



What Can We Learn from Guaranteed Basic Income Pilots in the United States? Evidence on Employment Effects

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Abstract

Between 2017 and 2025, at least 122 pilots across 33 states and the District of Columbia evaluated a guaranteed basic income (GBI), allocating \$481 million in GBI payments to more than 40,000 recipients. We summarize the methodologies and findings of these studies, with a focus on employment effects. Among the 30 pilots that are randomized controlled trials with published employment outcomes, the mean effect of a GBI is an increase of 0.8 percentage points on the share employed. Among the four such pilots with a treatment group of at least 500 participants, which together comprise 55 percent of all treatment group participants, the mean effect on employment is -3.2 percentage points, or a mean income elasticity of -0.18 that is consistent with estimates from the academic literature. We do not find strong patterns related to the timing of the pilots or most demographic characteristics of the study participants. We suggest caution in relying on evidence from the pilots to inform future policy debates regarding the effect of a GBI on employment: Most of the pilots had small sample sizes and substantial attrition. Even the highest quality pilots were conducted during the COVID-19 pandemic or soon thereafter, and may not generalize to a permanent, universal, nationwide GBI, implemented during current or future economic and policy conditions.

JEL codes: I38; J22

Keywords: Guaranteed Basic Income; Employment; Randomized Controlled Trials

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I. Introduction

Interest in a Guaranteed Basic Income (GBI)—a regular, unconditional cash benefit targeted at specific subpopulations—has surged over the last decade. Silicon Valley entrepreneurs such as Sam Altman have suggested a coming need for a universal basic income (covering the entire population) given the potential labor market displacements resulting from future technological advancement, arguing that it is necessary to pilot a GBI on a smaller scale before such a program is expanded to the entire nation (Altman 2016). Altman subsequently helped fund one of the largest GBI pilots to date (Vivalt et al. 2024). Nonprofit organizations advocating for a GBI have supported other pilots. The Economic Security Project funded early GBI pilots in Jackson, Mississippi in 2018 (Economic Security Project 2020) and in Stockton, California in 2019 (West and Castro 2023). Meanwhile, Mayors for a Guaranteed Income, a coalition of mayors from across the United States, has emerged as a primary advocacy organization for a GBI by securing support from local officials, providing guidance for facilitators, and funding pilots through private philanthropy. The COVID-19 pandemic accelerated the proliferation of GBI pilots as more public and private resources became available to address challenges posed by the pandemic, with many cities funding GBI pilots using federal funds from the American Rescue Plan Act.

The central objective of GBI pilots conducted over the past decade has been to determine the effects that direct, unconditional cash transfers have on recipients, including physical and mental health outcomes of adults and their children, as well as economic outcomes such as employment, income, and consumption. Yet for all the media attention on individual studies, relatively little is known about the comparative nature and efficacy of these pilots, nor their findings in aggregate.

We produce summary statistics of the universe of GBI pilots that took place between 2017 and 2025 in the United States, based on information assembled by the Stanford Basic Income Lab and supplemented by information we collected from individual studies and other public information. We then turn our focus to GBI pilots that have published average treatment effects on the share of participants who are employed, summarizing their magnitude, determining the extent to which effects vary based on attributes of the pilots, and placing the results within the broader academic literature on income effects. We conclude by discussing the implications of the pilots for debate regarding GBI policies.

II. Summary Statistics of GBI Pilots

The universe of GBI pilots we study is derived from the Stanford Basic Income Lab, which provides the location, duration, payment size and number of recipients for each pilot, and also notes whether it is a randomized controlled trial or not. The Stanford Basic Income Lab uses an inclusive definition of guaranteed income: “any program that disburses regular, unconditional cash payments.” Using this definition, there have been 181 unique “guaranteed income” pilots in the United States (Stanford Basic Income Lab 2020). However, this universe includes cases we do not classify as a GBI pilot, as well as older cases that are not the focus of this paper; the pilots we include occurred between 2017 and 2025. The Negative Income Tax (NIT) experiments, which took place in the 1970s, did not constitute GBI pilots because the payment was reduced as earnings rose. Furthermore, the NIT experiments were conducted nearly fifty years ago, so the evidence they produced may or may not generalize to current contexts. Stanford Basic Income Lab (2020) also includes the Alaska Permanent Fund, which varies payments from year to year depending on state oil revenue, and tribal casino payments to tribe members. These are not GBI pilots but rather permanent policies. For purposes of our analysis, we focus on pilots that issue regular, unrestricted cash payments in which the total disbursement is not affected by any behavior of the recipient and where the payments have a start date and an end date. We further restrict our sample to pilots that began between 2017 and 2025. These restrictions result in 122 unique pilots being included in the universe we consider, with the first pilot starting in 2017.¹

Table 1 presents an overview of the GBI pilots that have been completed or that are ongoing in the United States. Of the 122 pilots in our universe, 52 (43 percent) have a published report tracking individual outcomes. Among those, 35 are randomized controlled trials that via random assignment compare the outcomes of a treatment group with a control group to determine the causal effect of the GBI payments, and 30 of those (86 percent of the randomized controlled trials) report employment outcomes.

¹ In order to determine whether a pilot should be included in our universe based on the study dates and location and the nature of the payments, we rely on the data provided for each pilot by the Stanford Basic Income Lab, as well as publicly reported information about the pilot including published reports and media articles. We include one additional pilot not included in the Standard Basic Income Lab universe, the City of Rochester Guaranteed Basic Income Pilot (Kalsi et al. 2025).

Table 1. Descriptive Statistics of Universe of Guaranteed Basic Income Pilots, United States, 2017-2025

Item	Value
Number of pilots	122
with published outcomes	52
with randomized design	35
with employment outcomes	30
Total amount spent on transfers	\$481,432,400
Number of transfer recipients	40,921
Total participants (including control group)	61,664
Mean total payment amount per recipient	\$11,765
Mean duration of receipt among pilots (months)	18.4
Mean monthly payment among pilots	\$616

Note: Total amount spent on transfers only includes transfers to treatment group participants, excluding any lower payments provided to control group participants as well as the value of any incentives for data collection. The number of total participants is understated because not all pilots report the size of the control group. Mean total payment is the total amount spent on transfers divided by number of transfer recipients and thus represents the mean payment amount per recipient across the full period of the pilots. Mean duration of receipt and mean monthly payment are both unweighted means over pilots, not recipients. The universe of pilots represented in this table includes those which appear in the Stanford Basic Income Lab dataset (vintage November 17, 2025), as well as the City of Rochester Guaranteed Basic Income Pilot which does not appear in the Stanford Basic Income Lab dataset. Pilots are excluded from the table if they were conducted outside of the United States, finished before 2017, did not provide unconditional cash payments, or were a permanent policy as opposed to a temporary pilot. Information regarding the pilots is obtained from the Stanford Basic Income Lab dashboard, and supplemented and validated when possible by individual pilot websites and supporting documents, as well as public media reporting.

