



Optional: (Providing this information won't impact eligibility, plan options, or costs.)

Fill in all that apply.

20. If Hispanic/Latino, ethnicity:

- Mexican
- Mexican American
- Chicano/a
- Puerto Rican
- Cuban
- Other _____

21. Race:

- White
- Black or African American
- American Indian or Alaska Native
- Filipino
- Japanese
- Korean
- Asian Indian
- Chinese
- Vietnamese
- Other Asian
- Native Hawaiian
- Guamanian or Chamorro
- Samoan
- Other Pacific Islander
- Other _____

Choose one response.

22. Sex assigned at birth (may be found on this person's birth certificate):

- Female
- Male
- Other: _____
- Don't know
- Prefer not to answer

23. Current gender:

- Female
- Male
- Transgender female
- Transgender male
- A different term: _____
- Don't know
- Prefer not to answer

24. Sexual orientation:

- Bisexual
- Lesbian or gay
- Straight (not lesbian or gay)
- A different term: _____
- Don't know
- Prefer not to answer

Step 2: PERSON

Tell us about any income this person gets. Complete this page even if this person doesn't need health coverage.

Current job & income information

Employed: If **this person** is currently employed, tell us about their income. Start with item 25.

Not employed: Skip to item 35.

Self-employed: Skip to item 34.

Current job 1:

25. Employer name

a. Employer address (optional)

b. City _____	c. State [] []	d. ZIP code [] [] [] [] [] []	26. Employer phone number ([] [] [] []) [] [] [] [] - [] [] [] []
------------------	---------------------	--	--

27. Wages/tips (before taxes) Hourly Weekly Every 2 weeks
 Twice a month Monthly Yearly

\$ _____

28. Average hours worked each week

Current job 2: (If this person has more jobs, attach another sheet of paper.)

29. Employer name

a. Employer address (optional)

b. City _____	c. State [] []	d. ZIP code [] [] [] [] [] []	30. Employer phone number ([] [] [] []) [] [] [] [] - [] [] [] []
------------------	---------------------	--	--

31. Wages/tips (before taxes) Hourly Weekly Every 2 weeks
 Twice a month Monthly Yearly

\$ _____

32. Average hours worked each week

33. In the past year, did this person: Change jobs Stop working Start working fewer hours None of these

34. If this person is self-employed, complete a and b:

a. Type of work:

b. How much net income (profits once business expenses are paid) will this person get from this self-employment this month? Go to instructions. \$ _____

continued on the next page



35. **Other income this person gets this month:** Fill in all that apply, and give the amount and how often this person gets it. Fill in here if none.

Note: You **don't** need to tell us about this person's income from child support, veteran's payments, or Supplemental Security Income (SSI).

<input type="radio"/> Unemployment \$ _____ How often? _____	<input type="radio"/> Alimony received (Note: Only for divorces finalized before 1/1/2019.) \$ _____ How often? _____
<input type="radio"/> Pension \$ _____ How often? _____	<input type="radio"/> Net farming/fishing \$ _____ How often? _____
<input type="radio"/> Social Security \$ _____ How often? _____	<input type="radio"/> Net rental/royalty \$ _____ How often? _____
<input type="radio"/> Retirement accounts \$ _____ How often? _____	<input type="radio"/> Other income, type: _____ \$ _____ How often? _____

36. **Deductions:** Fill in all that apply, and give the amount and how often this person gets it. If this person pays for certain things that can be deducted on a federal income tax return, telling us about them could make the cost of health coverage a little lower.

Don't include child support that this person pays, or a cost already considered in the answer to net self-employment (question 34b).

<input type="radio"/> Alimony paid (Note: Only for divorces finalized before 1/1/2019.) \$ _____ How often? _____	<input type="radio"/> Other deductions, type: _____ \$ _____ How often? _____
<input type="radio"/> Student loan interest \$ _____ How often? _____	

37. **Complete only if this person's income changes during the year,** like if this person only works at a job for part of the year or gets a benefit for certain months. If you don't expect changes to this person's monthly income, skip to the next person.

This person's total income this year \$ _____	This person's total income next year \$ _____	<input type="radio"/> Fill in if you think this person's income will be hard to predict.
---	---	--

Thanks! This is all we need to know about this person.