



U.S. Department of Agriculture
 Grain Inspection,
 Packers and Stockyards
 Administration

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ANNUAL REPORT OF PACKERS

**Packers and
 Stockyards
 Program**

Instructions: If an item's value is zero, enter "0". If an item does not apply, enter "NA". Upon completion please verify that all items have been answered. Return completed form to the P&SP Central Reporting Unit. See separate instructions for complete information about this report.

GENERAL INFORMATION - SECTION 1

101	Reporting Period (mm/dd/yy)	a. from	b. to
102	Legal Business Name		
103	Business Name (dba)		
104	Mailing Address		
105	City, State, Zip		
106	Physical Address		
107	City, State, Zip		
108	Contact Name		
109	Telephone Number		
110	Fax Number		

ORGANIZATIONAL STRUCTURE - SECTION 2

List owners, officers, partners, and managing members in control of this business

	a. Name	b. Title	c. Percentage Ownership
201			
202			
203			
204			
205			

206	Type of organization	<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation	<input type="checkbox"/> L.L.C.	<input type="checkbox"/> L.L.P.	<input type="checkbox"/> Co-op	<input type="checkbox"/> Other
207	Is this the same organization type reported last year?	<input type="checkbox"/> Yes	<input type="checkbox"/> No					
208	Is this business owned or controlled by another business entity?	<input type="checkbox"/> Yes	<input type="checkbox"/> No					
209	If line 208 is yes, identify the owner/controlling business name and address.							
210	Does this business own or control other businesses within the livestock-meat sector?	<input type="checkbox"/> Yes	<input type="checkbox"/> No					

If line 210 is yes, then provide the names of businesses that you own or control and percentage of control it items 211-214

	a. Name of Business	b. Percentage of Control
211		
212		
213		
214		

Your response to this form is required under the Packers and Stockyards Act of 1921 (9 CFR 201.97 and 7 U.S.C. 181-229). According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information is 0580-0015. The time required to complete this information collection is estimated to average 7 hour per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.

FINANCIAL INFORMATION - SECTION 3

301 Total value of livestock purchased for feeding \$ _____

302 Total value of livestock purchased for slaughter \$ _____

303 Total value of all livestock purchased (line 301 plus 302) \$ _____

304 As of the end of the reporting period, were Accounts Receivable and/or Inventories, or any part thereof, pledged or assigned as collateral under a financing or loan agreement? Yes No

Enter name and location of bank used for livestock payments

305	Bank Name	
306	Physical Address	
307	City, State, Zip	

BALANCE SHEET - SECTION 4

Include values only for the reporting entity.

Assets

Current Assets

Cash (Enter overdrafts under Current Liabilities - line 418) 401 \$ _____

Temporary Cash Investments (Marketable Securities, Certificates of Deposit, Commercial Paper, etc.) 402 \$ _____

Accounts Receivable (Due in One Year or Less)

From sources not related to company 403 \$ _____

From sources related to company 404 \$ _____

Total Accounts Receivable 405 \$ _____

Notes and Loans Receivable (Portion due in One Year or Less) 406 \$ _____

Inventory

Livestock 407 \$ _____

Meat and Meat Food Products 408 \$ _____

Other Inventory 409 \$ _____

Total Inventory 410 \$ _____

Other Current Assets 411 \$ _____

Total Current Assets 412 \$ _____

Long-Term Assets

Investments 413 \$ _____

Property, Plant, & Equipment (Net of Depreciation and Amortization) 414 \$ _____

Other Long-Term Assets 415 \$ _____

Total Long-Term Assets 416 \$ _____

Total Assets 417 \$ _____

Liabilities and Net Worth

Liabilities

Current Liabilities

Bank Overdraft 418 \$ _____

Accounts Payable

Livestock Purchases 419 \$ _____

Other payables to sources not related to company 420 \$ _____

Other payables to sources related to company 421 \$ _____

Total Accounts Payable 422 \$ _____

Notes and Loans Payable (Demand Notes and Portion of Long-Term Notes due in One Year or Less) 423 \$ _____

Other Current Liabilities 424 \$ _____

Total Current Liabilities 425 \$ _____

Long-Term Liabilities (Due after One Year) 426 \$ _____

Total Liabilities 427 \$ _____

Total Net Worth 428 \$ _____

Total Liabilities and Net Worth (Equals Total Assets) 429 \$ _____

INCOME STATEMENT - SECTION 5

Include values only for reporting entity.

