



## Section 1: Background Questions

What is your gender identity?

- ☐ Male
- ☐ Female
- ☐ Non-binary
- ☐ Genderfluid
- ☐ Other

What is your year of birth?

Which of the following races / ethnicities best describes you? Mark all that apply.

☐ White

☐ Asian

- |   |  |
|---|--|
| <input type="checkbox"/> Latinx or Hispanic               | <input type="checkbox"/> Native Hawaiian or Pacific Islander |
| <input type="checkbox"/> Black or African American        | <input type="checkbox"/> Other                               |
| <input type="checkbox"/> American Indian or Alaska Native |  |

Select your nationality from the list below:

What is your current relationship status?

- ☐ Not in a relationship
- ☐ I do not want to say
- ☐ In a relationship more than 1 year
- ☐ In a relationship less than 1 year

The number of people in the family that you grew up in, including yourself:

The number of people in your current household, including yourself:

Which of the following best describes the area where you currently live?

- ☐ Urban
- ☐ Suburban
- ☐ Rural

The number of language(s) you speak:

Describe your personality in terms of each of the following traits by moving the slider. **0** indicates a trait does not apply to you, **10** indicates the trait is extremely strong.

0    1    2    3    4    5    6    7    8    9    10

	Extremely negative		Neutral						Extremely positive		
	-5	-4	-3	-2	-1	0	1	2	3	4	5
Bringing food or drinks to a gathering	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Forgetting to pay a bill	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Catching up with a friend	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

[illegible]

	Extremely negative				Neutral				Extremely positive			
	-5	-4	-3	-2	-1	0	1	2	3	4	5	
Making yourself a cup of coffee / tea	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Bringing reusable bags to the grocery store	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Washing a coffee cup for someone	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Being late for a meeting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
Making your bed	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

### Section 3: Provide contact information

Thank you very much for completing our survey!

If you would like to enter the lottery for the \$50 Amazon gift card, please provide your email address below: