

<b>FSA-2039</b> (12-31-07)	<b>U.S. DEPARTMENT OF AGRICULTURE</b> Farm Service Agency <b>FARM BUSINESS PLAN WORKSHEET</b> <b>SUMMARY OF YEAR'S BUSINESS</b>	Position 3
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*FORM NOT REQUIRED. DO NOT RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE; IT IS FOR YOUR INFORMATION ONLY.*

A. Name (Applicant/Borrower)	B. Date:	C. <input type="checkbox"/> Projected/Income and Expense <input type="checkbox"/> Actual Income and Expense
1. Total Farm Income		
2. Purchase of Livestock and other Commodities for Resale		
3. Gross Margin (Item 1 minus Item 2)		
4. Total Operating Expenses (excluding depreciation)		
5. Net Operating Income (Item 3 minus Item 4)		
6. Non-Farm Income		
7. Total Net Operating Income and Non-Farm Income (Item 5 plus Item 6)		
8. Owner Withdrawals, Income Taxes, and Non-Farm Expense		
9. Net Cash Income (Item 7 minus Item 8)		
10. Term Loan Principal Payments		
11. Margin After Debt Service (Item 9 minus Item 10)		
12. Loan Advances		
13. Capital Sales and Capital Contributions		
14. Beginning Cash/Cash Carryover from Previous Year's Operation		
15. Total Margin After Debt Service, Loan Advances, Capital Sales, Capital Contributions and Beginning Cash/Cash Carryover from Previous Year's Operation (Total of Items 11, 12, 13 & 14)		
16. Operating Loan Principal Payments and Debts Refinanced		
17. Capital Expenditures and Capital Withdrawals		
18. Total Operating Loan Principal Payments, Debts Refinanced, Capital Expenditures and Capital Withdrawals (Item 16 plus Item 17)		
19. Ending Cash On Hand (Item 15 minus Item 18)		

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