

FORM FRB-1a
(2-14-63)

U.S. DEPARTMENT OF COMMERCE
BUREAU OF THE CENSUS
FOR THE BOARD OF GOVERNORS OF
THE FEDERAL RESERVE SYSTEM

**FAMILY BALANCE SHEET
AND
INCOME STATEMENT**

INSTRUCTIONS FOR COMPLETING THIS QUESTIONNAIRE

This self-enumeration form is designed to cover all family assets and debts as of December 31, 1962, and family income received during 1962. By family we mean those persons related to the head of the household who were living with the head on December 31, 1962.

This form allows for a wide variety of situations, not all of which will be relevant for any one family. On the other hand, it may not be adequate to cover certain special situations. If it is not clear where a particular asset or debt is to be reported, we would appreciate your giving a brief explanation either to the interviewer or in written notes.

For families with their own business or profession, some assets such as residences, automobiles, and checking accounts may be used for both personal and business purposes. When a checking account is used for both business and personal purposes, the entire balance should be reported as a business asset in Question 14. For assets other than checking accounts, please report the business share of the asset value and any associated debts under Question 14 and the personal share under the appropriate nonbusiness category.

For any asset held by a member of the family on December 31, 1962, enter the total value of his holdings on that date in the column designated for that family member, i.e., Head, Wife, or All Other Family Members. If a particular asset was not held in the family on December 31, 1962, check the box labeled "None" for that item.

When assets are jointly held, report the total value only once -- in the column for the principal person holding the asset. For example, if an asset was held jointly by head and wife, enter the total value in the space for the head; do not double count the same asset by entering it also in the column for the wife. If assets are held jointly with someone outside this family, please report only this family's share.

Assets held by family members other than the head and wife should be combined, and the total value entered in the column "All Other Family Members."

Please consult records in providing this information because we are anxious to have these data as accurate as possible. If you have consulted records in answering a particular item, please check the box marked "Yes." If you did not, please check the box marked "No."

The following example may be of help to you in completing the balance sheet. Suppose that you, as the head, held jointly with your wife two U.S. Savings Bonds on December 31 with a face value of \$1,000 each. You should enter \$2,000 in the column labeled "Head." Each of your two sons also held a U.S. Savings Bond with a face value of \$1,000. You should also enter \$2,000 in the column marked "All Other Family Members." Thus, assuming that you consulted records in answering this question, the proper entries would be:

Item	Mark (X) if NONE	Head		Wife		All other family members		Records Consulted	
		Dollars	Cents	Dollars	Cents	Dollars	Cents	Yes	No
2. U.S. Savings Bonds - total face value	<input type="checkbox"/>	\$ 2,000	00	\$	00	\$ 2,000	00	<input checked="" type="checkbox"/>	<input type="checkbox"/>

CENSUS USE ONLY

Interview I (date)	Interview II (appointment date)	Sample Control No.
Interviewer (name)	Telephone No.	

Section I - ASSETS AND LIABILITIES, December 31, 1962
 (Please provide the information as of December 31, 1962)

