Busine	ess Entity ID Number	For PSD Stamp Only			PSD Bar Code	Only		
U.S.	Department of Agriculture						Solast this boy	if you want to receive
	cultural Marketing Service		A NINITI A	I DEDO	DТ			if you want to receive ication to file your
	Frade Practices Program			L REPO			-	This will begin in the
Packe	ers and Stockyards Division		OF 17	ACKEKS	,		next reporting	<u> </u>
							Electronic Fil	ing
	Instructions	: If a line's value is zer	ro, enter "0". If a line	does not ap	ply, enter "N/	A". Return comp	leted form to the	
	PSD Central	l Reporting Unit. If all	-				be returned. See	
		separate	instructions for comp	lete inform	ation about thi	s report.		
	You must complete	form PSD3005 for eac	ch plant that you use f	for your fire	m's operation.	The total values	reported in Section	ı 2 of
		Form PSD3005 wil	ll be combined and rep	ported as th	e totals in Sect	ion 3 of this form	•	
			GENERAL INFO	ORMATIC	ON - SECTIO	N 1		
	Reporting Period							
101	(mm/dd/yyyy)	a. FROM:			b. TO			
102	Entity Name	u. 110001.			0.10	•		
103	Trade Name/d.b.a.							
104	Mailing Address							
105	City, State, Zip+4							
106	Operating Address							
107	City, State, Zip+4							
107	Contact Name							
			111 E	M-11 A 44-				
109	Contact Telephone			-Mail Addr				
110	Fax		112 W	eb Address	S			
		ORG	GANIZATIONAL ST	FRUCTUR	RE - SECTIO	N 2		
	List owners, officers, partne	ers, and members in c	control of this busines	s with their	· ownership pe	rcentage.		
		a. Name				b. Title		c. %
201								
202								
203								
204								
205								
206								
	Type organization:	Individual 🗌 I	Partnership	orporation	☐ L.L.C	L.L.P.	☐ Co-op ☐	Association
207	Type organization:			orporation	☐ L.L.C	L.L.P.	☐ Co-op ☐ Yes	Association No
207 208		n type reported last ye	ear?		☐ L.L.C	L.L.P.		
208	Is this the same organization Does the entity own or oper	n type reported last ye rate scales on which p	ear? payment to sellers is de	etermined?			Yes Yes	□ No□ No
208 209	Is this the same organization Does the entity own or oper What is the basis of paymer	n type reported last ye rate scales on which p nt made to the entity for	ear? sayment to sellers is defor most livestock you	etermined?	Per Head	☐ Live Wt. [Yes Yes Dressed Wt./C	☐ No ☐ No arcass Basis
208 209 210	Is this the same organization Does the entity own or oper What is the basis of paymer Do you use an electronic in:	n type reported last ye rate scales on which p nt made to the entity for strument to measure c	ear? payment to sellers is described for most livestock you carcass characteristics	etermined?	Per Head	☐ Live Wt. [Yes Yes	□ No□ No
208 209 210 211	Is this the same organization Does the entity own or oper What is the basis of paymer Do you use an electronic in: If line 211 is Yes, list the m	n type reported last ye rate scales on which p nt made to the entity for strument to measure c anufacturer and the ty	ear? payment to sellers is do for most livestock you carcass characteristics ype of instrument.	etermined? purchase? s to determin	Per Head	☐ Live Wt. [sellers?	Yes Yes Yes Yes Yes Yes	□ No □ No arcass Basis □ No
208 209 210	Is this the same organization Does the entity own or oper What is the basis of paymer Do you use an electronic in:	n type reported last ye rate scales on which p nt made to the entity for strument to measure c anufacturer and the ty	ear? payment to sellers is do for most livestock you carcass characteristics ype of instrument.	etermined?	Per Head	☐ Live Wt. [sellers?	Yes Yes Dressed Wt./C	□ No □ No arcass Basis □ No
208 209 210 211	Is this the same organization Does the entity own or oper What is the basis of paymer Do you use an electronic in: If line 211 is Yes, list the m	n type reported last ye rate scales on which p nt made to the entity for strument to measure communications and the type on trolled by another by	ear? payment to sellers is do for most livestock you carcass characteristics ype of instrument.	etermined? purchase? s to determin	Per Head	☐ Live Wt. [sellers?	Yes Yes Yes Yes Yes Yes	□ No □ No arcass Basis □ No
