



## STATISTICAL SURVEY ON INCOME AND LIVING CONDITIONS PERSONAL QUESTIONNAIRE PGS-02 (ANNUAL)

Location code				
Household number				
Household split number				

Members of private households are interviewed
Statistics Lithuania guarantees the confidentiality of the received statistical data
We kindly invite you to fill in and submit the statistical questionnaire online at <a href="http://apklausos.stat.gov.lt">apklausos.stat.gov.lt</a>
Information on the protection and management of personal data is provided at <a href="http://stat.gov.lt/asmens-duomenu-apsauga">stat.gov.lt/asmens-duomenu-apsauga</a>

Survey date: 

2	0	2	1				
---	---	---	---	--	--	--	--

  
year month day

### A. PERSONAL DATA

<b>A1</b>	<b>Are you currently living in the household?</b>
Yes	1
No, you are temporarily away until the end of the survey period	2

Filter FA1
If the person is identified ⇒ Filter FA2
If the person is not identified ⇒ A2

<b>A2</b>	<b>What country were you born in?</b>
In Lithuania	1
In another country	2
_____	Country code
Enter the name of the country	
Not specified.....	3

<b>A3</b>	<b>What is your citizenship?</b>
Of the Republic of Lithuania .....	1
Of another country .....	2
_____	Country code
Enter the name of the country	
You have no citizenship.....	3
Not specified.....	4

Filter FA2 (Age = (survey year – 1) – birth year)
If age < 1 and the questionnaire is filled out ⇒ Filter FB1
If age < 1 and the questionnaire is not completed ⇒ AA5
If age ≥ 1 ⇒ A4

<b>A4</b>	<b>Did you ever live abroad for a period of at least 1 year?</b>
Yes .....	1 ⇒ A5
No .....	2 } ⇒ Filter FA3
Not specified .....	3 }

<b>A5</b>	<b>Please indicate when you arrived or last returned to live in Lithuania:</b>
_____ year _____ month	
Not specified	N

Filter FA3 If age < 16 and the questionnaire is filled out ⇒ Filter FB1
If age < 16 and the questionnaire is not completed ⇒ AA5
If age ≥ 16 and the person is identified ⇒ C1
If age ≥ 16 and the person is not identified and the questionnaire is not completed ⇒ C1
If age ≥ 16 and the person is not identified and the questionnaire is filled out ⇒ A6

<b>A6</b>	<b>What is your legal marital status?</b>
Never married	1
Married	2
Divorced	3
Widowed	4
Not specified	5

<b>A7</b>	<b>In which country was your father born?</b>
Lithuania .....	1
Another country .....	2
_____	Country code
Enter the name of the country	
Not specified.....	3

<b>A8</b>	<b>In which country was your mother born?</b>
Lithuania .....	1
Another country .....	2
_____	Country code
Enter the name of the country	
Not specified .....	3

⇒ C1

## B. CHILD CARE

Filter FB1 (Child's age = survey date - date of birth)

If the child's age < 13 ⇒ Filter FB2

If the child's age ≥ 13 ⇒ Filter FP1

Filter FB2

If the child's age < 8 ⇒ B1

If the child's age ≥ 8 ⇒ B3

**B1** Does the child attend nursery or kindergarten?

Yes ..... 1 ⇒ B2

No ..... 2 ⇒ Filter FB3

**B2** Usually how many hours per week?

|||

⇒ B5

Filter FB3

If the child's age < 5 ⇒ Filter FB4

If the child's age ≥ 5 ⇒ B3

**B3** Does the child attend a comprehensive school?

Yes ..... 1 ⇒ B4

No ..... 2 ⇒ Filter FB4

**B4** Usually how many hours per week?

|||

**B5** Does the child attend an extended day group at school, a weekly kindergarten, etc.?

Yes ..... 1 ⇒ B6

No ..... 2 ⇒ Filter FB4

**B6** Usually how many hours per week?

|||

⇒ Filter FB4

Filter FB4

If the child's age < 3 ⇒ B9

If the child's age ≥ 3 ⇒ B7

**B7** Does the child attend a day-care or a children's occupation centre?

Yes ..... 1 ⇒ B8

No ..... 2 ⇒ B9

**B8** Usually how many hours per week?

|||

**B9** Is the child cared for by a paid baby-sitter?

Yes ..... 1 ⇒ B10

No ..... 2 ⇒ B11

**B10** Usually how many hours per week?

|||

**B11** Are the grandparents, other family members (not parents), relatives, friends, neighbours taking care of the child without a payment?