Part A		Mark (X) if NONE	Head (c)		Wife (d)		All other family members (e)		Records Consulted (f)		
Item (a)	Yes								No		
	1								2	1	2
1. Checking accounts in banks	a. Number of accounts	<input type="checkbox"/>							1 <input type="checkbox"/>	2 <input type="checkbox"/>	
	b. TOTAL balances in all accounts on December 31, 1962		Dollars	Cents	Dollars	Cents	Dollars	Cents	1 <input type="checkbox"/>	2 <input type="checkbox"/>	
			\$		\$		\$				
2. U.S. Savings Bonds - total face value		<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>	
FEDERAL GOVERNMENT MARKETABLE SECURITIES, INCLUDING THOSE OF FEDERAL CORPORATIONS AND AGENCIES (Report TOTAL PAR VALUE as of December 31, 1962)											
3. U.S. Government bills		<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>	
4. U.S. Government notes		<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>	
5. U.S. Government certificates		<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>	
6. U.S. Government Bonds (Other than Savings Bonds)	a. 1963-1967 maturity date	<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>	
	b. 1968-1972 maturity date	<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>	
	c. 1973-1982 maturity date	<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>	
	d. 1983 or later maturity date	<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>	
	e. Do not know maturity date	<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>	
OTHER MARKETABLE DEBT OBLIGATIONS (Report TOTAL PAR VALUE as of December 31, 1962)											
7. Bonds, notes, or debentures	a. State and local governments	<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>	
	b. Foreign corporations and governments	<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>	
	c. Domestic corporations	<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>	
OTHER ASSETS (Report TOTAL AMOUNT as of December 31, 1962)											
8. Money OWED TO your family	a. Mortgage assets	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>	
	b. Outstanding loans to businesses (Do not include here loans to businesses in which you have an equity interest)	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>	
	c. Other loan assets	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>	
9. Individual annuities (total amount paid in as of December 31, 1962) (Do not include annuities currently paying income, regular life insurance policies with an annuity feature, or annuities connected with your employment.)		<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>	
10. Beneficial interest in estates in probate on December 31, 1962. (Your best estimate of amount that will be received.)		<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>	

Part A - (Continued)		Mark (X) if NONE (b)	Head (c)		Wife (d)		All other family members (e)		Records Consulted (f)	
Item (a)	Dollars		Cents	Dollars	Cents	Dollars	Cents	Yes	No	

OTHER ASSETS (Continued)

(Report TOTAL AMOUNT as of December 31, 1962)

11. Life insurance policies	a. Term and group policies - face value of all	<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>
	b. Ordinary life, limited payment, endowment, and other types of non-term policies									
	(1) Face value of all	<input type="checkbox"/>	\$	00	\$	00	\$	00	1 <input type="checkbox"/>	2 <input type="checkbox"/>
	(2) Loan or cash surrender value of all	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
	c. Loans outstanding on December 31, 1962, that were secured by any of these policies. (Do not include here money owed by your own business.)	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
(1) Amount of all loans										

NOTES

Part B - SAVINGS ACCOUNTS held on December 31, 1962

12. On December 31, 1962, did any member of this family have a savings account in a Bank, a Savings and Loan Association, or a Credit Union?

1 No (Skip to Question 13)

2 Yes → a. TOTAL number of savings accounts

Number

(Please provide the information requested below for each savings account held by family members. Use one line for each account. If more space is needed, use "NOTES" space or attach an additional sheet of paper.)

Line No.	Family member (a)	Full name of institution and city (b)	Balance as of December 31, 1962 (c)		Records Consulted (d)	
			Dollars	Cents	Yes	No
1	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
2	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
3	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
4	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
5	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
6	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
7	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
8	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
9	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
10	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
11	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
12	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
13	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
14	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
15	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
16	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
17	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
18	1 <input type="checkbox"/> Head 2 <input type="checkbox"/> Wife 3 Other (Specify) _____	Name _____ City _____	\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>

Part C - PUBLICLY TRADED STOCK OR SHARES IN MUTUAL FUNDS held on December 31, 1962

13. On December 31, 1962, did any member of this family own any publicly traded stocks, or shares in mutual funds or investment clubs?

1 No (Skip to Question 14) 2 Yes → (Please provide the information requested below for each issue of stock or mutual fund held by the family on December 31, 1962. Use one line for each issue. Enter each investment club on one line, reporting the value of the family member's holding in Column (g). If more space is needed, use "NOTES" space or attach an additional sheet of paper.)

