likely
- 2. Somewhat likely
- 3. Moderately likely
- 4. Very likely

MICROBUSINESS OWNER QUESTIONS

[SHOW IF DOV_MICROBIZ = 1]
DISPLAY_TECH_INTRO.

The next couple of questions are aimed at understanding your experience with “Generative AI” in your business.

“Generative AI” is a category of artificial intelligence (AI) that empowers machines to generate new content rather than simply analyze or manipulate existing data. By using models trained on vast amounts of data, generative AI can generate content – such as text, photos, audio, or video – that is sometimes indistinguishable from content developed directly by humans. Large language models (LLMs), which power chatbots and other text-based AI tools, represent one common type of generative AI (Federal Trade Commission, 2023).

[SHOW IF DOV_MICROBIZ = 1]
TECH_1.

Is your business currently using [generative AI](#)?

[HOVER TEXT ON “[generative AI](#)”: “Generative AI” is a category of artificial intelligence (AI) that empowers machines to generate new content rather than simply analyze or manipulate existing data. By using models trained on vast amounts of data, generative AI can generate content – such as text, photos, audio, or video – that is sometimes indistinguishable from content developed directly by humans. Large language models (LLMs), which power chatbots and other text-based AI tools, represent one common type of generative AI (Federal Trade Commission, 2023).]

RESPONSE OPTIONS

1. Yes
 2. No
 77. Unsure
-

[SHOW IF DOV_MICROBIZ = 1 AND TECH_1 = 1]
TECH_2.

How is your business currently using [generative AI](#) for administration?

Select all that apply.

[HOVER TEXT ON “[generative AI](#)”: “Generative AI” is a category of artificial intelligence (AI) that empowers machines to generate new content rather than simply analyze or manipulate existing data. By using models trained on vast amounts of data, generative AI can generate content – such as text, photos, audio, or video – that is sometimes indistinguishable from content developed directly by humans. Large language models (LLMs), which power chatbots and other text-based AI tools, represent one common type of generative AI (Federal Trade Commission, 2023).]

RESPONSE OPTIONS

1. Taking notes during meetings or summarizing meetings
 2. Creating internal documents
 3. Reporting and compliance tracking
 4. None of the above
-

[SHOW IF DOV_MICROBIZ = 1 AND TECH_1 = 1]
TECH_3.

How is your business currently using [generative AI](#) for creative design?

Select all that apply.

[HOVER TEXT ON “generative AI”: “Generative AI” is a category of artificial intelligence (AI) that empowers machines to generate new content rather than simply analyze or manipulate existing data. By using models trained on vast amounts of data, generative AI can generate content – such as text, photos, audio, or video – that is sometimes indistinguishable from content developed directly by humans. Large language models (LLMs), which power chatbots and other text-based AI tools, represent one common type of generative AI (Federal Trade Commission, 2023).]

RESPONSE OPTIONS

1. Creating advertising creative
 2. Creating graphics
 3. Creating logos
 4. Creating other design elements
 5. None of the above
-

[SHOW IF DOV_MICROBIZ = 1 AND TECH_1 = 1]
TECH_4.

How is your business currently using [generative AI](#) for communications?

Select all that apply.

[HOVER TEXT ON “generative AI”: “Generative AI” is a category of artificial intelligence (AI) that empowers machines to generate new content rather than simply analyze or manipulate existing data. By using models trained on vast amounts of data, generative AI can generate content – such as text, photos, audio, or video – that is sometimes indistinguishable from content developed directly by humans. Large language models (LLMs), which power chatbots and other text-based AI tools, represent one common type of generative AI (Federal Trade Commission, 2023).]

RESPONSE OPTIONS

1. Drafting product descriptions and catalogs
 2. Chatbots and virtual assistants
 3. Drafting emails
 4. Developing advertising campaigns
 5. Drafting advertising copy
 6. Drafting social media posts, blog posts, or website text
 7. None of the above
-

[SHOW IF DOV_MICROBIZ = 1 AND TECH_1 = 1]
TECH_5.

How is your business currently using [generative AI](#) for strategic decision-making?

Select all that apply.

[HOVER TEXT ON “generative AI”: “Generative AI” is a category of artificial intelligence (AI) that empowers machines to generate new content rather than simply analyze or manipulate existing data. By using models trained on vast amounts of data, generative AI can generate content – such as text, photos, audio, or video – that is sometimes indistinguishable from content developed directly by humans. Large language models (LLMs), which power chatbots and other text-based AI tools, represent one common type of generative AI (Federal Trade Commission, 2023).]