Yes ..... 1 ⇒ B12

No ..... 2 ⇒ Filter FP1

**B12** Usually how many hours per week?

|||

⇒ Filter FP1

## C. WORK, ACTIVITY STATUS

**C1** How would you describe your activity status at the moment?

- |  |    |
|--|----|
| Employee working full time (including a woman on maternity leave and a person on parental leave receiving half or more than half salary) ..... | 1  |
| Employee working part-time (including a woman on maternity leave and a person on parental leave receiving half or more than half salary) ..... | 2  |
| Self-employed working full-time (including unpaid family worker) .....   | 3  |
| Self-employed working part-time (including unpaid family worker) .....   | 4  |
| Unemployed .....   | 5  |
| Pupil, student.....  | 6  |
| A pensioner or recipient of an early retirement pension .....  | 7  |
| A person who is unemployed due to a long-term health problem .....   | 8  |
| Compulsory initial military service soldier .....  | 9  |
| Housewife/househusband .....   | 10 |
| Another economically inactive person (on parental leave and receiving less than half salary amount payment, etc.) ....                         | 11 |

Filter FC1

If age ≥ 16 and the questionnaire is not completed ⇒ AA5

If age ≥ 16 and the questionnaire is filled out ⇒ C2

**C2** Has the current activite status changed in 2020?

Yes ..... 1 ⇒ C3

No ..... 2 ⇒ Filter FC2

<b>C3</b>	<b>What was the activity status every month in 2020?</b> Enter the correct code from question C1 in the cell of each month in the table.											
January	February	March	April	May	June	July	August	September	October	November	December	

Filter FC2

If age &gt; 74 and C1 = 1-4 ⇒ Filter FE1

If age &gt; 74 and C1 = 5-11 ⇒ C5

If age = 16-74 ⇒ C4

**C4** **How many months during last 5 years have you been unemployed last time?**

If you are currently unemployed, the present period of unemployment is considered the last.

|\_|\_| month

You have not been unemployed during this period .. 0

Not specified ..... N

Filter FC3

If C1 = 1-4 ⇒ Filter FE1

If C1 = 5-11 ⇒ C5

**C5** **Are you currently working?**

Yes ..... 1 ⇒ Filter FE1

No ..... 2 ⇒ C6

**C6** **Have you ever worked at least one hour a week and received income?**

Include unpaid work in the family business.

Yes, you have worked at least once for 3 months or longer..... 1

*Permanent job*

Yes, you only worked for less than 3 months for at least 2 consecutive years..... 2

*Regular (seasonal) work*

Yes, you only worked occasionally and for less than 3 months. .... 3

*Only occasional (irregular) work*

No, you never worked ..... 4

⇒ Filter FD1

⇒ H1

**D. LAST MAIN ACTIVITY**

Filter FD1

If age &gt; 74 ⇒ G1

If age = 16-74 ⇒ D2

**D2** **Please indicate the type (nature) of the main economic activity of your last workplace or the type of activity that you engaged in individually:**

Economic activity code in accordance with the Statistical Classification of Economic Activities in the European Community (NACE Rev. 2) |\_|\_|

**D3** **Please indicate your profession (position or main work you performed) in the last workplace or in the course of individual activity:**

Profession code according to the Lithuanian Classification of Occupations (LCO 2012) ..... |\_|\_|

**D4** **What was your employment status?**

Employee..... 1

A person who is self-employed and has employees ..... 2

A self-employed person without employees ..... 3

A person working unpaid in a family business, in personal agriculture ..... 4

⇒ G1

**E. CURRENT MAIN ACTIVITY**

If a respondent has several jobs and cannot indicate which one is the main job, the job with the most hours is considered the main job.

Filter FE1

If a household is interviewed for the 1<sup>st</sup> time or if a household is not interviewed for the 1<sup>st</sup> time and the household member has moved in → E1

Otherwise → E2

**E1** **Have you changed your main job in the last 12 months?**

Yes ..... 1

No ..... 2

⇒ Filter FE2

**E2** **Have you changed your main job since the last survey?**

Yes ..... 1

No ..... 2

Filter FE2

If the person is identified ⇒ E6

If the person is not identified ⇒ E4

**E4** **Please indicate the type (nature) of your workplace's main economic activity or the type of activity you are engaged in individually:**

Economic activity code in accordance with the Statistical Classification of Economic Activities in the European Community (NACE Rev. 2) ..... |\_|\_|

<b>E5</b>	<b>Please indicate your profession (position or work performed) in the main workplace or in the course of individual activity:</b>
-----------	--

Profession code according to the Lithuanian Classification of Occupations (LCO 2012) ..... | | | |

<b>E6</b>	<b>What is your employment status?</b>
Employee .....	1 ⇒ E7
A person who is self-employed and has employees .....	2
A self-employed person without employees .....	3
A person working unpaid in the family business, in personal agriculture .....	4

⇒ E9

<b>E7</b>	<b>You work under:</b>
Open-ended written contract .....	1
Open-ended oral contract .....	2
Fixed term written contract .....	3
Fixed term contract .....	4