Source: Authors’ calculations; Stanford Basic Income Lab; Various sources including pilot reports and public reporting on pilots.

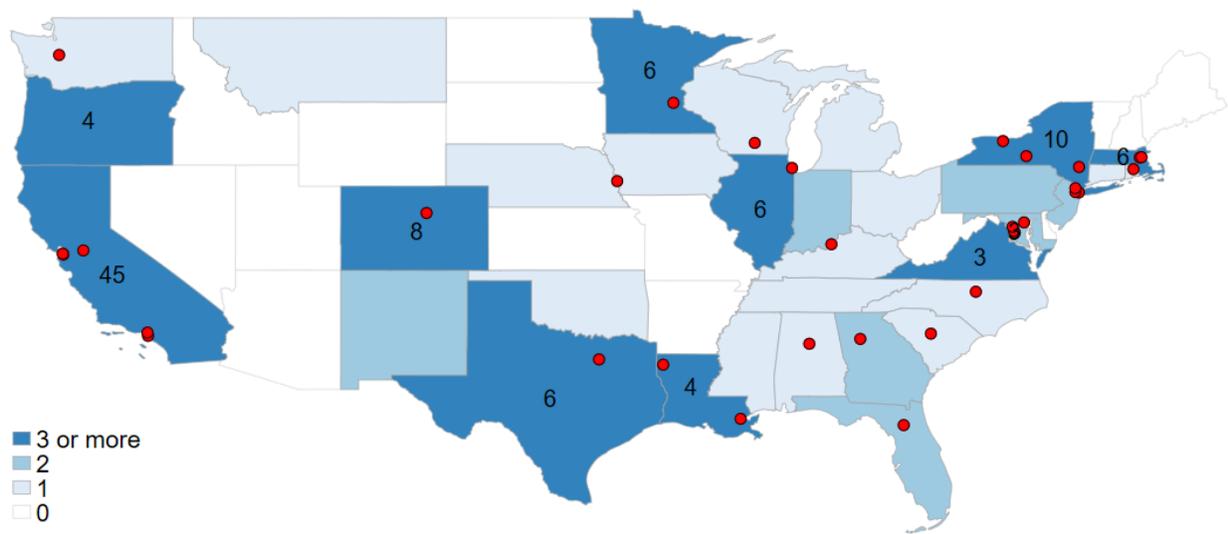
Combining data from the Stanford Basic Income Lab and the individual pilot studies—including information on payment amount, frequency, and number of recipients—we calculate that approximately \$481 million has been spent on transfer payments for GBI recipients; this figure does not include money spent on control groups, survey incentives, program delivery or evaluation.² We calculate that 40,921 individuals have received GBI payments from a pilot (again excluding any control group individuals who in some cases received a modest monthly payment), and 61,664 individuals have been involved in the pilots as either members of treatment or control groups. The number of control group members is far fewer than the number of recipients of GBI payments in large part because not all GBI pilots utilized a comparison

² The \$481 million expenditure includes transfers for all treatment group recipients, regardless of whether they participated in all survey data collection, and is calculated as the product of treatment group size, monthly payment, and number of months of payment receipt. To the extent that some treatment group recipients stopped collecting payments at some point during the study period, our total expenditure estimate would overstate actual spending on transfers.

group. For comparison, the NIT experiments included 8,700 participants, or 14 percent of the GBI pilot participants from 2017-2025 (Moffitt 1981). The mean total payment to treated participants across all months of the study is \$11,765 and the mean experimental duration is 18.4 months.

GBI pilots from 2017-2025 were conducted in 33 states and the District of Columbia, as reported in Figure 1. The states with the most pilots include California (45), New York (10) and Colorado (8). Illinois, Massachusetts, Minnesota and Texas each had 6 pilots, Oregon and Louisiana each had 4 pilots, Virginia and the District of Columbia each had 3 pilots, while all other states each had 2 or fewer pilots. The 30 pilots that were randomized controlled trials and published employment outcomes (denoted as red dots in Figure 1) were conducted in 21 states, including 5 in California, 4 in New York, and either 1 or 2 in the remaining 19 states with at least one randomized controlled trial.³

Figure 1. Number of Guaranteed Basic Income Pilots by State, and Locations of Pilots that are Randomized Controlled Trials with Reported Employment Effects, 2017-2025



Note: The value inside each state represents the number of GBI pilots that took place within the state between 2017 and 2025. States that do not contain a value have either 0 (shaded white) or 1 or 2 (a shade of blue) as per the legend. Red dots indicate the locations of the 30 GBI pilots that were a randomized controlled trial and published employment outcomes.

Source: Authors' calculations; Stanford Basic Income Lab; Various sources including pilot reports and public reporting on pilots; Pilots in Appendix Table A1

³ Because some pilots were conducted across multiple states and each location is marked individually on the map, the total number of pilots marked on the map exceeds 30.

The GBI pilots in Table 1 and Figure 1, even among the randomized controlled trials, vary in their designs, data collection and study quality. One of the largest, most comprehensive, and highest quality GBI pilots in the United States from 2017-2025 is the OpenResearch Unconditional Income Study (ORUS). ORUS was a randomized controlled trial in Illinois and Texas that provided 1,000 individuals with monthly payments of \$1,000 each for three years, for a total transfer of \$36,000 per recipient, at a total cost of \$36.0 million from the transfers alone. Key advantages of the study were its large sample size and its little to no attrition due to reliance on a combination of administrative data and detailed and reliable survey data collection. Notable findings include moderate employment reductions (Vivalt et al. 2024), few significant effects on health outcomes (Miller et al. 2024), and increased consumption (Bartik et al. 2024).

A similarly large pilot in terms of amount spent on GBI payments and size of the treatment group was Basic Income Guaranteed: Los Angeles Economic Assistance Pilot (BIG: LEAP), a randomized controlled trial conducted in Los Angeles, CA. It provided 12 monthly payments of \$1,000 to 3,202 recipients, for a total cost of \$38.4 million (Kim et al. 2024). However, it suffered from overall attrition of 55 percent of its original sample due to reliance on survey data alone. Other notable randomized pilots with substantial treatment group sizes were Chelsea Eats in Massachusetts (1,067 individuals) and the Compton Pledge in California (695 individuals).

Most of the pilots were much smaller. Among the 122 unique pilots, 30 had fewer than 100 treatment group members, and 18 had fewer than 50 treatment group members. Almost all of the pilots that track outcomes rely exclusively on survey data and are thus subject to reporting bias and non-response bias. Notably, when attrition is documented it tends to be substantial. The studies naturally track different variables with different definitions, but some are unconventional, such as including those engaged in unpaid at-home caregiving as being employed. This can make it difficult to compare outcomes across studies. The outcomes from the 70 pilots without published reports to date cannot be compared at all.

