OMB No. 0570-0007



United States Department of Agriculture Rural Development

FARMER COOPERATIVE STATISTICS, 2006

		If address is incorrect,	please correct	mailing label.	
			Is this address	your headquarters	s?
			YES	NO	
		elp is needed in developing and maintaining complete and accura education, research, and decision-making. The data you provide	te nationwide st	atistics on farmer o	cooperatives for
1.	Pe	rson completing this questionnaire:			
	a.	NAME			
	b.	TITLE			
	c.	PHONE NUMBER () d. FAX ()	-	e. DATE	
	f.	E-MAIL ADDRESS			
	g.	COOPERATIVE'S HOME-PAGE ADDRESS			
		our cooperative at the above address was <u>sold</u> to or <u>merge</u> complete this question and question 1 only.	<u>ed</u> into ar	nother organization	recently,
	a.	NAME			
	b.	ADDRESS			
	C.	DATE OF SALE OR MERGER			

If you have any questions related to this survey of farmer cooperatives, please feel free to contact Eldon Eversull at (202) 690-1415 or send an e-mail message to eldon.eversull@usda.gov. You are not required to respond, but your participation is very important. If you have any comments, please write them in the margins or attach a note.

Please attach the enclosed return mailing label to your envelope and return this questionnaire to:

USDA/RBS, STOP 3256, 1400 Independence Ave., SW, Washington, D.C. 20250-3256



NOTE: If you attach an annual or audit report, fill in only information requested that is <u>not</u> included in the annual or audit report.)

3.	ln ۱	vhat month did your cooperative end its fiscal or business year during 2006?	MONTH
4.	Ple	ase provide the amounts for these balance sheet items for your business year tha	t ended in 2006.
	a.	CURRENT ASSETS?	
	b.	INVESTMENTS IN ALL OTHER COOPERATIVES (Include CoBank.)?	
	C.	PROPERTY, PLANT, AND EQUIPMENT(Net)?	
	d.	TOTAL ASSETS?	
	e.	CURRENT LIABILITIES?	
	f.	TOTAL LIABILITIES?	
	g.	ALLOCATED MEMBER EQUITIES?	
	h.	UNALLOCATED MEMBER EQUITIES (Retained Earnings)?	
	1.	TOTAL NET WORTH (Total Equity)?	(110) \$
	j.	TOTAL LIABILITIES AND NET WORTH (Equals Total Assets)?	Office use only
_	_		
5.	Frc	m your income statement, please provide the following for your business year tha	t ended in 2006.
	a.	TOTAL SALES (<u>Exclude</u> service receipts, other income, and patronage refunds.)?	
	b.	COST OF GOODS SOLD?	
	C.	GROSS MARGIN (Total sales minus cost of goods sold)?	
	d.	SERVICE RECEIPTS AND OTHER OPERATING INCOME OR REVENUE (Include service revenues, storage and handling fees, etc.)?	
	e.	GROSS REVENUE (Gross Margin plus Service Receipts and other Income)?	
	f.	TOTAL WAGES AND BENEFITS EXPENSE (<u>Include</u> payroll taxes, group insurance, commissions, profit-sharing, and any other related benefits.)?	
	g.	DEPRECIATION EXPENSE?	
	h.	INTEREST EXPENSE?	
	l.	OTHER EXPENSES?	
	j.	TOTAL EXPENSES (Include Operating and all Other Expenses)?	
	k.	NET MARGINS FROM OPERATIONS (Local Savings)?	
	l.	TOTAL PATRONAGE REFUNDS AND DIVIDENDS RECEIVED FROM ALL OTHER COOPERATIVES (Include CoBank and all other cooperatives, less any equity writeoffs.)?	
	m.	NONOPERATING INCOME (<u>Include</u> sale of assets, discontinued operations, non-cooperative investment income, extraordinary items and all other revenues or losses not already accounted for)?	
	n.	NET INCOME BEFORE TAXES?	
	0	INCOME TAYES?	

a	TOTAL NET INCOME	(OR LOSS))?

6. If your cooperative **marketed or bargained for any farm products** (grains and oilseeds, milk or milk products, fruits and vegetables, etc.) in fiscal 2006, please report sales or market value of these products. (If your cooperative <u>did not</u> market any farm products, please go to the next question.)