<b>E8</b>	<b>Do you have subordinates?</b>
Yes .....	1
No .....	2

<b>E9</b>	<b>How many hours per week do you usually work in your main job?</b>

## F. CURRENT SECONDARY ACTIVITY

<b>F1</b>	<b>Do you work more than one job?</b>
Yes .....	1 ⇒ F2
No .....	2 ⇒ G1

<b>F2</b>	<b>How many hours do you usually work per week in your secondary job?</b>
⇒ G1	

## G. ACTIVITY HISTORY

<b>G1</b>	<b>How many years have you been working (have worked) as an employee or are you (have you been) self-employed?</b>
Not indicated N	

## H. EMPLOYMENT INCOME

<b>H1</b>	<b>Did you receive a salary or other payment for employment in 2020?</b>
Yes, in one job .....	1
Yes, in several jobs .....	2
No, I did not receive it .....	3

⇒ H2  
⇒ M1

<b>H2</b>	<b>What income would be most convenient for you to indicate?</b>
Annual .....	1 ⇒ H3
Monthly .....	2 ⇒ H5
Not indicated .....	3 ⇒ J1

<b>H3</b>	<b>You will indicate the annual income received in the main job:</b>
Calculated amount (pre-tax) .....	1
Amount received after tax .....	2
Amount received if you did not pay taxes .....	3

<b>H3.1</b>	<b>Please specify the amount:</b>
EUR ⇒ Filter FH1	

Filter FH1
If H1 = 1 and H2 = 1 ⇒ H9
If H1 = 2 and H2 = 1 ⇒ H4

<b>H4</b>	<b>You will indicate the annual income received in the secondary job</b>
Calculated amount (pre-tax) .....	1
Amount received after tax .....	2
Amount received if you did not pay taxes .....	3

<b>H4.1</b>	<b>Please specify the amount:</b>
EUR ⇒ H9	

<b>H5</b>	<b>You will indicate the usual monthly salary in the main job:</b>
Calculated amount (pre-tax) .....	1
Amount received after tax .....	2
Amount received if you did not pay taxes .....	3

<b>H5.1</b>	<b>Please specify the amount:</b>
EUR	

<b>H6</b>	<b>How many months did you receive this amount?</b>
⇒ Filter FH2	

Filter FH2
If H1 = 1 and H2 = 2 ⇒ H9
If H1 = 2 and H2 = 2 ⇒ H7

<b>H7</b>	<b>You will indicate the usual monthly salary in the secondary job:</b>
Calculated amount (pre-tax) .....	1
Amount received after tax .....	2
Amount received if you did not pay taxes .....	3

<b>H7.1</b>	<b>Please specify the amount:</b>
EUR	

<b>H8</b>	<b>How many months did you receive this amount?</b>

<b>H9</b>	<b>Please indicate which of the following incomes you received in 2020:</b>	
	Salary supplements, bonuses .....	1
	Payment for overtime, premium for working in harmful conditions.....	2
	Pandemic downtime payment .....	5
	Other income (tips, unused per diem, etc.) .....	3
	You did not receive additional income .....	4
	<div style="display: flex; align-items: center;"> <div style="font-size: 3em; margin-right: 10px;">}</div> <div>             ⇒ H10              ⇒ J1           </div> </div>	

<b>H10</b>	<b>Is the specified additional income included in the amount of income received above?</b>	
	Yes, all additional income is included in the stated income amount .....	1 ⇒ J1
	No, not everything is included.....	2 ⇒ H11

<b>H11</b>	<b>You will indicate additional non-included income received:</b>	
	Calculated amount (pre-tax) .....	1
	Amount received after tax .....	2
	Amount received if you did not pay taxes .....	3

<b>H11.1</b>	<b>Please specify the amount:</b>
	_ _ _ _  EUR

## J. COMPANY CAR

<b>J1</b>	<b>Did your employer give you the opportunity to use the company car for personal purposes in 2020?</b>	
	Yes .....	1 ⇒ J2
	No .....	2 ⇒ K1

<b>J2</b>	<b>Please specify the type of the car:</b>	
	Passenger car.....	1
	Minibus .....	2
	Lorry.....	3
	Truck .....	4
	Other (specify) .....	5

<b>J3</b>	<b>Please specify the make and model of the car:</b>
	_____
	_____

<b>J4</b>	<b>Please specify the year of the car's first registration:</b>
	_ _ _ _

<b>J5</b>	<b>How many months did you use the car in 2020?</b>
	_ _

## K. INCOME FROM WORK IN KIND

<b>K1</b>	<b>Did you receive free car fuel and/or services (payment for communication services, accommodation services, meals, tourist trips, etc.) from work for personal purposes in 2020?</b>	
	Yes .....	1 ⇒ K2
	No .....	2 ⇒ Filters FK1