III. Employment Effects in GBI Pilots

A chief concern in the policy debate over a GBI is its effect on work. Because a GBI is not designed to phase out as earnings rise, it does not weaken the incentive to work through a substitution effect. However, by increasing a household's income, a GBI may cause individuals

to work less because having a higher income is expected to lead them to consume more of all goods, including leisure, which translates into less time working. At the same time, some have argued that a GBI could increase employment by helping individuals overcome barriers to work, by covering child care costs, transportation costs, or other work-related expenses (Mayors for a Guaranteed Income 2025). Ultimately, the effect of a GBI on employment is an empirical question. This section summarizes the employment effects of GBI pilots and evaluates what factors, if any, drive their heterogeneous findings. Throughout, our goal is not to uncover a single income elasticity parameter. The pilots focus on different subpopulations with different methodologies and unique limitations, making it difficult to credibly pool the studies. Instead, we summarize the range of effects and explore some of the factors that might explain their variation.

Employment effects and other study characteristics

Of the universe of GBI pilots with published reports, 30 of them include average treatment effects on employment participation, that is, whether or not an individual is employed. Throughout this section, we use the term employment to refer to employment participation, as opposed to the intensive margin response on the number of hours worked. We first report descriptive statistics for these pilots related to the study design, sample composition and employment outcomes.

As reported in Table 2, the 30 pilots included in our analysis vary in their design. The treatment group sizes range from 100 to 3,202, with a mean of 359. The size of the treatment group in half of the pilots is 151 or less, which is relatively small for detecting meaningful changes in employment. Control group sizes range from 84 to 4,992. On an annualized basis (calculated as the monthly GBI payment times 12), the mean GBI payment is \$7,177, with a range of \$3,996 to \$12,000. The GBI payments are large relative to baseline household incomes. While we would ideally observe a comprehensive income measure that adjusts for taxes and transfers (including pandemic-related benefits), we are forced to rely on the income measures reported in the pilot reports that are typically more limited and do not define precisely the sources of income that are included. Expressed as a share of mean baseline household income of the treatment group in each pilot, the GBI payment represents an income increase of between 17.8 percent and 87.1 percent, with a mean of 39.5 percent. The GBI payments are provided for an average of 19.2

months, with the longest duration pilot providing payments for 76 months (Sauval et al. 2024). Among the 26 pilots for which we can determine attrition rates, the mean is 37 percent. This substantial amount of attrition could bias treatment effects if attrition is non-random across the treatment and control groups.

Table 2. Descriptive Statistics of Guaranteed Basic Income Pilots with Randomized Designs and Published Employment Effects, 2017-2025

Characteristic	Mean	Median	SD	Min	Max	N
<i>Study Design Attributes</i>						
Treatment group size	359	151	582	100	3,202	30
Control group	503	175	934	84	4,992	30
Annualized payment	\$7,177	\$6,000	\$2,495	\$3,996	\$12,000	30
Total payment	\$11,501	\$9,000	\$7,539	\$2,700	\$36,000	30
Payment duration (months)	19.2	15	12.3	9	76	30
Attrition (share)	0.37	0.36	0.18	0.00	0.67	26
<i>Sample Composition</i>						
Mean baseline annual household income	\$19,242	\$17,733	\$5,719	\$9,204	\$31,836	28
Baseline employment rate	0.53	0.54	0.16	0.22	0.81	29
Share with children	0.74	0.72	0.25	0.23	1	26
Share female	0.71	0.75	0.23	0	1	28
Share married	0.15	0.16	0.09	0	0.28	21
Share Black	0.50	0.46	0.28	0.03	0.97	29
Share Hispanic	0.27	0.20	0.23	0	0.90	27
<i>Study Outcomes</i>						
Effect on share employed	0.008	-0.005	0.084	-0.189	0.200	30
Percent effect on employment	1.5%	-1.4%	15.7%	-31.8%	31.5%	29
Percent change in income from GBI	39.5%	32.4%	19.3%	17.8%	87.1%	28
Employment Elasticity	0.04	-0.05	0.46	-0.84	1.22	27

Note: The universe of pilots represented in this table is those GBI pilots that appear in Table 1, and that further are randomized controlled trials and have published employment outcomes. Information about these pilots is obtained from the Stanford Basic Income Lab dashboard, and supplemented and validated by pilot reports. Annualized payment is the monthly GBI payment multiplied by 12. Total payment is the total amount of GBI payment distributed to each member of the treatment group over the entire study period. Attrition and effect on share employed are calculated based on relevant values in the report when not directly reported. Percent effect on employment is calculated as the effect on share employed divided by baseline employment rate. Percent change in income from GBI is calculated as annualized GBI payment divided by annual household income. Employment elasticity is calculated as percent change in employment divided by percent change in income. The number of pilots used to calculate the statistics in some rows is less than 30 because for some pilots the values or necessary inputs to the values are unavailable.

Source: Authors' calculations; Pilots in Appendix Table A1

Demographic variables for the treatment group are reported in most but not all pilot studies. Each summary statistic reported in Table 2 represents the given statistic over the available pilot means. Baseline individual employment rates of the treatment group tend to be relatively low but vary substantially, ranging from 0.22 to 0.81, with a mean of 0.53. In the treatment group in the

average pilot, 74 percent of participants have children, 71 percent are women, 15 percent are married, 50 percent are Black, and 27 percent are Hispanic. For comparison, the poor population in the United States in 2024 was 23 percent black and 29 percent Hispanic (Shrider and Bijou 2025). The high concentration of Black individuals in the pilots may be a consequence of an explicit focus on specific racial groups, a higher prevalence of pilots in areas with relatively higher concentrations of Black individuals within their low-income populations, or a combination of factors.

Our primary outcome of interest is the average treatment effect of a GBI on employment, that is, whether a recipient is engaged in paid labor market activities or not at the time the final payment is made.⁴ Full-time work, part-time work, self-employment and gig work are counted as employment regardless of alternative provided definitions, subject to availability of these categories in the studies.⁵ We prioritize estimated impacts directly reported in the study if available and consistent with our employment definition, but otherwise calculate the implied impact as the difference in the employment rate in the treatment group between the end of the payment period and the baseline, minus the difference over the same time period for the control group. When employment rates are not reported at the baseline, we rely on a simple comparison of employment rates between the treatment and control group at the end of the payment period, and when employment rates are not reported at the end of the study period, we rely on rates reported either before or after the end of the payment period if available instead. When a given pilot reports employment rates for multiple treatment arms, we rely on the treatment arm that we judge to receive more focus in the report. We include the point estimate for each pilot regardless of whether it is statistically significant.