Records Consulted 1 Yes 2 No

Line Number	Family member owning (H - Head W - Wife Other (Specify)) (a)	Full name of issuing corporation, fund or club (Issues held on December 31, 1962) (If preferred stock, also enter dividend rate) (b)	Type of issue ("X" one type) (c)				Total number of shares owned on December 31, 1962 (d)	Is this stock listed in most newspapers (If "No," answer Col (f) and (g).) (e)		Answer only if "No" to Col. (e)		
			Common	Preferred	Mutual	Investment Club		Yes	No	Market price per share on Dec. 31, 1962 (f)	Total market value on Dec. 31, 1962 (g)	
											Dollars	Cents
1			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
2			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
3			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
4			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
5			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
6			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
7			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
8			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
9			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
10			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
11			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
12			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
13			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
14			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
15			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
16			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
17			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	
18			1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>	4 <input type="checkbox"/>		1 <input type="checkbox"/>	2 <input type="checkbox"/>		\$	

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19		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
20		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
21		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
22		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
23		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
24		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
25		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
26		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
27		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
28		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
29		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
30		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
31		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
32		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
33		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
34		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
35		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
36		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
37		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
38		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
39		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
40		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
41		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
42		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
43		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
44		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$
45		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4		<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 1	<input type="checkbox"/> 2		\$

Part D - OWNERSHIP OR ACTIVE INTEREST IN BUSINESSES on December 31, 1962

14. On December 31, 1962, did any member of this family own his own business, or have an active interest in a partnership, a farm operation, a professional practice, an unincorporated business, or a closely held corporation?

1 No (Skip to Question 15)

2 Yes

a. TOTAL number of such businesses

Number

(Please provide the information requested below for each business in which a family member was active in management. Use one column for each business. If more space is needed, use "NOTES" space or attach an additional sheet of paper.)

Item	Provide information as of December 31, 1962							
	BUSINESS							
	1		2		3		4	
a. Type of business								
b. Name of business								
c. Legal form of organization	1 <input type="checkbox"/> Corporation 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Sole proprietorship 4 <input type="checkbox"/> Other	1 <input type="checkbox"/> Corporation 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Sole proprietorship 4 <input type="checkbox"/> Other	1 <input type="checkbox"/> Corporation 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Sole proprietorship 4 <input type="checkbox"/> Other	1 <input type="checkbox"/> Corporation 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Sole proprietorship 4 <input type="checkbox"/> Other	1 <input type="checkbox"/> Corporation 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Sole proprietorship 4 <input type="checkbox"/> Other	1 <input type="checkbox"/> Corporation 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Sole proprietorship 4 <input type="checkbox"/> Other	1 <input type="checkbox"/> Corporation 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Sole proprietorship 4 <input type="checkbox"/> Other	1 <input type="checkbox"/> Corporation 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Sole proprietorship 4 <input type="checkbox"/> Other
d. Total assets <i>(Book value net of depreciation and other allowable reserves)</i>	\$		\$		\$		\$	
e. Total liabilities <i>(As appears on books)</i>	\$		\$		\$		\$	
f. Equity <i>(Assets "d" minus liabilities "e")</i>	\$		\$		\$		\$	
g. Share of business owned by your family								
(1) As a percent of the business	_____ %		_____ %		_____ %		_____ %	
(2) As a dollar amount <i>(Multiply Item "f" by Item g(1))</i>	\$		\$		\$		\$	
h. If you could have sold your family's share of this business on December 31, 1962, what would have been the market value? <i>(Proceeds after payment of debt)</i>	\$	00	\$	00	\$	00	\$	00
i. Did the business owe any money to your family on December 31, 1962, as a result of loans you had made to the business?	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No <i>(Skip to Item j)</i>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No <i>(Skip to Item j)</i>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No <i>(Skip to Item j)</i>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No <i>(Skip to Item j)</i>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No <i>(Skip to Item j)</i>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No <i>(Skip to Item j)</i>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No <i>(Skip to Item j)</i>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No <i>(Skip to Item j)</i>
(If "Yes," in Item "i")								
(1) How much was owed?	\$		\$		\$		\$	
(2) Did you include this debt under the liabilities of this business? <i>(Shown in Item "e" above.)</i>	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No
j. If a Corporation What was the family's share of the corporation's profit or loss in 1962 after corporate tax liability, but before dividend payments?	1 <input type="checkbox"/> Profit 2 <input type="checkbox"/> Loss \$ _____ 3 <input type="checkbox"/> Broke even	1 <input type="checkbox"/> Profit 2 <input type="checkbox"/> Loss \$ _____ 3 <input type="checkbox"/> Broke even	1 <input type="checkbox"/> Profit 2 <input type="checkbox"/> Loss \$ _____ 3 <input type="checkbox"/> Broke even	1 <input type="checkbox"/> Profit 2 <input type="checkbox"/> Loss \$ _____ 3 <input type="checkbox"/> Broke even	1 <input type="checkbox"/> Profit 2 <input type="checkbox"/> Loss \$ _____ 3 <input type="checkbox"/> Broke even	1 <input type="checkbox"/> Profit 2 <input type="checkbox"/> Loss \$ _____ 3 <input type="checkbox"/> Broke even	1 <input type="checkbox"/> Profit 2 <input type="checkbox"/> Loss \$ _____ 3 <input type="checkbox"/> Broke even	1 <input type="checkbox"/> Profit 2 <input type="checkbox"/> Loss \$ _____ 3 <input type="checkbox"/> Broke even
Records Consulted	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No