<b>K2</b>	<b>Please indicate the average monthly value of income in kind and how many months you received this income in 2020:</b>		
1.	Car fuel .....	_ _ _ _  EUR	_ _  month
2.	Car insurance, repair, technical inspection, tire change, etc. ....	_ _ _ _  EUR	_ _  month
3.	Meals, meal vouchers .....	_ _ _ _  EUR	_ _  month
4.	Fee for communication services....	_ _ _ _  EUR	_ _  month
5.	Accommodation.....	_ _ _ _  EUR	_ _  month
6.	Tourist trips .....	_ _ _ _  EUR	_ _  month
7.	Other services (swimming pool subscription, etc.) .....	_ _ _ _  EUR	_ _  month

Filter FK1 If the person is identified ⇒ M1 If the person is not identified ⇒ L1
--

## L. SICKNESS BENEFIT

<b>L1</b>	<b>Did you have a sick leave in 2020?</b>	
	Inability to work due to the pandemic is included: self-isolation or children's isolation, child care due to not attending educational institutions, etc.	
	Yes .....	1 ⇒ L2
	No .....	2 ⇒ M1

<b>L2</b>	<b>For how many days was sickness benefit paid?</b>	
	_ _ _	} ⇒ Filter FL1
	Not specified	

Filter FL1 If H2 = 3 ⇒ M1 In other case ⇒ L3
--

<b>L3</b>	<b>Is sickness benefit included in the above income?</b>
	Yes .....
	No .....

## M. RENTAL INCOME

<b>M1</b>	<b>Did you receive income from the rental of the property after deducting the property owner's expenses for minor repairs, insurance, loan, etc.?</b> Rent of house, apartment, room, land, etc.
-----------	---

Yes ..... 1 ⇒ M2  
 No ..... 2 ⇒ N1

<b>M2</b>	<b>What amount of income did you receive before taxes during the year?</b>
-----------	--

|\_|\_|\_|\_| EUR ⇒ M4  
 Not indicated N ⇒ M3

<b>M3</b>	<b>Please indicate an approximate amount of income:</b>
-----------	---

Less than EUR 150 .....	1
EUR 151–200 .....	2
EUR 201–250 .....	3
EUR 251–300 .....	4
EUR 301–500 .....	5
EUR 501–800 .....	6
EUR 801–1,000 .....	7
EUR 1,001–1,500 .....	8
EUR 1,501–2,000 .....	9
EUR 2,001–3,000 .....	10
EUR 3,001–4,000 .....	11
More than 4,000 .....	12
Not specified .....	13

<b>M4</b>	<b>Did you pay income (business license) tax and social security contributions from this income?</b>
-----------	--

Yes ..... 1 ⇒ M5  
 No ..... 2 ⇒ N1

<b>M5</b>	<b>What amount was paid during the year?</b>
-----------	--

|\_|\_|\_|\_| EUR  
 Not specified N

## N. INCOME FROM BUSINESS, INDIVIDUAL ACTIVITY

<b>N1</b>	<b>Did you receive income from your own business, individual activity, except for agriculture and property rental in 2020?</b>
-----------	--

Yes ..... 1 ⇒ N2  
 No ..... 2 ⇒ O1

<b>N2</b>	<b>You were:</b>
-----------	------------------

Owner of a sole proprietorship .....	1
A person carrying out individual activities according to a business certificate .....	2 ⇒ N5
A person carrying out individual activity according to the certificate of individual activity .....	3
A person working unpaid in the family business .....	4 ⇒ O1
Other (specify) .....	5 ⇒ N5

<b>N5</b>	<b>What was the annual income from business, individual activities for your household needs?</b>
-----------	--

|\_|\_|\_|\_|\_| EUR ⇒ N7  
 Not specified N ⇒ N6

<b>N6</b>	<b>Please indicate an approximate amount of income:</b>
-----------	---

Less than EUR 300 .....	1
EUR 300–500 .....	2
EUR 501–1,000 .....	3
EUR 1,001–2,000 .....	4
EUR 2,001–3,000 .....	5
EUR 3,001–4,000 .....	6
EUR 4,001–5,000 .....	7
EUR 5,001–6,000 .....	8
EUR 6,001–8,000 .....	9
EUR 8,001–10,000 .....	10
EUR 10,001–15,000 .....	11
EUR 15,001–25,000 .....	12
More than Eur 25,000 .....	13
Not specified .....	14

<b>N7</b>	<b>Did you pay income tax or business license tax in 2020?</b>
-----------	--

Yes ..... 1 ⇒ N8  
 No ..... 2 ⇒ N9

<b>N8</b>	<b>Please specify annual amount:</b>
-----------	--------------------------------------

|\_|\_|\_|\_| EUR  
 Not specified N

**N9 Did you pay social security contributions in 2020?**

Yes ..... 1 ⇒ N10  
 No ..... 2 ⇒ Filter FN1

**N10 Please specify annual amount:**

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_| EUR

N

Filter FN1

If N7 = 2 and N9 = 2 ⇒ O1

In other case → Filter FN2

Filter FN2

If N7 = 1 and N8 = not specified and/or N9 = 1 and  
 N10 = Not specified ⇒ O1

In other case ⇒ N11

**N11 Did you deduct income or business license tax, social security contributions when specifying the amount of income?**