⁴ Some studies define endline employment as the employment status of the recipient after withdrawal of the intervention (e.g., six months after payments cease). We use the employment status at the time in which the final payment is made. One study (Goodman-Bacon and Palmer 2024b) reports the effect of a GBI solely on a labor supply index that combines extensive and intensive margins. To maintain comparability with other studies, we rely on a set of exploratory outcomes from the same authors reported in Goodman-Bacon and Palmer (2024a) that includes current employment.

⁵ Due to reporting limitations, we are unable to separate out unpaid household work in (Thomas et al. 2025), which reports a positive treatment effect of a GBI on employment inclusive of unpaid household work. But notably, the study reports a positive treatment effect on the share of income coming from earnings, which is suggestive of a potentially positive effect on employment.

As reported in Table 2, GBI pilots have a wide range of employment effects centered around zero. The effect of a GBI on employment at the end of payment receipt ranges from a decrease of 18.9 percentage points to an increase of 20.0 percentage points, with a mean of a 0.8 percentage point increase and a median of a 0.5 percentage point decrease. Table 2 also reports income elasticities, calculated as the percent change in employment divided by the percent change in household income. The elasticities similarly vary widely, ranging from -0.84 to 1.22, with a mean of 0.04 and a median of -0.05.

Timing

All of the GBI pilots at least in part took place during an abnormal time. The COVID-19 pandemic posed an unprecedented shock to the United States economy. In February 2020, the unemployment rate was 3.5 percent, a 50-year low. In March, rising infections led to the declaration of a national health emergency and state-issued stay-at-home orders. By April, the economic shutdown contributed to the unemployment rate rising to a historic 14.8 percent, affecting most pervasively the leisure and hospitality sector that disproportionately employs workers from historically disadvantaged groups including those with lower levels of educational attainment (Falk et al. 2021).

The federal government responded to the pandemic and the associated economic shutdowns with policies that among other measures provided financial assistance to individuals and families. These measures included three rounds of Economic Impact Payments: \$1,200 per adult and \$500 per child in March 2020, \$600 for each adult and child in December 2020, and \$1,400 for each adult and child in March 2021.⁶ Congress also authorized bolstered unemployment assistance starting in March 2020. Pandemic Unemployment Assistance covered workers not eligible for standard unemployment insurance. Federal Pandemic Unemployment Compensation provided a supplement to all unemployed workers of an additional \$600 per week from March 2020 through July 2020, then \$300 per week from December 2020 through September 2021, although some states opted out sooner. Pandemic Emergency Unemployment Compensation provided unemployment benefits to individuals who had exhausted the time limit of their state's

⁶ Tax filers with an adjusted gross income above \$150,000 (married filing jointly), \$112,500 (head of household filers), or \$75,000 (single filers) were not eligible for the full payment.

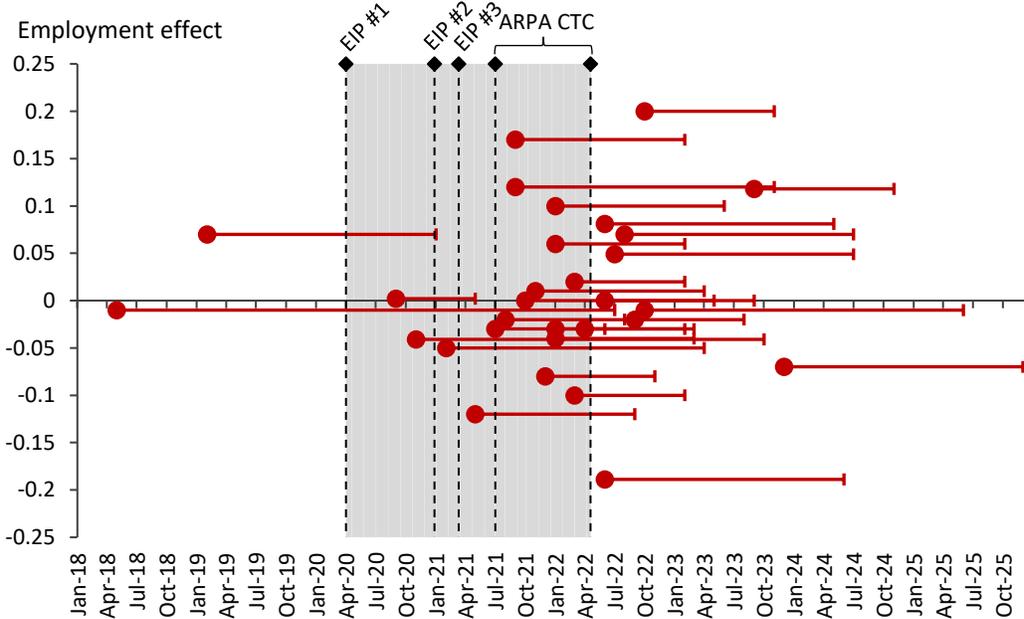
unemployment benefits, providing additional weeks of unemployment assistance. Additionally, Congress in March 2021 made temporary changes to the CTC, increasing the \$2,000 maximum per-child credit to \$3,600 for children under the age of 6 and \$3,000 for children between the ages of 6 and 17, and making the credit fully refundable and eliminating the earnings requirement. Rather than offsetting federal income tax liability during the year and paying out the refundable portion at tax filing time, half of the 2021 CTC was paid in direct monthly benefit payments to parents from July to December 2021 and the other half was paid when families filed their 2021 taxes, typically by April 2022. Finally, various transfer programs were made more generous, including increased benefits in the Supplemental Nutrition Assistance Program, continuous enrollment in Medicaid, and temporary rental assistance, in the midst of other temporary policy changes like the cessation of student loan payments and the closing and reopening of schools.

None of the pilots concluded prior to the onset of the COVID-19 pandemic, and the latest pilot began in December 2023, just seven months after the federal public health emergency was officially declared over yet still during a period of historically high inflation. Figure 2 reports the timing of each pilot within the context of the federal pandemic income transfer policies. Each line segment represents a different pilot, with the dot representing its start date and the vertical hash mark representing its end date. The vertical position of the pilot's line segment indicates its employment effect. For context, the timing of select fiscal policies targeting households is represented in the figure as well, including the passage of each of the three rounds of Economic Impact Payments, as well as the period during which the monthly Child Tax Credit payments under the American Rescue Plan Act were distributed to households.