Income Statement

Net Sales (Gross sales less sales returns & allowances)		501	\$	
Cost of Sales				
Opening Inventory	502	\$		
Livestock Purchases	503	\$		
Meat and Meat Food Product Purchases	504	\$		
Other Purchases	505	\$		
Subtotal (sum lines 502 to 505)	506	\$		
Closing Inventory	507	\$		
Total Cost of Sales (line 506 less 507)				508 \$
Gross Profit				509 \$
Operating Expenses				
Manufacturing	510	\$		
General, Sales, and Administrative	511	\$		
Depreciation & Amortization	512	\$		
Total Operating Expenses				513 \$
Operating Income or Loss				514 \$
Adjustments to Operating Income				
Other Additions to Income	515	\$		
Interest Expense	516	\$		
Other Deductions from Income	517	\$		
Total Adjustments to Operating Income				518 \$
Net Profit or Loss before Income Tax				519 \$

LIVESTOCK FEEDING OPERATIONS, PROCUREMENT, SLAUGHTER, AND MEAT PROCESSING - SECTION 6

Plant Information.

If you use only one plant for slaughter operations, report values here. If you use more than one plant, then use Supplement Form 3005 for each plant and report totals here.

601	Plant Name				
602	Mailing Address				
603	City, State, Zip				
604	Plant Physical Address (if different from 106)				
605	Is this plant federally or state inspected?	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input type="checkbox"/> Neither	606. FSIS or state plant inspection number:
607	Do you own or lease this plant?	<input type="checkbox"/> Own	<input type="checkbox"/> Lease	<input type="checkbox"/> Neither	

Custom Slaughter: If you custom slaughter for other businesses in the plant listed in line 601, complete lines 608-617, otherwise continue to line 618.

List the names and addresses of the four largest entities you slaughter for in lines 608-611. List only entities for which you slaughter at least 100 head. Add total slaughter for entities not in your largest four and less than 100 head together and list on line 616. Total all values on line 617.

		Entity Name	Entity Address
608	1st Entity		
609	2nd Entity		
610	3rd Entity		
611	4th Entity		

Enter the number of head slaughtered for each entity listed in lines 608-611

		Steer/Heifer (hd)	Cow/Bull (hd)	Calf (hd)	Hog (hd)	Sheep/Lamb (hd)	Other (hd)
612	1st Entity						
613	2nd Entity						
614	3rd Entity						
615	4th Entity						
616	All others						
617	Total						

Committed Procurement: Livestock procured more than 14 days before slaughter.

	Steer/Heifer (hd)	Cow/Bull (hd)	Calf (hd)	Hog (hd)	Sheep/Lamb (hd)	Other (hd)
618	Packer owned					
619	From other packers					
620	All other committed sources					
621	Total					

Non-Committed Procurement: Livestock procured 14 days or fewer before slaughter.

	Steer/Heifer (hd)	Cow/Bull (hd)	Calf (hd)	Hog (hd)	Sheep/Lamb (hd)	Other (hd)
622	From other packers					
623	Direct					
624	Through public markets					
625	Total					

Slaughter Adjustments: Livestock procured but not slaughtered.

	Steer/Heifer (hd)	Cow/Bull (hd)	Calf (hd)	Hog (hd)	Sheep/Lamb (hd)	Other (hd)
626	Livestock sold					
627	Dead or condemned					
628	Total					

Total Slaughter.

Line 629 equals line 617 plus line 621 plus line 625 minus line 628

	Steer/Heifer (hd)	Cow/Bull (hd)	Calf (hd)	Hog (hd)	Sheep/Lamb (hd)	Other (hd)
629	Total slaughter					

Number of Livestock Paid for Based on Carcass Basis and Dressed Weight (i.e., not liveweight).

	Steer/Heifer (hd)	Cow/Bull (hd)	Calf (hd)	Hog (hd)	Sheep/Lamb (hd)	Other (hd)
630	Carcass and Dressed					

631 Do you use an electronic instrument to determine payment for carcasses or livestock? Yes No

632 If you answered yes in item 631, list the manufacturer and the type of instrument.

Meat Processing Activities

	Steer/Heifer (lbs)	Cow/Bull (lbs)	Calf (lbs)	Hog (lbs)	Sheep/Lamb (lbs)	Other (lbs)
633	Purchased externally or transferred in					
634	Total products shipped (exclude offal)					

CERTIFICATION - SECTION 7

Under the Packers and Stockyards Act any person who willfully makes, or causes any false entry or statement of fact in this report shall be deemed guilty of offense against the United States, and be subject to a fine of \$1,000 to \$5,000, or to imprisonment for a term of not more than 3 years, or to both fine and imprisonment.

I certify that this report has been prepared by me or under my direction, and to the best of my knowledge and belief correctly reflects reporting entity operations.

701 Print Name		702 Signature (Must be signed by a person listed on 201-205)	
703 Phone Number	704 Date	705 Title	

Submitted information is confidential (9 CFR 201.96). Failure to report will result in forfeiture to the United States \$110 per day until report receipt 7 (U.S.C. 222). Enclose with this form all completed Form 3005's, Supplement Packer Annual Reports, for multiplant operations.

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