Yes ..... 1  
 No ..... 2

**O. PROPERTY INCOME****O1 Did you receive any dividends in 2020?**

Yes ..... 1  
 Ne ..... 2

**O2 Did you receive interest on deposits, securities, loans granted in 2020?**

Yes ..... 1 ⇒ O3  
 No ..... 2 ⇒ Filter FP1

**O3 Please specify the amount of interest received:**

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_| EUR ⇒ Filter FP1  
 Not specified N ⇒ O4

**O4 Please specify an approximate amount:**

Less than EUR 10 EUR ..... 1  
 EUR 10–20 ..... 2  
 EUR 21–30 ..... 3  
 EUR 31–70 ..... 4  
 EUR 71–100 ..... 5  
 EUR 101–150 ..... 6  
 EUR 151–200 ..... 7  
 EUR 201–500 ..... 8  
 EUR 501–1,000 ..... 9  
 More than EUR 1,000 ..... 10  
 Not specified ..... 11

**P. PENSIONS, SOCIAL BENEFITS**

Filter FP1

If the person is identified (⇒ Filter FP2

If the person is not identified ⇒ Filter FP3

Filter FP2

If age < 16 ⇒ Filter FZA1

If age ≥ 16 ⇒ P2

Filter FP3

If age ≥ 16 ⇒ P4

If age < 16 ⇒ P1

**P1 Which of the following benefits did the child receive in 2020?**

Orphan's (survivor's) pension, welfare orphan's pension ..... 1  
 Targeted compensation for care or care (assistance) costs ..... 2  
 Disability pension benefits ..... 3  
 He/she did not receive benefits from the list ..... 4

⇒ Filter FZA1

**P2 Did you receive a pension from other countries in 2020?**

Yes ..... 1 ⇒ P5  
 No ..... 2 ⇒ Filter FP6

**P4 Which pensions did you receive in 2020?**

Old age pension ..... 1  
 Early retirement pension ..... 2  
 Compensation for special working conditions ..... 3  
 Disability pension ..... 4  
 Old-age or disability pension, welfare compensation ..... 5  
 Widows', orphans' (survivor's) pension, welfare orphan's pension ..... 6  
 State pension of affected persons ..... 7  
 I or II-degree state pension ..... 8  
 Researchers' state pension ..... 9  
 State pension of officers and soldiers ..... 10  
 State pension of judges ..... 11  
 Pension of other countries ..... 12  
 You did not receive pensions from the list ..... 13

Filter FP4

If P4 = 12 (it doesn't matter if others are marked) ⇒ P5

In other case ⇒ P6

**P5 Please specify the average monthly amount of the pension from other countries and how many months you received it:**

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_| EUR      \_\_\_\_|\_\_\_\_| month

Filter FP5

If the person is identified ⇒ Filter FP6

If the person is not identified ⇒ P6

<b>P6</b>	<b>Which of the following incomes did you receive in 2020?</b>	
	Unemployment social security benefits, also due to the pandemic.....	1
	Targeted compensation for care or care (assistance) costs.....	2
	Targeted payment for compensating study costs for disabled students.....	3
	Compensation for the costs of the purchase of passenger cars and their technical adaptation for the disabled .....	4
	Vocational rehabilitation benefit .....	5
	Social insurance benefits for accidents at work and occupational diseases .....	6
	Severance pay .....	7
	Maternity benefit.....	8
	Childcare allowance.....	9
	Paternity benefit .....	10
	Burial allowance .....	11
	<i>Other payments to reduce the effects of the pandemic:</i>	
	Lump sum payment of 200 euros to pensioners....	13
	Self-employment support subsidy for those changing the type of economic activity.....	14
	Job search allowance (lump sum) .....	15
	Self-employed allowance.....	16
	Lump sum payment to small farmers for the quarantine period .....	17
	Periodic payment to small farmers for the quarantine period .....	18
	You did not received income from the list.....	12

Filter FP6
If age $\geq 60 \rightarrow$ Filter FP7
If age $< 60 \rightarrow$ P7

<b>P7</b>	<b>Did you receive a scholarship in 2020?</b>	
	Yes .....	1 $\Rightarrow$ P8
	No .....	2 $\Rightarrow$ Filter FP7

<b>P8</b>	<b>Please specify the average monthly amount of the scholarship and how many months you received it:</b>	
	_____ EUR	_____ month

Filter FP7
If age $> 74 \Rightarrow$ Filter FR1
If age = 16–74 and C6 = 3 or 4 $\Rightarrow$ Filter FR1
In other case $\Rightarrow$ P9

<b>P9</b>	<b>Did you receive a benefit from your employer after the death of a relative in 2020?</b>	
	Yes .....	1 $\Rightarrow$ P10
	No .....	2 $\Rightarrow$ Filter FR1