From the figure it is clear that many pilots started while other government programs were providing substantial transfers to households, especially expanded monthly Child Tax Credit payments under the American Rescue Plan Act. By the time most pilots began, the national unemployment rate had already fallen to levels much closer to its pre-pandemic low from its historical high in April 2020, but the very recently recovered labor market at the onset of many pilots may have shaped the effects of GBI payments. In addition, there was substantial variation in unemployment rates and their recoveries following the pandemic, which could have affected pilots across the country differently. While there is not a clear directional pattern in Figure 2 of

different employment effects depending on their timing, it is still possible that the pandemic and fiscal stimulus shaped their employment effects and consequently their generalizability to periods of more normal economic conditions, even if a clear directional pattern is not readily apparent. Notably, pilots conducted after the period of fiscal response nonetheless occurred during abnormal macroeconomic conditions, with the labor market normalizing but inflation increasing to levels not seen since the 1970s. It is difficult to predict how the changing circumstances during and after the COVID-19 pandemic shaped the results of GBI pilots operating at the same time.

Figure 2. Guaranteed Basic Income Pilots with Randomized Designs and Published Employment Effects, 2017-2025: Start Date, End Date and Treatment Effect on Employment



Note: The figure reports the timing of each pilot within the context of select federal pandemic income transfer policies. Each line segment represents a different pilot, with the dot representing its start date and the vertical hash mark representing its end date. The vertical position of the pilot’s line segment indicates its employment effect. The grey shaded region denotes the time period during which Economic Impact Payments (EIPs) and the American Rescue Plan Act Child Tax Credit (ARPA CTC) payments were made. The enactment of each of the three rounds of EIPs (EIP #1, EIP #2, and EIP #3), as well as the start and end dates of the ARPA CTC (with the final payment made when households filed their 2021 taxes assumed to be April 2022) are represented as vertical dashed lines.
Source: Authors’ calculations; Pilots in Appendix Table A1

Sample size

One of the most striking differences between the pilots is their sample size. Of the 30 pilots in the analysis sample, 20 pilots have no more than 200 participants in the treatment group, and another 6 pilots have more than 200 but no more than 402 participants in the treatment group. The other 4 pilots have treatment group sizes of 695 (Compton Pledge), 1,000 (OpenResearch), 1,067 (Chelsea Eats), and 3,202 (BIG LEAP), and together comprise 55 percent of all treatment group participants. There is no inherent reason why otherwise equivalent studies with larger sample sizes would be expected to have smaller or larger effects, on average. However, the estimated treatment effects for the larger pilots should have lower standard errors due to their larger samples. It is also possible that study quality is positively correlated with the sample size if better funded efforts dedicate more resources to both expanding the sample and investing in the quality of survey instruments, follow-up with participants, and other elements of the study that improve its quality. Alternatively, the studies may have traded off lower sample size for higher study quality.

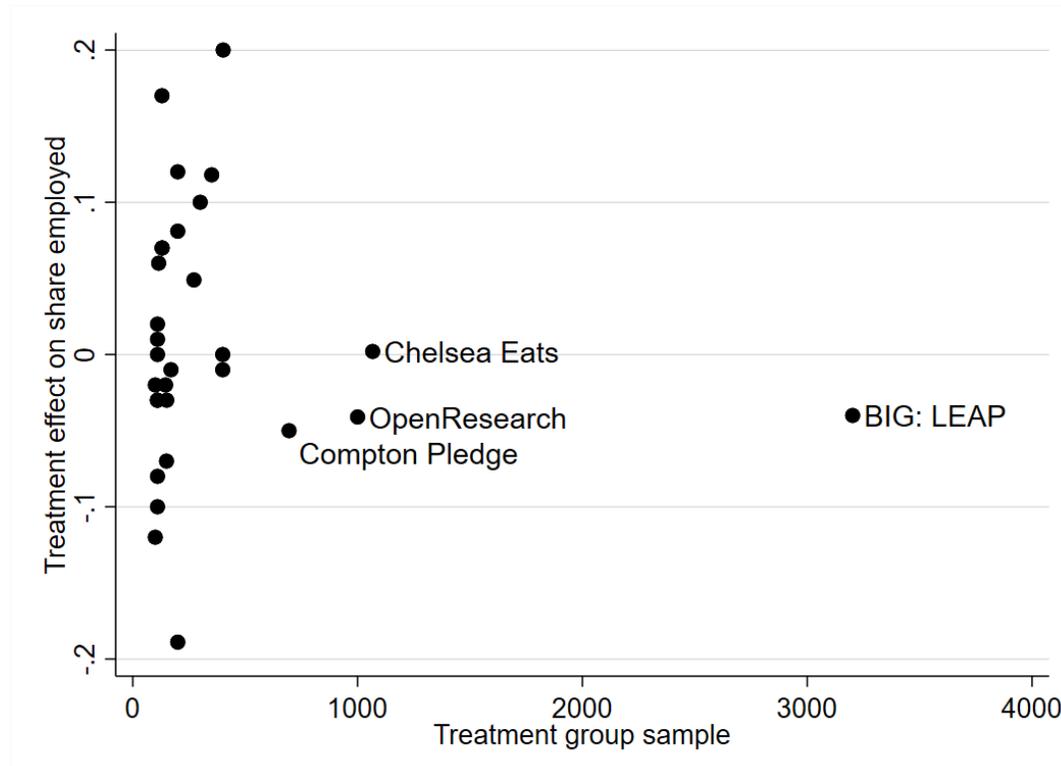
Figure 3 plots the treatment effect on employment and treatment group size for each pilot. Not surprisingly, there is large variance in the treatment effect estimates among the pilots with relatively smaller treatment groups, reflecting their imprecision and thus higher propensity for estimates that deviate further from their (unobserved) population effect. The four pilots with a larger treatment group are clustered closer together. The average treatment effect across these four studies is also lower, -3.2 percentage points compared to an average of 0.8 percentage points for the full set of pilots.

Individual characteristics

We next evaluate the extent to which the treatment effect on employment varies over the characteristics of treatment group participants. Samples comprised of subpopulations whose employment decisions tend to respond more strongly to income gains would be expected to have treatment effects of a larger magnitude. Goodman-Bacon and Palmer (2024) plot average treatment effects of a GBI across a number of baseline characteristics, including labor supply effects versus baseline income from seven GBI pilots. We expand on their analysis by using our broader set of pilots and considering other characteristics. We present these two-way

relationships in Figure 4, where each dot in a given panel represents a unique pilot. We also include a line of best fit and its slope.

