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Entrepreneurship in the Population Survey

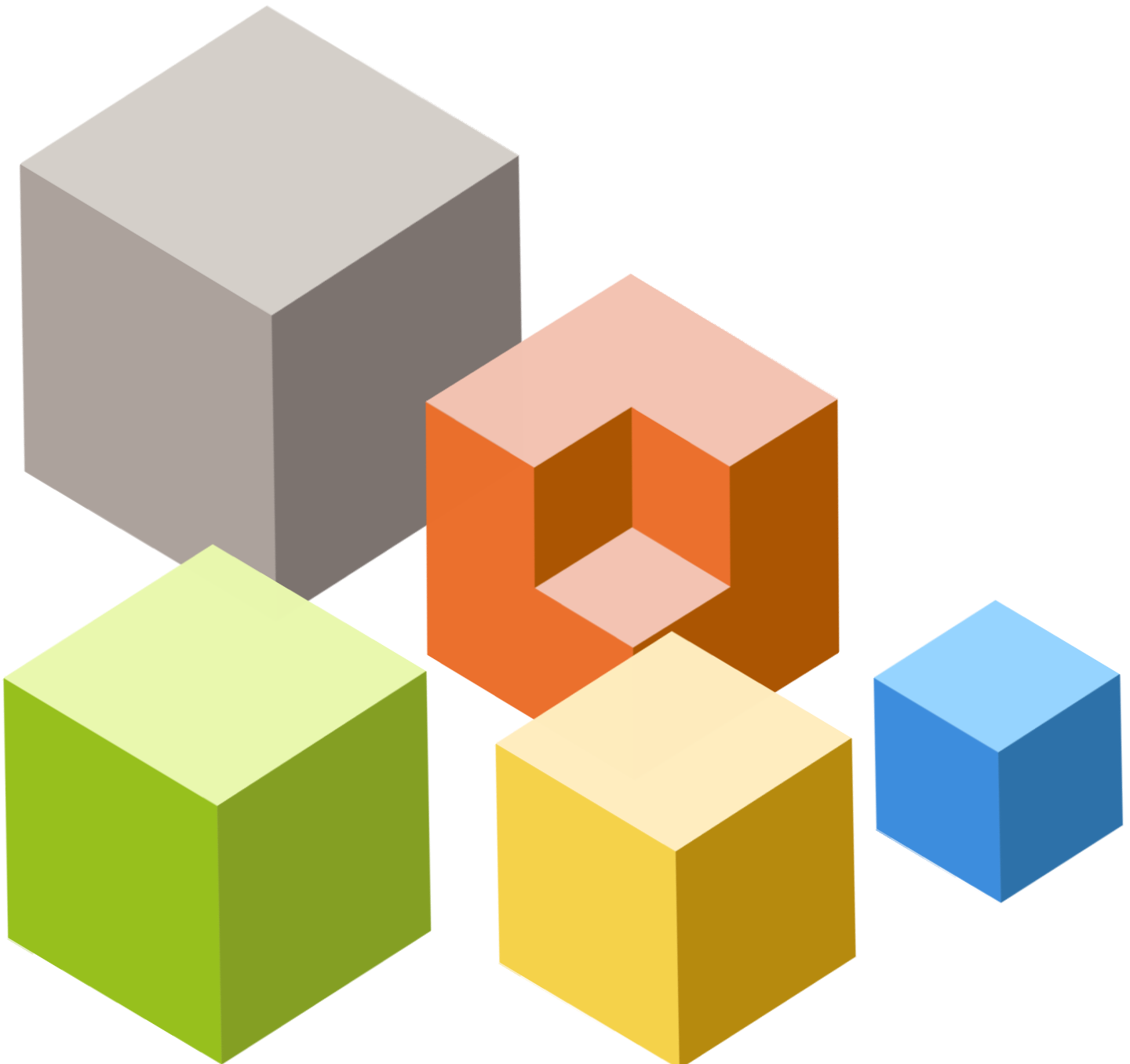
# EPOP:2025 Questionnaire

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# Entrepreneurship in the Population Survey:2025

## EPOP Suvery Overview

The first Entrepreneurship in the Population (EPOP) Survey was conducted in 2022. EPOP:2025 is the fourth annual survey conducted. One more annual collection is 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://EPOP.norc.org).