<b>P10</b>	<b>Please specify the amount of the payment received:</b>	
	_____ EUR	

## R. PRIVATE PENSION FUNDS

Filter FR1
If sex = 1 (male) and age $\leq 59 \rightarrow$ R5
If sex = 2 (female) and age $\leq 58 \rightarrow$ R5
In other case $\rightarrow$ R1

<b>R1</b>	<b>Did you receive regular income from private pension funds or pension insurance, excluding benefits to heirs in 2020?</b>	
	Yes .....	1 $\Rightarrow$ R2
	No .....	2 $\Rightarrow$ R5

<b>R2</b>	<b>Please specify the amount of the monthly payment (allowance):</b>	
	_____ EUR	$\Rightarrow$ R4
	Not specified	N $\Rightarrow$ R3

<b>R3</b>	<b>Please specify an approximate amount:</b>	
	Less than EUR 150 .....	1
	EUR 150–250 .....	2
	EUR 251–300 .....	3
	EUR 301–350 .....	4
	EUR 351–400 .....	5
	EUR 401–450 .....	6
	EUR 451–550 .....	7
	More than EUR 550 .....	8
	Not specified .....	9

<b>R4</b>	<b>How many months did you receive this payment (allowance)?</b>	
	_____	

<b>R5</b>	<b>As an heir, did you receive a payment from private pension funds or pension insurance in 2020?</b>	
	Yes .....	1 $\Rightarrow$ R6
	No .....	2 $\Rightarrow$ Filter FR2

<b>R6</b>	<b>Please specify the amount of payment (allowance):</b>	
	_____ EUR	$\Rightarrow$ Filter FR2
	Not specified	N $\Rightarrow$ R7

<b>R7</b>	<b>Please specify an approximate amount:</b>	
	Less than EUR 50 .....	1
	EUR 50–100 .....	2
	EUR 101–150 .....	3
	EUR 151–200 .....	4
	EUR 201–300 .....	5
	EUR 301–500 .....	6
	EUR 501–800 .....	7
	EUR 801–1,000 .....	8
	EUR 1,001–1,500 .....	9
	EUR 1,501–2,500 .....	10
	More than EUR 2,500 .....	11
	Not specified .....	12



Filter FR2 If sex = 1 (male) and age > 59 → Filter FS1 If sex = 2 (female) and age > 58 → Filter FS1 In other case → R8	
--	--

<b>R8</b>	<b>Did you yourself (not including contributions paid by the employer to "Sodra") make additional payments to private pension insurance funds (II and III stage) in 2020?</b>
-----------	---

Yes ..... 1 ⇒ R9  
No ..... 2 ⇒ Filter FS1

<b>R9</b>	<b>Please specify the amount paid:</b>
_ _ _ _  EUR	⇒ Filter FS1
Not specified	N ⇒ R10

<b>R10</b>	<b>Please specify an approximate amount:</b>	
	Less than EUR 30 .....	1
	EUR 30–60 .....	2
	EUR 61–100 .....	3
	EUR 101–150 .....	4
	EUR 151–200 .....	5
	EUR 201–300 .....	6
	EUR 301–400 .....	7
	EUR 401–500 .....	8
	EUR 501–700 .....	9
	701–1,300 EUR .....	10
	More than EUR 1,300 .....	11
	Not specified .....	12

## S. REFUNDED PERSONAL INCOME TAX

Filter FS1 If a person is identified ⇒ T1 If a person is not identified ⇒ S1	
--	--

<b>S1</b>	<b>Was the overpaid amount of personal income tax refunded to you in 2020?</b>	
	Yes .....	1
	No .....	2
	Not specified .....	3

## T. HEALTH

<b>T1</b>	<b>How would you describe your health? It is ...</b>	
	Very good .....	1
	Good .....	2
	Fair .....	3
	Bad .....	4
	Very bad .....	5
	Not specified .....	6

<b>T2</b>	<b>Do you suffer from any chronic disease or long-term health issues?</b>
	Long-term is defined as an illness or health problem that has lasted or is likely to last for 6 months or more.
	Yes ..... 1
	No ..... 2
	Not specified ..... 3

<b>T3</b>	<b>For at least the past 6 months, has your activity been limited compared to normal human activity due to health problem? Would you say it was...</b>
	Severely limited ..... 1
	Limited but not severely..... 2
	Not limited at all..... 3
	Not specified ..... 4

<b>T4</b>	<b>Was there any time during the last 12 months when you really needed a medical examination or treatment (excluding dental) for yourself?</b>
	Yes ..... 1 ⇒ T5
	No..... 2 ⇒ T7

<b>T5</b>	<b>Did you have these services in all cases?</b>
	Yes ..... 1 ⇒ T7
	No..... 2 ⇒ T6

<b>T6</b>	<b>Please specify the main reason:</b>	
	Could not afford (too expensive) .....	1
	Had to wait a long time for service (difficult to get appointment ticket, referral, etc.) .....	2
	Due to lack of time (work, childcare, etc.) .....	3
	Too far, no means of transportation.....	4
	Fear of doctors, hospitals, examination, treatment .....	5
	Wanted to wait and see if problem got better on its own.....	6
	Did not know any good doctor or specialist .....	7
	Other (specify) .....	8