208 209 210 211 212	Is this the same organization Does the entity own or oper What is the basis of paymer Do you use an electronic in: If line 211 is Yes, list the m Is this business owned or co Owned/controlling business	n type reported last ye rate scales on which p at made to the entity for strument to measure communicaturer and the type trolled by another by sname and address	ear? payment to sellers is deformed livestock you carcass characteristics the of instrument. pusiness entity	etermined? purchase? to determine	☐ Per Head ne payment to ☐ No	☐ Live Wt. [sellers?	Yes Yes Yes Yes Yes Yes	□ No □ No arcass Basis □ No
208 209 210 211 212	Is this the same organization Does the entity own or oper What is the basis of paymer Do you use an electronic in: If line 211 is Yes, list the m Is this business owned or co Owned/controlling business Does this Business, including	n type reported last ye rate scales on which put made to the entity for strument to measure communication and the type that the type the type that the type	ear? payment to sellers is defor most livestock you carcass characteristics the open of instrument. Payment to sellers is deformed to sellers is deformed to sellers. Payment to sellers is deformed to sellers is deformed to sellers. Payment to sellers is deformed to sellers is deformed to sellers. Payment to sellers is deformed to sellers is deformed to sellers.	etermined? purchase? to determined Yes ers or Empl	☐ Per Head ne payment to ☐ No ☐ oyees,	☐ Live Wt. [sellers?	Yes Yes Pressed Wt./C Yes ame and address	□ No □ No arcass Basis □ No
208 209 210 211 212 213	Is this the same organization Does the entity own or oper What is the basis of paymer Do you use an electronic in: If line 211 is Yes, list the m Is this business owned or co Owned/controlling business Does this Business, including own an interest in any other	n type reported last ye rate scales on which p nt made to the entity for strument to measure communication and the type that the type that the strument depends on the strument and the type that the strument depends on the	ear? payment to sellers is defor most livestock you carcass characteristics ype of instrument. pusiness entity ers, Directors, Members of Paris of Paris (Paris 1) and Paris (Paris 1)	etermined? purchase? to determine Yes ers or Emple Packing	Per Head ne payment to No oyees,	Live Wt. [sellers? If Yes, list the n	Yes Yes Yes Pressed Wt./C Yes Ame and address of	□ No □ No arcass Basis □ No on line 213
208 209 210 211 212 213	Is this the same organization Does the entity own or oper What is the basis of paymer Do you use an electronic in: If line 211 is Yes, list the m Is this business owned or co Owned/controlling business Does this Business, includin own an interest in any other Company?	n type reported last ye rate scales on which p nt made to the entity for strument to measure communication and the type that the type that the strument depends on the strument and the type that the strument depends on the	ear? payment to sellers is described by the seller	etermined? purchase? to determine Yes ers or Emple Packing	Per Head ne payment to No oyees,	Live Wt. [sellers? If Yes, list the n	Yes Yes Yes Pressed Wt./C Yes ame and address of	□ No □ No arcass Basis □ No on line 213
208 209 210 211 212 213	Is this the same organization Does the entity own or oper What is the basis of paymer Do you use an electronic in: If line 211 is Yes, list the m Is this business owned or co Owned/controlling business Does this Business, includin own an interest in any other Company?	n type reported last ye rate scales on which p at made to the entity for strument to measure communicaturer and the type that the strument depends on the strument depends on the strument and address and address and and address and and address of Market Agency, Dea	ear? payment to sellers is described by the seller	etermined? purchase? to determine Yes ers or Emple Packing	Per Head ne payment to No oyees,	☐ Live Wt. [sellers?] If Yes, list the n Yes ☐ N entage of owners)	Yes Yes Yes Pressed Wt./C Yes ame and address of	□ No □ No arcass Basis □ No on line 213