## Instructions for Data Users and Readers

EPOP:2025 involved a change in sample design relative to past rounds of the survey.

- In EPOP:2022, 2023 and 2024, the sample sources included AmeriSpeak, a probability-based sample, an address-based sample, and opt-in online survey panels. For EPOP:2025, the AmeriSpeak panel was the only sample source.
- In prior rounds, the survey used a State and MSA sample design. EPOP:2025 used a national sample design centered around creating national estimates.

The EPOP:2025 sample was selected solely from the AmeriSpeak Panel using sampling strata at the national level based on race/ethnicity, age, educational attainment, and sex. More information on prior round sample construction, including information regarding opt-in online survey panels and the ABS frame sources can be found in the EPOP:2022, 2023, and 2024 Data User Guides.

- Text that appears in black or red font was displayed to the respondent.
- Text shown in bright Yellow 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 yellow 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: 2025**

Abbreviation: **EPOP:2025**

Citation: **“Entrepreneurship in the Population (EPOP) Survey Project Questionnaire: 2025.” NORC at the University of Chicago. July, 2025. [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](mailto: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 set of survey items included in the EPOP:2025 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:2025 Public Use File. (These survey items and data were also asked and included in the data set for EPOP:2024 and can be found in EPOP:2024 Public Use File documentation.)

# EPOP:2025 Questionnaire

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## AMERISPEAK PANEL SAMPLE START

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[DISPLAY]

DISPLAY\_WINTRO\_1

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 20 minutes depending on your past experiences.

To thank you for sharing your opinions, we will give you a reward of 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](mailto:EPOP@norc.org) or 1-866-611-EPOP (1-866-611-3767). 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 [CAWI: click the 'Previous' button below and; CATI: let me know and you can] select a response for the last question. If you have questions about the Entrepreneurship in the Population Survey, contact us at [EPOP@norc.org](mailto:EPOP@norc.org) or 1-866-611-EPOP (1-866-611-3767).

IF R CLICKS CONTINUE BUTTON AND S\_JOBSTAT\_6=77,98,99, SET QUAL=2 AND GO TO TERMSORRY.

---

#### TERMSORRY.

Thank you for your time today. Unfortunately you are not eligible for this study. We value your opinion and hope that you will participate in future AmeriSpeak surveys.

We will redirect you to the AmeriSpeak Member Portal in seconds.

Thank you for your time today. Unfortunately you are not eligible for this study. Thank you so much for your participation. We will be in touch when your next survey is available.

## 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]

[NUMBOX]

**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 1920-2025]

---

[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]

[NUMBOX]

**S\_FORMFREE\_STAT\_2.**

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

[NUMBOX, Range 1920-2025]

---

[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

---

COMPUTE DOV\_CUR\_ENTR (THIS SETS THE CURRENT ENTREPRENEUR FLAG TO YES)

IF S\_JOB\_1 = 1

OR S\_JOB\_2 = 1

OR S\_FORMBIZ\_STAT\_1 = 1

DOV\_CUR\_ENTR = 1.

ELSE DOV\_CUR\_ENTR = 0.

---

COMPUTE DOV\_CUR\_FREE (THIS SETS THE CURRENT FREELANCER FLAG TO YES)

IF S\_JOB\_1 = 2

OR S\_JOB\_2 = 2

OR S\_FORMFREE\_STAT\_1 = 1

DOV\_CUR\_FREE = 1.

ELSE DOV\_CUR\_FREE = 0.

---

COMPUTE DOV\_FORM\_ENTR (THIS SETS THE FORMER ENTREPRENEUR FLAG TO YES)

IF ((S\_FORMBIZ\_STAT\_1=02,77,98,99 AND (S\_FORMBIZ\_1 = 1 OR S\_FORMBIZ\_2 = 1)) OR  
S\_ADDBIZ\_3=01) DOV\_FORM\_ENTR = 1.

ELSE DOV\_FORM\_ENTR = 0.