T7	During the last 12 months, was there even one case when you really needed a dentist's examination or treatment?
Yes .....	1 ⇒ T8
No.....	2 ⇒ Filter FU1

<b>T8</b>	<b>Did you receive these services in all cases?</b>		
	Yes .....	1	⇒ Filter FU1
	No .....	2	⇒ T9

<b>T9</b>	<b>Please specify the main reason:</b>	
	Could not afford (too expensive) .....	1
	Had to wait a long time for service (difficult to get appointment ticket, referral, etc.) .....	2
	Due to lack of time (work, childcare, etc.) .....	3
	Too far, no means of transportation .....	4
	Fear of doctors, hospitals, examination, treatment..	5
	Wanted to wait and see if problem go better on its own .....	6
	Did not know any good doctor or specialist .....	7
	Other (specify) .....	8

## U. TRAINING AND EDUCATION

Filter FU1
If age < 60 ⇒ U1
If age ≥ 60 ⇒ U4

<b>U1</b>	<b>Are you currently studying at a higher, vocational or general school?</b>
Yes .....	1 } ⇒ U3
Yes, but currently on leave .....	2 }
No .....	3 ⇒ U4

<b>U3</b>	<b>Where do you study?</b>
In primary (1-4) grade of general education school .....	1
In the 5th-10th grade of a general education school or in the 1st-2nd grade of a gymnasium .....	2
In the 11th-12th grade of a general education school or in the 3rd-4th grade of a gymnasium.....	3
In a vocational training institution, which you entered without a basic education.....	4
At the vocational training institution, you entered with your basic education.....	5
In the vocational training institution, you entered with your secondary education .....	6
In college .....	7
At the university, academy, seminary – in bachelor's studies .....	8
At a university, academy, seminary – master's degree or equivalent studies* .....	9
In a university, institute, academy, seminary – doctoral studies .....	10

<b>U4</b>	<b>What did you finish?</b> Please indicate the educational institution where you received your highest education
Doctorate, post-graduate studies at a university (academy, institute, seminary) .	1
Master's degrees and equivalent studies at a university (academy, institute, seminary) .....	2
Bachelor studies at a university (academy, institute, seminary) .....	3
College .....	4
Higher school (until 2006) .....	5
Special secondary school, technical school (until 1995) .....	6
Vocational training institution you entered with secondary education .....	7
The comprehensive school where you received your secondary education.....	8
The vocational training institution you entered with your basic education.....	9
Vocational training institution that you entered without basic education .....	10
The general education school or vocational training institution where you received your basic education .....	11
The comprehensive school where you received your primary education.....	12
You haven't finished primary school.....	13

⇒ V1

⇒ Filter FU2

⇒ V1

\* Master's degree and studies equivalent to it – master's degree, integral, residency studies.

Filter FU2 (Age = (survey year – 1) – birth year)  
If aged 16 - 34 ⇒ U5  
In other case ⇒ V1

<b>U5</b>	<b>After graduating from a vocational training institution, did you acquire secondary education along with your profession?</b>
Yes .....	1
No .....	2

## V. MATERIAL DEPRIVATION

<b>V1</b>	<b>Do you replace worn-out clothes by some new (not-second hand) ones?</b>
Yes .....	1
No, because you can't afford it.....	2
No, for other reason.....	3

<b>V2</b>	<b>Do you have two pairs of shoes in good condition that are suitable for daily activities (e.g. for going to work)?</b>
Yes .....	1
No, because you can't afford it.....	2
No, for other reason.....	3

<b>V3</b>	<b>Do you get-together with friends/relatives for a drink/meal at least once a month?</b>
Yes .....	1
No, because you can't afford it.....	2
No, for other reason.....	3

<b>V4</b>	<b>Do you <u>regularly</u> participate in a paid leisure activity?</b> Leisure activities: sports, going to cinemas, concerts, etc.
Yes .....	1
No, because you can't afford it .....	2
No, for other reason.....	3

<b>V5</b>	<b>Do you spend a small amount of money most weeks on yourself, for your own pleasure (buying/doing something for yourself)?</b>
Yes .....	1
No, because you can't afford it .....	2
No, for other reason .....	3

<b>V6</b>	<b>Do you have an Internet connection at home for personal use when needed?</b>
Yes .....	1
No, because you can't afford it .....	2
No, for other reason .....	3

## Z. QUALITY OF LIFE

<b>Z1</b>	<b>Overall, how satisfied are you with your life these days?</b> Please answer on a scale of 0 to 10, where 0 means not at all satisfied and 10 means completely satisfied.
-----------	--