FARM PRODUCT(S) MARKETED	SALES (or Market) VALUE
Grains and oilseeds other than cottonseed ($\underline{\textit{Exclude}}$ meals and oils, distillers arains sold for feed. etc.) ¹	(201) \$
Milk and milk products	(219) \$
Fresh fruits and vegetables (For fresh and processed market).	(214) \$
Processed fruits and vegetables	(216) \$
Livestock and meat products (Include all species.)	(223) \$
Manufactured or processed food or other products (<u>Include</u> ethanol, fish, fur, other crops or resale items). (Please specify.)	(226) \$
Other farm products not reported above (Please specify)	()\$
Total	(227) \$

¹ Include all meal sales with feed (in the next question) and all oil sales with manufactured food products in the above table. Include sales of cottonseed meal with feed (in the next question) and sales of cottonseed oil with manufactured food products (item 226 in the above table).

7. If your cooperative **sold any farm supplies** (feed, seed, fertilizer, crop protectants, petroleum products, and other farm inputs) and/or equipment in fiscal 2006, please report sales. (If your cooperative <u>did not</u> sell any farm supplies or equipment, please go to the next guestion.)

SUPPLIES AND EQUIPMENT	SALES
Feed (Complete feeds, ingredients, hay, grains, oilseed meal, distillers grains, etc.) ¹	(501) \$
Seed (For planting: include seed potatoes)	(502) \$
Fertilizer (Bagged and bulk; include anhydrous ammonia, lime, etc.)	(503) \$
Crop protectants (Pesticides, herbicides, fungicides, etc.)	(504) \$
Petroleum products (Include gasoline, fuel oil, diesel, propane, LP gas, lube oil, etc.)	(505) \$
All other ²	(511) \$
TOTAL	(513) \$

¹ Do <u>not</u> include sales of whole grains reported in question 6.

R	If individual	nroducers	held n	nembership in	vour coc	nerative (durina	fiscal 2006	how many	were
ο.	II IIIuiviuuai	production	HEIU H		voui coc	inclative t	aumu	listai 2000.	HOW Hally	WCIC

ENTITLED TO VOTE? NUMBER

9. Did **farmer cooperatives** hold <u>membership</u> in your association? (*Please check one*.)

NO (If "NO," please go to the next question.) YES If "YES," continue with a.)

² <u>Include</u> building materials; tires, batteries, and accessories (TBA); containers and packaging supplies; farm machinery and equipment; home equipment; animal health products; pet food; semen; hardware; food; clothing; fencing; paint; etc.

			t the end of fiscal 2			BER		
10.	How ma	any employees (lid your cooperative	e operate w	ith during fisc	cal 2006?		
	a. FULI	L-TIME EMPLOY	'EES?		NUM	BER		
	b. PAR	T-TIME and/or S	EASONAL EMPLO	YEES?	NUM	BER		
11.	Did your cooperative operate facilities at branch locations during fiscal 2006? (<i>Exclude</i> your headquarters location.)							
	NO	(If "NO," go to	the next question.)	YES	IF "YES,"	AT HOW MANY BR	ANCH	
	LOCATI	IONS DID YOUR	COOPERATIVE C	PERATE?.	NUME	BER		
12.	Did you	r cooperative ha	ve any export sales	in fiscal 20	06?			
	NO	(If "NO," go to	the next question.)	YES				
	IF "YES	5," WHAT WAS T	HE VALUE OF SU	CH EXPOR	RTS?	(971) \$		
13. is the						ization during your prwise, go to the nex		, and
	a. PUF	RCHASED	b. MERGED					
			ess of the purchase			on and the date it oc attached note.):	curred	
	NAME			_ ADDRESS				
	DATE C)F PURCHASE (OR MERGER	Was	the other org	anization a co-op?	NO YES	6
14. coop		enter the names or of the surviving		ef board off	ficer or chairr	nan and manager o	CEO of your	
	a. CHIE	EF BOARD OFFI	CER OR CHAIRMA	AN?				
	b. GEN	JERAL MANAGE	R OR CEO?					
F	PLEASI	E ENCLOSE /	A COPY OF YO	UR FISC	AL 2006 AI	NNUAL OR AUD	IT REPORT	:
		(If you would li	ke your annual or a	udit report	returned to y	ou, please let us kno	ow.)	
	Υοι	ur contribution to		THANK YO		our report will be se	nt to you.	

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