RESPONSE OPTIONS

1. Developing business plans
 2. Helping make better informed decisions
 3. Analyzing/interpreting data
 4. Scenario planning and simulation
 5. None of the above
-

[SHOW IF DOV_MICROBIZ = 1 AND TECH_1 = 1]
TECH_6.

Besides the examples already discussed, is your business using [generative AI](#) for any other reasons?

[HOVER TEXT ON “generative AI”: “Generative AI” is a category of artificial intelligence (AI) that empowers machines to generate new content rather than simply analyze or manipulate existing data. By using models trained on vast amounts of data, generative AI can generate content – such as text, photos, audio, or video – that is sometimes indistinguishable from content developed directly by humans. Large language models (LLMs), which power chatbots and other text-based AI tools, represent one common type of generative AI (Federal Trade Commission, 2023).]

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF DOV_MICROBIZ = 1 AND TECH_6 = 1]
TECH_7.

What other ways is your business using [generative AI](#)?

[HOVER TEXT ON “generative AI”: “Generative AI” is a category of artificial intelligence (AI) that empowers machines to generate new content rather than simply analyze or manipulate existing data. By using models trained on vast amounts of data, generative AI can generate content – such as text, photos, audio, or video – that is sometimes indistinguishable from content developed directly by humans. Large language models (LLMs), which power chatbots and other text-based AI tools, represent one common type of generative AI (Federal Trade Commission, 2023).]

[MEDIUM TEXTBOX]

[SHOW IF DOV_MICROBIZ = 1 AND TECH_1 = 2 OR 77 OR 98 OR 99]

TECH_8.

Is your business planning to use [generative AI](#) within the next 12 months?

[HOVER TEXT ON “[generative AI](#)”: “Generative AI” is a category of artificial intelligence (AI) that empowers machines to generate new content rather than simply analyze or manipulate existing data. By using models trained on vast amounts of data, generative AI can generate content – such as text, photos, audio, or video – that is sometimes indistinguishable from content developed directly by humans. Large language models (LLMs), which power chatbots and other text-based AI tools, represent one common type of generative AI (Federal Trade Commission, 2023).]

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF DOV_MICROBIZ = 1 AND TECH_1 = 1 AND SUM(BO_NUMEMPLOY_1_A : BO_NUMEMPLOY_1_I) > 0]

TECH_9.

How has the adoption of [generative AI](#) impacted your workforce? (*By workforce, we refer to all types of workers used in your business, from full- and part-time staff to independent contractors and gig workers.*)

Select all that apply.

[HOVER TEXT ON “[generative AI](#)”: “Generative AI” is a category of artificial intelligence (AI) that empowers machines to generate new content rather than simply analyze or manipulate existing data. By using models trained on vast amounts of data, generative AI can generate content – such as text, photos, audio, or video – that is sometimes indistinguishable from content developed directly by humans. Large language models (LLMs), which power chatbots and other text-based AI tools, represent one common type of generative AI (Federal Trade Commission, 2023).]

RESPONSE OPTIONS

1. Increased productivity
 2. Changed job roles and responsibilities
 3. Decreased workload
 4. Other (specify): [TEXTBOX]
 5. No noticeable impact
-

[SHOW IF DOV_MICROBIZ = 1 AND TECH_1 = 1]

TECH_10.

How would you describe the impact of [generative AI](#) on the efficiency of your business processes?

[HOVER TEXT ON “[generative AI](#)”: “Generative AI” is a category of artificial intelligence (AI) that empowers machines to generate new content rather than simply analyze or manipulate existing data. By using models trained on vast amounts of data, generative AI can generate content – such as text, photos, audio, or video – that is sometimes indistinguishable from content

developed directly by humans. Large language models (LLMs), which power chatbots and other text-based AI tools, represent one common type of generative AI (Federal Trade Commission, 2023).]

RESPONSE OPTIONS

1. Very positive
 2. Positive
 3. Neutral
 4. Negative
 5. Very negative
-

[SHOW IF DOV_MICROBIZ = 1]
TECH_11.

How much do you agree or disagree with the following statement?

I find it difficult to keep up with technological changes in my industry.

RESPONSE OPTIONS

1. Strongly agree
 2. Somewhat agree
 3. Neither agree nor disagree
 4. Somewhat disagree
 5. Strongly disagree
-

[SHOW IF DOV_MICROBIZ = 1]
TECH_12.