---

COMPUTE DOV\_FORM\_FREE (THIS SETS THE FORMER FREELANCER FLAG TO YES)

IF ((S\_FORMFREE\_STAT\_1=02,77,98,99 AND S\_FORMFREE\_1 = 1) OR S\_ADDFREE\_3=01)  
DOV\_FORM\_FREE = 1.

ELSE DOV\_FORM\_FREE = 0.

---

COMPUTE DOV\_NASCENT (THIS SETS THE NASCENT FLAG TO YES)

IF S\_NASCENT\_1 = 1

DOV\_NASCENT = 1.

ELSE DOV\_NASCENT = 0.

---

### **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**



- 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?  
[IF DOV\_CUR\_FREE = 1:/ELSE: ]

**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?

---

[SHOW IF S\_GIGCHECK\_1 = 1 OR S\_GIGCHECK\_2 = 1 OR S\_GIGCHECK\_3 = 1]

**S\_GIGTIME\_1.**

About how long have you been doing this gig work?

**RESPONSE OPTIONS**

- 1. Less than 6 months
- 2. 6 to 11 months
- 3. 1 to 2 years
- 4. 3 to 4 years
- 5. 5 to 9 years

6. 10 years or more

---

[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:
- 

[SHOW IF S\_GIGCHECK\_1 = 1 OR S\_GIGCHECK\_2 = 1 OR S\_GIGCHECK\_3 = 1]

**PE\_GIGINCOME\_1.**

In the last 6 months, about what percent of your household income has come from 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]

*Please choose the option that is closest to your actual percentage.*

#### RESPONSE OPTIONS

1. None of my income has come from gig work
2. About 25% of my income has come from gig work
3. About 50% of my income has come from gig work
4. About 75% of my income has come from gig work
5. All of my income has come from gig work

---

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

ELSE IF DOV\_GENPOP = 1

DOV\_GROUP = 7 “non-entrepreneur”

IF DOV\_CUR\_ENTR = 1

DOV\_GROUP = 1 ELSE IF DOV\_CUR\_FREE = 1

DOV\_GROUP = 2 ELSE IF DOV\_NASCENT = 1

DOV\_GROUP = 3 ELSE IF DOV\_FORM\_ENTR = 1

DOV\_GROUP = 4 ELSE IF DOV\_FORM\_FREE = 1

DOV\_GROUP = 5 ELSE IF DOV\_WITHDRAW = 1

DOV\_GROUP = 6 ELSE IF DOV\_GENPOP = 1

DOV\_GROUP = 7

PROGRAMMING, PLEASE USE THE BELOW TABLE FOR DOV\_GROUP ASSIGNMENT

<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

DOV\_ACTIVITY = 1 “owning your own business”

IF DOV\_GROUP = 2 OR 5

DOV\_ACTIVITY = 2 “working for yourself as a consultant, freelancer or independent contractor”

IF DOV\_GROUP = 3 OR 6

DOV\_ACTIVITY = 3 “working for yourself”

ELSE DOV\_ACTIVITY = “”.

IF DOV\_GROUP = 1 OR 4

DOV\_ACTIVITY = 1 IF DOV\_GROUP = 2 OR 5

DOV\_ACTIVITY = 2 IF DOV\_GROUP = 3 OR 6

DOV\_ACTIVITY = 3 ELSE

DOV\_ACTIVITY = “”.

---

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 = 1      DOV\_JOB = IF DOV\_GROUP = 2    DOV\_JOB = IF DOV\_GROUP = 3    DOV\_JOB = IF  
DOV\_GROUP = 4      DOV\_JOB = IF DOV\_GROUP = 5    DOV\_JOB = IF DOV\_GROUP = 6    DOV\_JOB =

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

---

COMPUTE DOV\_REASON1 "PE\_REASON\_1 Selections"

COUNT # OF GRID ITEMS WITH RESPONSE OPTION 1 SELECTED IN PE\_REASONS\_11 thru PE\_REASONS\_115

DISPLAY DOV\_REASON1

---

[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]?

---

[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]?