Figure 3. Treatment Effect on Share Employed by Treatment Group Sample Size, Guaranteed Basic Income Pilots with Randomized Designs and Published Employment Effects, 2017-2025

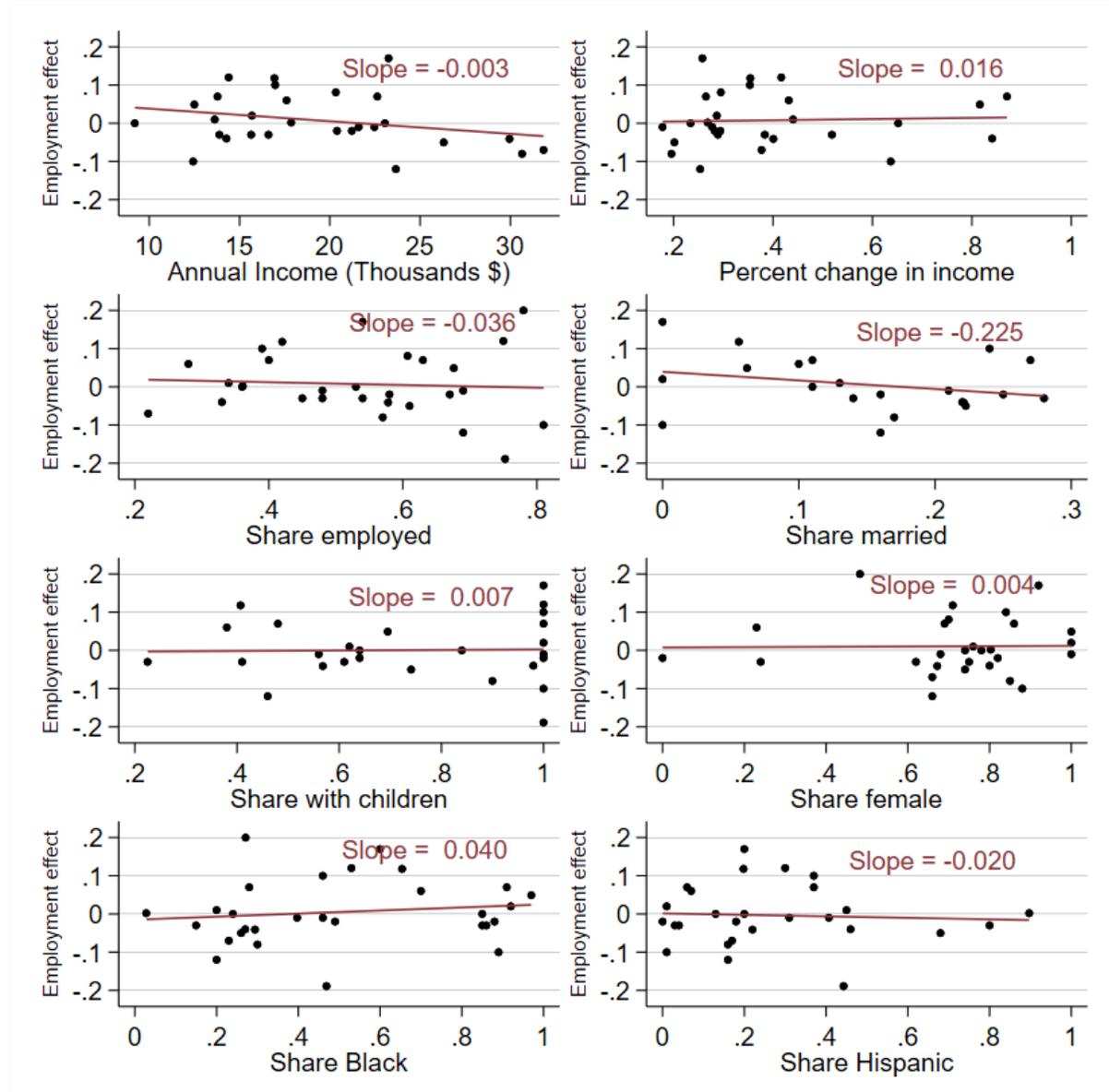


Note: Each dot is a unique pilot with a randomized design and published employment effects. The horizontal axis corresponds to the treatment group sample size, and the vertical axis corresponds to the treatment effect on share employed. Pilots with at least 500 treatment group participants are labeled with the pilot name.
Source: Authors’ calculations; Pilots in Appendix Table A1.

Figure 4 reports a modest negative relationship between the average treatment effect and baseline household income, consistent with the pattern found by Goodman-Bacon and Palmer (2024) for their more limited set of pilots. While we might expect that employment effects would have a larger magnitude (i.e., be more negative) when the percent increase in income arising from the GBI payment is higher, no such relationship is evident. For each of the demographic variables shown—the share that is employed, married, with children, female, Black, or Hispanic—there is no visible relationship with the treatment effect, with the exception of a modest negative relationship between the treatment effect and the share married. This latter result may reflect stronger income effects among married women (see, for example, National

Academies of Sciences, Engineering, and Medicine 2019). The lack of visible relationships for the other demographic variables could be a result of similar employment effects across subpopulations, or the imprecision in the treatment effect estimates that outweighs any underlying relationships.

Figure 4. Treatment Effect on Share Employed by Various Variables, Guaranteed Basic Income Pilots with Randomized Designs and Published Employment Effects, 2017-2025



Note: Within each panel, each dot is a unique pilot with a randomized design and published employment effects. The horizontal axis corresponds to a specific variable, and the vertical axis corresponds to the treatment effect on share employed. Annual income corresponds to annual household income. Percent change in income corresponds to the annualized GBI payment divided by annual household income.

Source: Authors' calculations; Pilots in Appendix Table A1

IV. Comparison with previous literature

In this section we compare the employment effects found in the GBI pilots to the broader literature on the effects of income on employment. Because the GBI pilots all provide cash transfers that do not depend on earnings, they represent a pure income effect. Thus, we convert the average treatment effects into elasticities, and compare them to income effect elasticities from the literature.

We calculate income elasticities from the GBI pilots by dividing the percent change in employment by the percent change in income. The percent change in employment is calculated as the average treatment effect on the share employed divided by the baseline share employed, and the percent change in income is calculated as the annualized amount of GBI (12 times the monthly payment) divided by baseline annual household income. As previously noted, reported baseline incomes are likely understated in the pilot surveys, and thus, the magnitudes of our calculated elasticities are likely muted as well.

Elasticities from the GBI pilots are reported in Panel A of Table 3. Because baseline incomes are not reported in two studies, and baseline employment is not reported in a third study, Table 3 includes only 27 observations before imposing any sample restrictions. The mean (median) elasticity is 0.04 (-0.05) among all GBI pilots, with a range of -0.84 to 1.22. Among the 23 pilots with treatment groups of fewer than 500 participants, the mean (median) elasticity is 0.07 (0.00). Among the 4 pilots with treatment groups with at least 500 participants, the mean (median) elasticity is -0.18 (-0.16).

Panel B of Table 3 places these elasticities in the context of other income elasticities from the academic literature. The median income elasticity from the full set of GBI pilots (-0.05) is in the middle of a range of elasticities reported in a literature review for the Congressional Budget Office by McClelland and Mok (2012), and slightly higher (less negative) than those reported in a consensus study on child poverty by the National Academies of Sciences, Engineering, and Medicine (2019), which range from 0 to -0.12 depending on the population. The mean income elasticity, meanwhile, is slightly positive and thus higher than those reported in these studies. By contrast, the mean and median elasticities from the four GBI pilots with larger treatment groups are somewhat lower (more negative) than the ranges suggested by McClelland and Mok (2012)

and the values suggested by the National Academies of Sciences, Engineering, and Medicine (2019).