Overall, how would you rate your confidence in your business's ability to leverage the following digital technologies?

GRID ITEMS

- A. Generative AI for content creation
- B. Customer relationship management software or platforms
- C. Human resources software
- D. Payroll software
- E. Accounting software
- F. Digital advertising
- G. Social media
- H. Website development software
- I. Point of sale technology/payment processing
- J. Project management software
- K. Cybersecurity technologies and/or procedures
- L. E-commerce or third-party selling platforms

RESPONSE OPTIONS

1. Not at all confident
2. Somewhat confident
3. Very confident

4. Not relevant
 77. Don't know
-

DEMOGRAPHIC QUESTIONS

FINAL_DEMO_INTRO.

There are just a few more questions about yourself.

DEM_HHINC.

What is your total annual household income before taxes?

Include income earned by anyone residing in your household full-time who is related to you by birth, marriage, or adoption.

RESPONSE OPTIONS

1. Less than \$5,000
 2. \$5,000 to \$9,999
 3. \$10,000 to \$14,999
 4. \$15,000 to \$19,999
 5. \$20,000 to \$24,999
 6. \$25,000 to \$29,999
 7. \$30,000 to \$34,999
 8. \$35,000 to \$39,999
 9. \$40,000 to \$49,999
 10. \$50,000 to \$59,999
 11. \$60,000 to \$74,999
 12. \$75,000 to \$84,999
 13. \$85,000 to \$99,999
 14. \$100,000 to \$124,999
 15. \$125,000 to \$149,999
 16. \$150,000 to \$174,999
 17. \$175,000 to \$199,999
 18. \$200,000 or more
-

DEM_STUDENT.

During the past week, were you enrolled in or taking courses at a college, university, or trade school?

RESPONSE OPTIONS

1. Yes
 2. No
-

DEM_INSUR.

From any source, do you currently have:

GRID ITEMS

- a. Health insurance
- b. Contributions to retirement plans, including 401(k), Keogh, etc.
- c. Profit sharing and/or stock options
- d. Paid holidays or vacation
- e. Paid sick leave
- f. Paid parental or family leave
- g. Tuition assistance and/or reimbursement

RESPONSE OPTIONS

1. Yes
 2. No
-

DEM_DEBT.

Thinking about all of your household's current debts, including mortgages, bank loans, student loans, money owed to people, medical debt, past-due bills, and credit card balances that are carried over from prior months...

As of today, which of the following statements describes how manageable your household debt is?

RESPONSE OPTIONS

1. Have a manageable amount of debt
 2. Have a bit more debt than is manageable
 3. Have far more debt than is manageable
 4. Do not have any debt
-

DEM_RELAOWN.

Do any of your immediate family members own a business?

RESPONSE OPTIONS

1. Yes
 2. No
-

[SHOW IF PANEL_TYPE>19]

DEM_EDU.

What is the highest degree or level of school you have completed?

RESPONSE OPTIONS

1. No formal education
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 (GED)
 10. Some college, no degree
 11. Associate degree
 12. Bachelor's degree
 13. Master's degree
 14. Professional or Doctorate degree
-

[SHOW IF PANEL_TYPE>19]

DEM_MARITAL.

What is your current marital status?

RESPONSE OPTIONS

1. Married
 2. Widowed
 3. Divorced
 4. Separated
 5. Never married
 6. Living with partner
-

DEM_HOUSENUM_1.

Tell us a little about your household and the people who live with you. Including yourself, how many people lived in your household more than 3 months in the last 12 months? Please include any children as well as adults, including cohabiting partners, roommates and armed forces members living or staying in your household more than 3 months.

RESPONSE OPTIONS

1. One person, [CAWI: I; CATI: you] live by [CAWI: myself; CATI: yourself]
 2. Two persons
 3. Three persons
 4. Four persons
 5. Five persons
 6. Six or more persons
-

[SHOW IF DEM_HOUSENUM_1 = 6]

DEM_HOUSENUM_2.

You said six or more persons live in your household.

Please enter the total number of adults and children who lived in your household for more than 3 months in the last 12 months below.

[NUMBOX accept 6-20]

[SHOW IF DEM_HOUSENUM_1 = 2,3,4,5,6]

DEM_HOUSEHOLD.

Who lives in your household?

Only count people who lived in your household more than 3 months in the last 12 months.

Select all that apply.