---

## 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 institution, 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:
  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:

[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:

---

[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 [CAWI: type; CATI: tell me] the dollar amount 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 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
[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  
 [NUMBOX, 0-30000000]

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

IF PE\_CAPITAL\_CONF=2,3, GO BACK TO PE\_CAPITAL\_WS TO ALLOW R TO UPDATE NUMBOX VALUES

[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 institution, 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 institution, 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=0,777777777,999999998,999999999,MISSING] Business loan/investment  
from family/friend(s)
- F. [SHOW IF PE\_CAPITAL\_1\_10 = 0 OR  
PE\_CAPITAL\_WS17=0,777777777,999999998,999999999,MISSING] Investment by venture  
capitalist(s)/angel investor(s)
- G. [SHOW IF PE\_CAPITAL\_1\_11 = 0 OR  
PE\_CAPITAL\_WS18=0,777777777,999999998,999999999,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)=777777777,999999998,999999999,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):

[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):
  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):
  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]:  
[IF COUNT\_PECAP3>1: /else: ]

- [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):
  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:
- 

[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]

**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 1920-2025]

---

[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:
- 

[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:
- 

[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:
- 

[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 institution, 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:
- 

[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:

[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:

[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
[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.]

[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 < 77777777,999999998,999999999] Business credit card(s) carrying balances
- B. [SHOW IF BO\_ADDFINANCE\_2\_4 = 1 AND SUM(BO\_ADDFINANCE\_WS4-BO\_ADDFINANCE\_WS12) > 0 AND < 77777777,999999998,999999999] Government-guaranteed business loan from a bank or financial institution, including SBA-guaranteed loans

- C. [SHOW IF BO\_ADDFINANCE\_2\_5 = 1 AND SUM(BO\_ADDFINANCE\_WS4-BO\_ADDFINANCE\_WS12) > 0 AND < 77777777,999999998,999999999] 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 < 77777777,999999998,999999999] Business loan from a federal, state, or local government
- E. [SHOW IF BO\_ADDFINANCE\_2\_7 = 1 AND BO\_ADDFINANCE\_WS14 > 0 AND < 77777777,999999998,999999999] Business loan/investment from family/friend(s)
- F. [SHOW IF BO\_ADDFINANCE\_2\_8 = 1 AND BO\_ADDFINANCE\_WS15 > 0 AND < 77777777,999999998,999999999] Investment by venture capitalist(s)/angel investor(s)
- G. [SHOW IF BO\_ADDFINANCE\_2\_9 = 1 AND BO\_ADDFINANCE\_WS16 > 0 AND < 77777777,999999998,999999999] Crowdfunding (Kickstarter, Indiegogo, etc.)
- H. [SHOW IF BO\_ADDFINANCE\_2\_10 = 1 AND SUM(BO\_ADDFINANCE\_WS17-BO\_ADDFINANCE\_WS20) > 0 AND < 77777777,999999998,999999999] Grants
- I. [SHOW IF BO\_ADDFINANCE\_2\_11 = 1 AND BO\_ADDFINANCE\_WS21 > 0 AND < 77777777,999999998,999999999] [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, 77777777,999999998,999999999,MISSING] Business credit card(s) carrying balances
- B. [SHOW IF BO\_ADDFINANCE\_2\_4 = 0 OR SUM(BO\_ADDFINANCE\_WS4-BO\_ADDFINANCE\_WS12)=0 OR ALL(BO\_ADDFINANCE\_WS4-BO\_ADDFINANCE\_WS12)=77777777,999999998,999999999,MISSING] Government-guaranteed business loan from a bank or financial institution, including SBA-guaranteed loans
- C. [SHOW IF BO\_ADDFINANCE\_2\_5 = 0 OR SUM(BO\_ADDFINANCE\_WS4-BO\_ADDFINANCE\_WS12)=0 OR ALL(BO\_ADDFINANCE\_WS4-BO\_ADDFINANCE\_WS12)=77777777,999999998,999999999,MISSING] Business loan from a bank or financial institution (including online lenders)
- D. [SHOW IF BO\_ADDFINANCE\_2\_6 = 0 OR BO\_ADDFINANCE\_WS13=0,77777777,999999998,999999999,MISSING] Business loan from a federal, state, or local government
- E. [SHOW IF BO\_ADDFINANCE\_2\_7 = 0 OR BO\_ADDFINANCE\_WS14=0,77777777,999999998,999999999,MISSING] Business loan/investment from family/friend(s)