Part E - NONACTIVE INTEREST IN BUSINESSES on December 31, 1962

15. On December 31, 1962, did any member of this family have a nonactive interest in a partnership, corporation, or other business arrangement such as real estate syndicates, farms, etc.? (Report only those in which a family member was NOT active in management.)

1 No (Skip to Question 16)

2 Yes

a. TOTAL number of such businesses

Number

(Please provide the information requested below for each business in which a family member had a nonactive interest in management. Use one column for each business. If more space is needed, use "NOTES" space or attach an additional sheet of paper.)

Item	Provide information as of December 31, 1962							
	BUSINESS							
	1		2		3		4	
a. Type of business								
b. Name of business								
c. Legal form of organization	1 <input type="checkbox"/> Corporation 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Other		1 <input type="checkbox"/> Corporation 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Other		1 <input type="checkbox"/> Corporation 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Other		1 <input type="checkbox"/> Corporation 2 <input type="checkbox"/> Partnership 3 <input type="checkbox"/> Other	
d. If you could have sold your family's share of this business on December 31, 1962, what would have been the market value?	\$ 00		\$ 00		\$ 00		\$ 00	
e. Did the business owe any money to your family on December 31, 1962, as a result of loans you had made to the business?	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No ↓		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No ↓		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No ↓		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No ↓	
(If "Yes," in Item "e")								
(1) How much was owed?	\$ 00		\$ 00		\$ 00		\$ 00	
Records Consulted	1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No		1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No	

NOTES

Part F		Mark (X) if NONE	Head		Wife		All other family members		Records Consulted		
Item	(a)		(c)		(d)		(e)		(f)		
			Dollars	Cents	Dollars	Cents	Dollars	Cents	Yes	No	
PROFIT SHARING PLANS (Report TOTAL AMOUNT as of December 31, 1962)											
16. TOTAL amount family member could have withdrawn from profit sharing plans, employer sponsored savings plans, and deferred income plans if he had left company on December 31, 1962, or on last valuation date.		<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>	
RETIREMENT PLANS CONNECTED WITH EMPLOYMENT											
17. TOTAL amount family member could have withdrawn from retirement plans (other than Social Security) if he had left the company on December 31, 1962, or on last valuation date.		<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>	
REAL ESTATE (If family has own business or profession, refer to third paragraph of instructions on Page 1.)											
18. Family Real Estate owned	a. Principal residence on December 31, 1962	(1) Market value	<input type="checkbox"/>	\$	00	\$	00	\$	00		
		(2) Debt outstanding on December 31 (mortgages, including second mortgages and deeds of trust)	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
		(3) Equity in own home (Item (1) minus (2))	<input type="checkbox"/>	\$	00	\$	00	\$	00		
	b. Vacation homes and other residences owned				Number		Number		Number		
		(1) TOTAL number owned for family use	<input type="checkbox"/>								
					Dollars	Cents	Dollars	Cents	Dollars	Cents	
		(2) Market value of all	<input type="checkbox"/>	\$	00	\$	00	\$	00		
		(3) Debts outstanding on December 31 (mortgages, including second mortgages and deeds of trust)	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
	(4) Equity in vacation homes and other residences for family use (Item (2) minus (3))	<input type="checkbox"/>	\$	00	\$	00	\$	00			
19. Other Real Estate (residential rental property, commercial and industrial property, undeveloped land, etc.)	(Do not list real estate included in the values reported in Items 14 and 15 for professions or businesses.)										
	a. Market value of all	<input type="checkbox"/>	\$	00	\$	00	\$	00			
	b. Debt outstanding on December 31 (mortgages, including second mortgages, deeds of trust, or other debts secured by this property)	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>	
	c. Equity in all other real estate (Item "a" minus "b")	<input type="checkbox"/>	\$	00	\$	00	\$	00			