Table 3. Comparison Between Elasticities from Academic Literature and Guaranteed Basic Income Pilots with Randomized Designs and Published Employment Effects, 2017-2025

Panel A: Income Elasticities from GBI Studies

Subgroup	Mean	Median	Min	25 th Pctl	75 th Pctl	Max	n
All	0.04	-0.05	-0.84	-0.18	0.26	1.22	27
Treatment group less than 500	0.07	0.00	-0.84	-0.15	0.42	1.22	23
Treatment group at least 500	-0.18	-0.16	-0.41	-0.23	-0.10	0.02	4

Panel B: Income Elasticities from Academic Literature

Study	Elasticity	Population
McClelland and Mok (2012)	-0.1 to 0	Men
	-0.1 to 0	Single women
	-0.1 to 0	Married women
National Academies of Sciences, Engineering, and Medicine (2019)	0	Men
	-0.085	Single women
	-0.12	Married women

Note: Panel A elasticities are calculated from pilot outcomes using reported employment effects and GBI payments. Baseline incomes or employment shares are not reported for three of the pilots in our analysis, so we are unable to calculate their corresponding implied income elasticity. Panel B elasticities are drawn from published studies and represent population-level estimates.

Source: Authors' calculations; Pilots in Appendix Table A1; McClelland and Mok (2012); National Academies of Sciences, Engineering, and Medicine (2019)

Perhaps the most directly comparable evidence on labor supply elasticities comes from Lippold and Łuczywek (2023), who study the effect of receiving extra income due to the expanded CTC in 2021. Like the GBI pilots, this study takes place in the midst of the pandemic and other income support programs, and it focuses on parents with children. Lippold and Łuczywek (2023) report elasticities of -0.34 for all parents of young children and -0.5 for low-income parents of young children. The Lippold and Łuczywek (2023) study is unique among studies of COVID-era income support policies, because it isolates the income effect from the substitution effect that changes the return to work.⁷ They do so by comparing the employment changes of parents with

⁷ Other COVID-19 era studies of the employment effects of increased transfers have shown more mixed results. Studies that leverage the timing of the expanded 2021 CTC and thus combine income and substitution effects find mixed effects on employment (Han et al. 2022; Enriquez et al. 2023; Ananat et al. 2024; Pac and Berger 2024; Schanzenbach and Strain 2024). In addition, there is some evidence that the increased generosity of Unemployment Insurance slowed employment recovery (Holzer et al. 2024). However, none of these studies isolate a pure income effect, and their identification based on policy timing is encumbered by the multitude of factors rapidly changing

children ages 6 and older, eligible to receive \$3,000 per child, to parents of children under the age of 6, eligible to receive \$3,600 per child. This age cutoff sets up a clear discontinuity in payment amounts that allows them to estimate the causal impact of extra income. In addition, they rely on administrative tax data that provides a sufficiently large sample to detect economically meaningful employment effects and suffers from less misreporting than survey data. While the elasticities from even the large-sample GBI pilots are lower in magnitude than those reported by Lippold and Łuczywek (2023), there is at least some evidence that income effects were particularly strong during the time period in question.

Other relatively recent studies, though preceding the COVID-19 pandemic, find a range of responsiveness of employment to income. For example, Wingender and LaLumia (2017) study the income effects of receiving the CTC in the first year of a child's life by comparing parental labor supply of children born in December versus that of parents of children born in January who are ineligible to receive benefits until the following year. They find labor supply reductions of six percentage points among mothers by the third month after delivery, implying an elasticity with a magnitude closer to one.⁸ However, a different study focusing on the same policy variation but relying on administrative tax data does not find any evidence of an employment response (Mortenson et al. 2018). Evidence from the Alaska Permanent Fund, an annual cash disbursement paid to all residents of the state of Alaska, is also mixed. Jones and Marinescu (2022) find null effects on labor supply, with point estimates of around zero. Feinberg and Kuehn (2018) estimate somewhat stronger responsiveness of labor supply with elasticities as negative as -0.15 for men, -0.14 for single women and -0.18 for married women using data from the American Community Survey over the years 2005 to 2015. Similar to the Alaska Permanent Fund are the payments made to tribal members of the Eastern Cherokee reservation funded through a portion of casino profits. Akee et al. (2010) find null effects on parental employment. Meanwhile, recent evidence from lottery winners in the United States finds strong employment

during this time period, such as other policy changes, economic shutdowns, school closings and re-openings, and vaccine rollouts. Thus, these studies are less comparable to the GBI studies conducted during the pandemic which provide a lump sum transfer and rely on a randomized design.

⁸ The percent decrease in employment per \$1,000 increase in tax savings is at least 4.4 to 5.6 percent depending on data source, under the extreme assumption that the baseline employment rate was 100 percent. The percent increase in income is \$1,000 divided by annual earnings of roughly 12 times monthly labor earnings of \$1,367, or 6.1 percent. A more realistic baseline employment rate of less than 100 percent would amplify the percent decrease in employment, producing an elasticity closer to or perhaps greater than one.

effects from large wealth shocks, with lottery winners reducing earnings by \$0.52 for every dollar increase in unearned income (Golosov et al. 2024).⁹

Ultimately, income elasticities from the academic literature span a substantial range but generally tend to be relatively small to moderate, and negative. The large-sample GBI pilots fall within the range of estimates from the academic literature. The positive elasticities from many of the smaller-sample GBI pilots fall outside the consensus range, potentially reflecting their small sample sizes that create larger variance in their estimates or other characteristics of the pilots including their timing.

V. Conclusion

The large public and private investment in GBI pilots over the past decade—close to half a billion dollars in GBI payments and over 60,000 study participants—warrants careful consideration of what we have learned about a GBI. While only a minority of the 122 GBI pilots use a control group, assign GBI payments randomly to identify causal effects, and publish individual outcomes, there are nonetheless lessons that should be considered from those that do.

We find that the average response of employment to a GBI is close to zero across all pilots, but also that there is substantial variation in estimated effects, including somewhat stronger (more negative) effects among married individuals. The small number of pilots with larger treatment groups had more uniform and, on average, more negative effects of a GBI on employment, roughly in line with previous estimates from the academic literature estimating income effects in other contexts.

While the new evidence from GBI pilots is useful in building additional evidence on how disadvantaged individuals respond to positive income shocks, there are important limitations for extrapolating from these pilots to future policy debates regarding the effect of a GBI on employment. Aside from threats to internal validity including substantial attrition and misreporting in the vast majority of pilots, there are major questions about their external validity.