0 1 2 3 4 5 6 7 8 9 10

Not specified

N

<b>Z2</b>	<b>Do you trust strangers?</b> Please answer on a scale of 0 to 10, where 0 means that in general you do not trust strangers and 10 that you completely trust them.
-----------	--

0 1 2 3 4 5 6 7 8 9 10

Not specified

N

⇒ Filter FZA1

## ZA. CHILD HEALTH

Filter FZA1 If age > 15 ⇒ AA1 If age ≤ 15 ⇒ ŽA1
---

<b>ZA1</b>	<b>How would you describe your child's health? It is ...</b> Very good ..... 1 Good ..... 2 Fair ..... 3 Bad ..... 4 Very bad ..... 5 Not specified ..... 6
------------	---

<b>ZA2</b>	<b>In the last 6 months, have the child's activities been limited compared to the child's usual activities due to health problems? Would you say it was...</b>
------------	--

Severely limited.....	1
Limited but not severely .....	2
Not limited at all .....	3
Not specified .....	4

## AA. SURVEY INFORMATION

<b>AA1</b>	<b>Survey method:</b> Paper assisted personal interview ..... 1 Computer assisted personal interview ..... 2 Telephone assisted personal interview ..... 3 The questionnaire filled out by the respondent online ..... 4 Other ..... 5
------------	---

Filter FAA2 If the number of household members aged 16 and over = 1 ⇒ AA4 In other case ⇒ AA2
---

<b>AA2</b>	<b>Did the person surveyed answer the questionnaire questions himself/herself?</b> Yes ..... 1 ⇒ AA4 No, another member of the household ..... 2 ⇒ Filter FAA3
------------	--

Filter FAA3 If the number of household members aged 16 and over = 2 ⇒ AA4 In other case ⇒ AA3
---

<b>AA3</b>	<b>Please indicate which household member answered the questionnaire questions:</b>	Personal number (personal identification code)	_ _ _
------------	---	--	-------

<b>AA4</b>	<b>Please indicate how much time it took to complete the questionnaire:</b>	_ _ _  min.
------------	---	-------------

<b>AA5</b>	<b>Your comments (if any):</b>
------------	--------------------------------

Statistical survey questionnaire to be submitted via the system e. *Statistika Gyventojams*: <https://apklausos.stat.gov.lt> or [apklausos@stat.gov.lt](mailto:apklausos@stat.gov.lt).

Contact: Statistics Lithuania, Tel. +370 5 236 4989 or Email [nut@stat.gov.lt](mailto:nut@stat.gov.lt)

**INFORMATION**  
**REGARDING STATISTICAL SURVEY ON INCOME AND LIVING CONDITIONS**  
**(QUESTIONNAIRE PGS-02 (ANNUAL))**

<b>LEGAL BASIS</b>	Regulation (EU) 2019/1700 of the European Parliament and of the Council of 10 October 2019 establishing a common framework for European statistics relating to persons and households, based on data at individual level collected from samples, amending Regulations (EC) No 808/2004, (EC) No 452/2008 and (EC) No 1338/2008 of the European Parliament and of the Council, and repealing Regulation (EC) No 1177/2003 of the European Parliament and of the Council and Council Regulation (EC) No 577/98
<b>PURPOSE, TYPE AND COVERAGE OF STATISTICAL SURVEY</b>	<p>The purpose of the Survey is to prepare and publish statistical information on population income, poverty, social exclusion and living conditions which is comparable at the EU level.</p> <p>It is a statistical sample survey.</p> <p>The sample covers 8,000 households. Statistical data are collected through population interviewing.</p>
<b>TIME AND PLACE OF PUBLICATION OF STATISTICAL INFORMATION</b>	<p>In April and July, in the news releases;</p> <p>In August, in the statistical publication “Population income and living conditions”;</p> <p>On the Official Statistics Portal (<a href="http://osp.stat.gov.lt">osp.stat.gov.lt</a>).</p>
<b>OBLIGATION TO PROVIDE STATISTICAL DATA</b>	Pursuant to Point 1 of Article 17 of the Law on Official Statistics of the Republic of Lithuania, respondents must provide free of charge correct statistical data, including personal data, among them also special categories of personal data, and the data which allow direct or indirect identification, in accordance with the procedure laid down by legal acts for the purpose of implementation of the Official Statistics Programme. The respondents being natural persons must provide statistical data, including personal data, among them also special categories of personal data, and the data which allow direct or indirect identification, if so provided by legal acts of the European Union or by laws.
<b>CONFIDENTIALITY OF STATISTICAL DATA AND PROTECTION OF PERSONAL DATA</b>	<p>Paragraph 2 of Article 14 of the Law on Official Statistics of the Republic of Lithuania: “Confidential statistical data may be used exclusively for the purposes of official statistics, except as provided for in paragraph 3 of this Article”.</p> <p>Information on the protection and management of personal data is provided at <a href="http://stat.gov.lt/asmens-duomenu-apsauga">stat.gov.lt/asmens-duomenu-apsauga</a>.</p>

---