Part F - Continued		Mark (X) if NONE (b)	Head (c)		Wife (d)		All other family members (e)		Records Consulted (f)	
Item (a)	Dollars		Cents	Dollars	Cents	Dollars	Cents	Yes	No	

BROKERAGE ACCOUNTS

(Report TOTAL AMOUNT as of December 31, 1962)

20. Net balance in all brokerage accounts on Dec. 31	a. Credit balance	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
	b. Debit balance	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>

AUTOMOBILES (If family has own business or profession, refer to third paragraph of instructions on Page 1.)

21. Market value of each car owned on December 31, 1962	Car No. 1	Car No. 2	Car No. 3	1 <input type="checkbox"/>	2 <input type="checkbox"/>
	\$	00	\$		

OTHER ASSETS

(Report TOTAL MARKET VALUE as of December 31, 1962)

22. Other assets not previously mentioned (Exclude household furnishings and clothing.)	(Examples: oil royalties, patents, commodity contracts, etc. Use "NOTES" if more space is needed.) Specify type:	<input type="checkbox"/>	Dollars	Cents	Dollars	Cents	Dollars	Cents	1 <input type="checkbox"/>	2 <input type="checkbox"/>
	a.		\$		\$		\$			
	b.		\$		\$		\$			
	c.		\$		\$		\$			
	d.		\$		\$		\$			
	e.		\$		\$		\$			

PERSONAL DEBT

(Report AMOUNT OUTSTANDING as of December 31, 1962)

23. Family debts for non business purposes not previously reported	a. Security loans from banks and other lenders	(1) Loans secured by stock	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
		(2) Loans secured by bonds	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
	b. Installment debt for:	(1) Automobile purchase	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
		(2) Home repair and modernization	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
		(3) Purchase of other consumer goods (including revolving credit but not 30-day charge accounts)	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
		(4) Other purposes	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
	c. Non-installment debt owed to:	(1) Banks	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
		(2) Other financial institutions	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
		(3) Doctors, dentists, hospitals	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>
		(4) Private individuals (Outside the family unit)	<input type="checkbox"/>	\$		\$		\$		1 <input type="checkbox"/>	2 <input type="checkbox"/>