⁹ This compares to a smaller effect found in the context of lottery winners in Sweden, a context in which Cesarini et al. (2017) calculated an implied income elasticity of -0.17.

First, all of the pilots were conducted at least in part during the COVID-19 pandemic or soon thereafter. Aside from the health and mortality consequences of COVID-19 itself, this period was characterized by historical disruptions to the labor market, unprecedented fiscal responses that transferred substantial resources to households, and persistently high inflation. While both the treatment and control groups in each given pilot were affected by these same factors, it is unclear to what extent the effect of a GBI on behavior would have differed in more normal times. It is also worth pointing out that some proponents of a GBI view it as a predecessor to a universal basic income that would be implemented if advances in artificial intelligence lead to transformational changes to the labor market. Even if GBI pilots were implemented completely outside of a pandemic, it is not clear that the effects would generalize to a world in which artificial intelligence had already vastly changed the labor market, let alone the economy and society more broadly.

Second, the GBI pilots were temporary and targeted, whereas a universal basic income would likely be permanent and universal. Individuals may respond differently to a permanent source of guaranteed income than a temporary one, especially over the long run. They may respond in more nuanced ways, including changes in investment in their human capital such as through education and on-the-job training. A permanent and universal basic income is also more likely to change social norms around work and other values that could alter upward mobility. Ultimately, although the GBI pilots provide valuable information, policymakers should be cautious in extrapolating the evidence to debates about a nationwide universal basic income.

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Appendix Table A1. Selected Characteristics of Guaranteed Basic Income Pilots with Randomized Designs and Published Employment Effects, 2017-2025

Pilot name	Study	Location(s)	Start date	End date	GBI payments (\$)	Treatment group size	Control group size	Employment effect	Income Elasticity
Arlington's Guarantee	Arlington Community Foundation (2024)	Arlington, VA	Sep-21	Nov-23	1,800,000	200	100	0.12	0.38
Baby's First Years	Sauval et al. (2024)	New York, NY; New Orleans, LA; Minneapolis, MN; Omaha, NE	May-18	Jul-22	10,123,200	400	600	-0.01	-0.12
Young Families Success Fund	Thomas et al. (2025)	Baltimore, MD	Aug-22	Jul-24	3,120,000	130	156	0.07	0.13
BIG:LEAP	Kim et al. (2024)	Los Angeles, CA	Jan-22	Mar-23	38,424,000	3202	4992	-0.04	-0.14
Embrace Mothers Pilot	Jefferson et al. (2024)	Birmingham, AL	Mar-22	Feb-23	495,000	110	132	0.02	—
Cambridge RISE	DeYoung et al. (2024)	Cambridge, MA	Sep-21	Feb-23	1,170,000	130	156	0.17	1.22
Chelsea Eats	Liebman et al. (2022)	Chelsea, MA	Sep-20	May-21	2,880,900	1067	730	0.002	0.02
CLIMB	Bervik et al. (2024)	Columbia, SC	Aug-21	Aug-22	600,000	100	130	-0.02	-0.11
Compton Pledge	Balakrishnan et al. (2024)	Compton, CA	Feb-21	Apr-23	8,340,000	695	1402	-0.05	-0.41
Basic Income Project	Brisson et al. (2024)	Denver, CO	Oct-22	Nov-23	4,824,000	402	229	0.2	—
Excel	Couloute et al. (2025)	Durham, NC	Jan-22	Feb-23	784,800	109	138	-0.03	-0.12
GRIT	Flynn et al. (2024)	Tacoma, WA	Dec-21	Nov-22	660,000	110	132	-0.08	-0.72
ARISE	Juras et al. (2024)	Alexandria, VA	Oct-22	Jun-25	2,040,000	170	210	-0.01	-0.05
In Her Hands	Brugger et al. (2025)	Atlanta, GA	Jul-22	Jul-24	13,341,600	272	180	0.049	0.09
Guaranteed Income	DeYoung et al. (2025)	Ithaca, NY	Jun-22	May-23	594,000	110	132	0	0.00
Just Income	Couloute, Tandon, Patel, et al. (2025)	Gainesville, FL	Jan-22	Feb-23	874,000	115	134	0.06	0.50
Forward Fund	Castro et al. (2025)	Madison, WI	Sep-22	Aug-23	930,000	146	169	-0.02	-0.12
Guar. Basic Inc. Pilot	Goodman-Bacon and Palmer (2024)	Minneapolis, MN	Jun-22	May-24	2,400,000	200	329	0.081	0.45
Guar. Income Program	Bogle et al. (2025)	Montgomery Cnty, MD	Jun-22	Jun-24	5,760,000	200	166	-0.1889	—

Move. for Econ. Eq.	Tandon et al. (2025)	Newark, NJ	Oct-21	Sep-23	4,800,000	400	478	0	0.00
Resilient Families	Flynn et al. (2025)	Oakland, CA	Jan-22	Jun-23	5,400,000	300	360	0.1	0.73
Guar. Income Pilot	DeYoung et al. (2023)	Paterson, NJ	Jul-21	Jun-22	528,000	110	131	-0.03	-0.19
Project Resilience	DeYoung, Castro, et al. (2023)	Kingston, NY	May-21	Sep-22	600,000	100	84	-0.12	-0.69
Providence GI Pilot	Nichols et al. (2025)	Providence, RI	Nov-21	Apr-23	990,000	110	132	0.01	0.07
Guaranteed Income	Kappil et al. (2024)	Shreveport, LA	Mar-22	Feb-23	871,200	110	132	-0.1	-0.19
SEED	West and Castro (2023)	Stockton, CA	Feb-19	Jan-21	1,572,000	131	200	0.07	0.66
YALift!	Kappil, Rosenberg, et al. (2024)	Louisville, KY	Apr-22	Mar-23	906,000	151	180	-0.03	-0.17
Rise Up	Geyer et al. (2025)	Alameda, CA	Dec-23	Dec-25	3,600,000	150	180	-0.07	-0.84
OpenResearch	Vivalt et al. (2024)	Chicago, IL; Dallas, TX	Nov-20	Oct-23	36,000,000	1000	2000	-0.041	-0.18
Guar. Basic Inc. Pilot	Kalsi et al. (2025)	Rochester, NY	Sep-23	Nov-24	2,106,000	351	1000	0.118	0.79

Notes: “—” indicates missing data. Elasticities are calculated where baseline income and employment are both available. We calculate income elasticities from the GBI pilots by dividing the percent change in employment by the percent change in income. The percent change in employment is calculated as the average treatment effect on the share employed divided by the baseline share employed, and the percent change in income is calculated as the annualized amount of GBI (12 times the monthly payment) divided by baseline annual household income.