- F. [SHOW IF BO\_ADDFINANCE\_2\_8 = 0 OR BO\_ADDFINANCE\_WS15=0,777777777,999999998,999999999,MISSING] Investment by venture capitalist(s)/angel investor(s)
- G. [SHOW IF BO\_ADDFINANCE\_2\_9 = 0 OR BO\_ADDFINANCE\_WS16=0,777777777,999999998,999999999,MISSING] Crowdfunding (Kickstarter, Indiegogo, etc.)
- H. [SHOW IF BO\_ADDFINANCE\_2\_10 = 0 OR SUM(BO\_ADDFINANCE\_WS17-BO\_ADDFINANCE\_WS20)=0 OR ALL(BO\_ADDFINANCE\_WS17-BO\_ADDFINANCE\_WS20)=777777777,999999998,999999999,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 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):

---

[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):
  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):
  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]:  
[IF COUNT\_BOFN4>1: /else: ]

- [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):
  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):
- 

**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:
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)

NOTE TO PROGRAMMING: TREAT MISSING AS ZERO WHEN DOING THE SUM FUNCTION BELOW.

IF DOV\_GROUP = 1 AND 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 ANY  
(BO\_NUMEMPLOY\_1\_A THROUGH BO\_NUMEMPLOY\_1\_B) = 777777, 999998, 999999  
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):
- 

[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:
  9. None of the above
- 

[SHOW IF BO\_EMPBENEFIT\_1\_1 = 1]

**BO\_EMPBENEFIT\_HEALTHINS\_1.**

How much of the cost of health insurance [IF DOV\_GROUP = 1: does/ELSE: did] your business cover for employees?

**RESPONSE OPTIONS**

1. The business [IF DOV\_GROUP = 1: covers/ELSE: covered] all of the cost (100%)
  2. The business [IF DOV\_GROUP = 1: covers/ELSE: covered] most of the cost (more than 50%)
  3. The business [IF DOV\_GROUP = 1: covers/ELSE: covered] about half or less of the cost (50% or less)
  4. The business [IF DOV\_GROUP = 1: does/ELSE: did] not cover any of the cost but [IF DOV\_GROUP = 1: offers/ELSE: offered] access to discounted plans
- 

[SHOW IF (DOV\_GROUP = 1 OR 4) AND BO\_EMPBENEFIT\_1\_1 = 0]

**BO\_EMPBENEFIT\_HEALTHINS\_2.**

We would like to understand challenges and opportunities for businesses in offering health benefits. To what extent do you agree or disagree with the following statements about providing health insurance to your employees?

I [IF DOV\_GROUP = 1: would be/ELSE: would have been] more likely to provide health insurance benefits...

**GRID ITEMS**

- A. If premium costs were more affordable
- B. If insurance plan options were easier to understand
- C. If the administrative requirements were less burdensome
- D. If my employees expressed a stronger interest in having them

**RESPONSE OPTIONS**

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

[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
77. 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 2025 from your work as [INSERT DOV\_JOB]?

[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):
  8. None of the above
- 

[SHOW IF DOV\_GROUP = 1,2,4, OR 5]

**BO\_PLMARGIN\_1.**

[IF DOV\_GROUP = 1 OR 2: In 2025/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 2025)
- 

[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:
- 

[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 Growing my network with like-minded entrepreneurs

9. Accessing educational materials/content related to [INSERT DOV\_ACTIVITY]
  10. 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]?

---

[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):
  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.

[DISPLAY IF NOT SELECTED IN BO\_REASONS\_1]

### 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):
- 

PROGRAMMING NOTE: IF DOV\_MICROBIZ=1 AND COUNT(BO\_SERVICES\_1\_1-BO\_SERVICES\_1\_11=0)=1 AND BO\_SERVICES\_1<>77,98,99, AUTOPUNCH BO\_SERVICES\_2 WITH RESPONSE OPTION LEFT UNSELECTED AT BO\_SERVICES\_1.