Section II - FAMILY INCOME FOR CALENDAR YEAR 1962

24. Provide the requested information for calendar year 1962

Type of income (a)	Mark (X) if NONE (b)	Head and Wife (c)		All other family members (d)		Records Consulted (e)	
		Dollars	Cents	Dollars	Cents	Yes	No
a. Wages, salaries, commissions, and bonuses (before deductions)	Head	-----	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
	Wife	-----	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
b. Income of sole proprietorship or profession	Profit	-----	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
	OR Loss	-----	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
c. Income of partnership (family's share)	Profit	-----	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
	OR Loss	-----	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
d. Farm Income	Profit	-----	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
	OR Loss	-----	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
e. Dividend Income	(1) Publicly traded stocks, mutual funds, and investment clubs	<input type="checkbox"/>	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
	(2) Closely held corporations with family member active in management	<input type="checkbox"/>	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
	(3) Other closely held corporations	<input type="checkbox"/>	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
f. Interest Income	(1) U.S. Government securities (include Savings Bonds)	<input type="checkbox"/>	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
	(2) State and local bonds	<input type="checkbox"/>	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
	(3) Corporate and foreign bonds	<input type="checkbox"/>	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
	(4) Savings accounts	<input type="checkbox"/>	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
	(5) Loans, mortgages, and other sources	<input type="checkbox"/>	\$	-----			1 <input type="checkbox"/> 2 <input type="checkbox"/>
g. Income from rents and royalties (net of expense)	<input type="checkbox"/>	\$	-----	\$	-----		1 <input type="checkbox"/> 2 <input type="checkbox"/>
h. Income from old-age pensions, Social Security, and regular payments from insurance policies, annuities, and retirement plans	<input type="checkbox"/>	\$	-----	\$	-----		1 <input type="checkbox"/> 2 <input type="checkbox"/>
i. Income from trusts and estates	<input type="checkbox"/>	\$	-----	\$	-----		1 <input type="checkbox"/> 2 <input type="checkbox"/>
j. Other income (e.g., alimony, regular contributions for support from persons outside the household, veteran's payments, etc.) Specify source:	<input type="checkbox"/>	\$	-----	\$	-----		1 <input type="checkbox"/> 2 <input type="checkbox"/>
	<input type="checkbox"/>	\$	-----	\$	-----		1 <input type="checkbox"/> 2 <input type="checkbox"/>
k. Capital gain or loss from sale of securities (Full amount)	Short-term	<input type="checkbox"/>	1 <input type="checkbox"/> Gain 2 <input type="checkbox"/> Loss	\$	1 <input type="checkbox"/> Gain 2 <input type="checkbox"/> Loss	\$	
	Long-term	<input type="checkbox"/>	1 <input type="checkbox"/> Gain 2 <input type="checkbox"/> Loss	\$	1 <input type="checkbox"/> Gain 2 <input type="checkbox"/> Loss	\$	1 <input type="checkbox"/> 2 <input type="checkbox"/>
l. Capital gain or loss from sale of assets other than securities	<input type="checkbox"/>	\$	1 <input type="checkbox"/> Gain 2 <input type="checkbox"/> Loss	\$	1 <input type="checkbox"/> Gain 2 <input type="checkbox"/> Loss	\$	
	<input type="checkbox"/>	\$	-----	\$	-----		1 <input type="checkbox"/> 2 <input type="checkbox"/>

OMIT THIS SECTION IF CHECKED HERE →

Section III - ASSETS HELD IN FORMAL TRUSTS

You have indicated that your family has the right to the principal or corpus of one or more trusts. To find out something about how these assets are invested, we are asking you to complete the special section below. Be sure that you do not record the same asset in both this section and other portions of this questionnaire. The formal trusts covered here refer only to those where some present or future right to the trust principal exists. Do not include the assets of any trust where only an income right exists.

Item (1)	Mark (X) if NONE (2)	Method of valuation (3)	Value on Dec. 31, 1962, of family's share of trust assets held in this form. (Value as indicated in Column (3)) (4)	
			Dollars	Cents
Trust assets				
a. Cash on hand or checking accounts in banks	<input type="checkbox"/>	Cash	\$	
b. Savings accounts in banks and savings and loan associations	<input type="checkbox"/>	Cash	\$	
c. U.S. Savings Bonds	<input type="checkbox"/>	Face	\$	00
d. U.S. Government marketable securities including those of Federal corporations and agencies.	<input type="checkbox"/>	Par	\$	00
e. State and local bonds, notes or debentures	<input type="checkbox"/>	Par	\$	00
f. Bonds, notes or debentures of foreign corporations and governments	<input type="checkbox"/>	Par	\$	00
g. Domestic corporate bonds, notes or debentures	<input type="checkbox"/>	Par	\$	00
h. Publicly traded common stocks and shares in mutual funds	<input type="checkbox"/>	Market	\$	
i. Equity in unincorporated businesses, partnerships and closely held corporations	<input type="checkbox"/>	Book net of debt	\$	
j. Real estate	<input type="checkbox"/>	Market	\$	00
k. Other trust assets Specify type:	<input type="checkbox"/>	Market	\$	00

Records Consulted 1 Yes 2 No

NOTES

NOTES