RESPONSE OPTIONS

1. Spouse
2. Unmarried partner
3. Age 17 or younger child(ren), stepchild(ren), adopted child(ren), and/or foster child(ren)
4. Age 18 or older child(ren), stepchild(ren), adopted child(ren), and/or foster child(ren)
5. Grandchild(ren) age 17 or younger
6. Grandchild(ren) age 18 or older
7. Sibling(s) or sibling(s)-in-law
8. Parent(s), parent(s)-in-law, or step-parent(s) under 65 years old
9. Parent(s), parent(s)-in-law, or step-parent(s) aged 65 or older
10. Other relatives, specify: [TEXTBOX]
11. Roommate(s)
12. Other non-relatives, specify: [TEXTBOX]

[SHOW IF DEM_HOUSEHOLD_3 = 1 OR DEM_HOUSEHOLD_5 = 1]
DEM_HOUSECHILD.

You said that children or grandchildren under the age of 18 live in your household. Please enter the total number of children/grandchildren that fall into each age category listed below.

Please enter the number of children/grandchildren in each category, not the age of the children. If no children/grandchildren in your household fall into a category, please enter 0. Only count people who lived in your household more than 3 months in the last 12 months.

GRID ITEMS:

AGE CATEGORY	NUMBER OF (GRAND) CHILDREN
DEM_HOUSECHILD_5. Under 5 years old	[NUMBOX, 0-30]
DEM_HOUSECHILD_511. 5-11 years old	[NUMBOX, 0-30]
DEM_HOUSECHILD_1217. 12-17 years old	[NUMBOX, 0-30]

DEM_HOUSECHILD_TOTAL. Total number of (grand)children in household: _____ [SUM THE AMOUNT AS R ENTERS RESPONSES]

RESPONSE OPTIONS:

[NUMBOX, 0-30,77,98,99]

[SHOW IF AT LEAST ONE ROW DEM_HOUSECHILD<>77,98,99]
DEM_HOUSECHILD_CONF.

There are [INSERT DEM_HOUSECHILD_TOTAL] children/grandchildren under the age of 18 living in your household more than 3 months in the last 12 months. Is that correct?

RESPONSE OPTIONS

1. Yes

2. No, let me update my responses

IF DEM_HOUSECHILD_CONF=2, GO BACK TO DEM_HOUSECHILD TO ALLOW R TO UPDATE NUMBOX VALUES

DEM_MILITARY_1.

Have you ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard?

RESPONSE OPTIONS

1. No, never served in the military
 2. Yes, only on active duty for training in the Reserves or National Guard
 3. Yes, on active duty now
 4. Yes, on active duty in the past, now a U.S. Veteran
-

DEM_CITIZEN_1.

Where were you born?

RESPONSE OPTIONS

1. In the United States
 2. Outside of the United States
-

[SHOW IF DEM_CITIZEN_1 <> 1]

DEM_CITIZEN_2.

[SHOW IF PANEL_TYPE<20: To help protect the privacy of participants in our panel, AmeriSpeak has obtained a Certificate of Confidentiality covering the AmeriSpeak Panel. This information is available to panelists (and publicly) at: <https://www.amerispeak.org/privacy>]

Are you a citizen of the United States?

As a reminder, your responses are completely confidential and will be used for statistical purposes only.

RESPONSE OPTIONS

1. Yes, born in Puerto Rico, Guam, the U.S. Virgin Islands, or Northern Marianas
 2. Yes, born abroad of U.S. citizen parent or parents
 3. Yes, U.S. citizen by naturalization
 4. No, not a U.S. citizen
-

DEM_INCARCERATED.

Are you a returning citizen (i.e., an individual who was previously incarcerated)?

RESPONSE OPTIONS

1. Yes
 2. No
 3. Prefer not to answer
-

DEM_DISABILITY_1.

Do you have difficulty...

GRID ITEMS

- A. Seeing, even if wearing glasses?
- B. Hearing, even if using a hearing aid?
- C. Walking or climbing steps?
- D. Remembering or concentrating?
- E. With self-care, such as washing all over or dressing?
- F. Communicating or speaking in your usual language, for example understanding or being understood?
- G. Doing errands alone such as visiting a doctor's office or shopping because of a physical, mental, or emotional condition?

RESPONSE OPTIONS

- 1. No difficulty
 - 2. Some difficulty
 - 3. A lot of difficulty
 - 4. Cannot do at all
-

DEM_DISABILITY_2.

Do you receive income because of any kind of disability or health condition (such as Disability Insurance, Supplemental Security Income, or VA Disability Compensation)?

RESPONSE OPTIONS

- 1. Yes
- 2. No

<End of Survey>