[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, 2, 4, OR 5]

#### DISPLAY\_BO\_POSTPLANS.

Now we want to ask you some questions about what you [IF DOV\_GROUP = 1 or 2: plan to do after you finish; IF DOV\_GROUP = 4 or 5: did after you finished] [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):

---

[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):

---

[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:

---

[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
20. Wholesale Trade

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## GENERAL POPULATION QUESTIONS

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[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:
- 

[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.*

[DISPLAY IF NOT SELECTED IN GP\_CONSIDER\_2]

#### 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\_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\_EMPLOYERLENGTH\_1.**

Thinking about your [IF DOV\_WORKING = 0: most recent job/ELSE: main job (the one that you spend the most time working at)], approximately how long has the business been in existence?

**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:
  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]

**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).]

[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):
  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

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[DISPLAY]

#### FINAL\_DEMO\_INTRO.

There are just a few more questions about yourself.

---

#### DEM\_GENDER\_BIRTH.

What sex were you assigned at birth on your original birth certificate?

#### RESPONSE OPTIONS

1. Male
  2. Female
- 

#### DEM\_GENDER\_CURRENT.

How do you describe yourself?

#### RESPONSE OPTIONS

1. Male
  2. Female
  3. Transgender
  4. Do not identify as male, female, or transgender
- 

[SHOW IF DEM\_GENDER\_CURRENT = 3]

#### DEM\_GENDER\_TRANS.

Would you say you are?

#### RESPONSE OPTIONS

1. Transgender, male to female
2. Transgender, female to male
3. Transgender, gender non-conforming
4. Other (specify):

---

[SHOW IF (DEM\_GENDER\_BIRTH = 1 AND DEM\_GENDER\_CURRENT = 2) OR (DEM\_GENDER\_BIRTH = 2 AND DEM\_GENDER\_CURRENT = 1)]

**DEM\_GENDER\_CONF.**

Just to confirm, you were assigned [DEM\_GENDER\_BIRTH; MAKE FIRST LETTER LOWERCASE] at birth and now you describe yourself as [DEM\_GENDER\_CURRENT; MAKE FIRST LETTER LOWERCASE]. Is that correct?

**RESPONSE OPTIONS**

1. Yes
2. No

---

**DEM\_SEX\_ORIENT.**

The next question is about sexual orientation. Which of the following best represents how you think of yourself?

**RESPONSE OPTIONS**

1. [IF DEM\_GENDER\_CURRENT = 1 DISPLAY] Gay [IF DEM\_GENDER\_CURRENT <> 1 DISPLAY] Lesbian or gay
2. [IF DEM\_GENDER\_CURRENT = 1 DISPLAY] Straight, that is, not gay [IF DEM\_GENDER\_CURRENT <> 1 DISPLAY] Straight, that is, not lesbian or gay
3. Bisexual
4. Something else
77. Don't know

---

**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

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#### 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
- 

#### 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]

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[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:
11. Roommate(s)
12. Other non-relatives, specify:

---

[SHOW IF DEM\_HOUSEHOLD\_3 = 1 OR DEM\_HOUSEHOLD\_5 = 1] [ADD IN TOTAL NUMBER OF CHILDREN AT THE BOTTOM OF THE GRID][ALLOW 77/99 TO BE ENTERED INTO NUMBOX IF CATI R SAYS DON'T KNOW OR REFUSED FOR THE QUESTION]

#### 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]

Total number of (grand)children in household: \_\_\_\_ [SUM THE AMOUNT AS R ENTERS RESPONSES]  
DEM\_HOUSECHILD\_TOTAL.

#### RESPONSE OPTIONS:

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

---

[SHOW IF AT LEAST ONE ROW DEM\_HOUSECHILD<>77,98,99]

#### DEM\_HOUSECHILD\_CONF.

There [IF DEM\_HOUSECHILD\_TOTAL=1: is; ELSE: are] [INSERT DEM\_HOUSECHILD\_TOTAL] [IF DEM\_HOUSECHILD\_TOTAL=1: child/grandchild; ELSE: children/grandchildren] under the age of 18 living in your household more than 3 months in the last 12 months. Is that correct?

**CAWI RESPONSE OPTIONS**

1. Yes
2. No, let me update my responses

**CATI RESPONSE OPTIONS**

1. YES
2. NO SURVEY WILL GO BACK TO DEM\_HOUSECHILD GRID; UPDATE RESPONSES SO TOTAL IS CORRECT

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

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