208 209 210 211 212 213 214 If line 215	Is this the same organization Does the entity own or oper What is the basis of paymer Do you use an electronic in: If line 211 is Yes, list the m Is this business owned or co Owned/controlling business Does this Business, includin own an interest in any other Company?	n type reported last ye rate scales on which p at made to the entity for strument to measure communicaturer and the type that the strument depends on the strument depends on the strument and address and address and and address and and address of Market Agency, Dea	ear? payment to sellers is described by the seller	etermined? purchase? to determine Yes ers or Emple Packing	Per Head ne payment to No oyees,	☐ Live Wt. [sellers?] If Yes, list the n Yes ☐ N entage of owners)	Yes Yes Yes Pressed Wt./C Yes ame and address of	□ No □ No arcass Basis □ No on line 213
208 209 210 211 212 213 214 If line 215 216	Is this the same organization Does the entity own or oper What is the basis of paymer Do you use an electronic in: If line 211 is Yes, list the m Is this business owned or co Owned/controlling business Does this Business, includin own an interest in any other Company?	n type reported last ye rate scales on which p at made to the entity for strument to measure communicaturer and the type that the strument depends on the strument depends on the strument and address and address and and address and and address of Market Agency, Dea	ear? payment to sellers is described by the seller	etermined? purchase? to determine Yes ers or Emple Packing	Per Head ne payment to No oyees,	☐ Live Wt. [sellers?] If Yes, list the n Yes ☐ N entage of owners)	Yes Yes Yes Pressed Wt./C Yes ame and address of	□ No □ No arcass Basis □ No on line 213
208 209 210 211 212 213 214 If line 215	Is this the same organization Does the entity own or oper What is the basis of paymer Do you use an electronic in: If line 211 is Yes, list the m Is this business owned or co Owned/controlling business Does this Business, includin own an interest in any other Company?	n type reported last ye rate scales on which p at made to the entity for strument to measure communicaturer and the type that the strument depends on the strument depends on the strument and address and address and and address and and address of Market Agency, Dea	ear? payment to sellers is described by the seller	etermined? purchase? to determine Yes ers or Emple Packing	Per Head ne payment to No oyees,	☐ Live Wt. [sellers?] If Yes, list the n Yes ☐ N entage of owners)	Yes Yes Yes Pressed Wt./C Yes ame and address of	□ No □ No arcass Basis □ No on line 213

LIVESTOCK FEEDING OPERATIONS, PROCUREMENT, SLAUGHTER, AND MEAT PROCESSING - SECTION 3

	t use only one plant for t totals here.	staugnier operations, re	port values here. If you	a use more inan	one piani, inen use su	рріетені ғоғт 5005 ј	н ейсп рійні йна
	Plant Name						
302	Mailing Address						
	City, State, Zip + 4						
	Plant Physical Addres	s (if					
304	different from 106)	- (
205	T 41 1 . C 1 11	10			7		
	Is this plant federally of	_	☐ Federal	□ State □	☐ Neither		
	FSIS or state plant ins	•					
307	Do you own or lease to	his plant?	☐ Own	☐ Lease	Neither		
other List t	wise continue to line when the names and addresse	custom slaughter for ot 319. s of the entities for which east 100 head or more.	h you provided custom	slaughter servic			tities for which
		Entity N	ame		Entity Address		Telephone
308	1st Entity	`			<u> </u>		
309	2nd Entity						
310	3rd Entity						
311	4th Entity						
Enter	the number of head sl	aughtered on lines 312 to	o 315, for each entity l	isted in lines 303	to 311. Combine nu	mber of head slaughter	ed for additional
		e pages, and enter on lin	e 316. For those entiti	es you slaughter	r less than 100 head, e	enter number of head or	ı line 317. Total
uu va	lues on line 318.	Staan/Haifan (h.d.)	Cow/Bull (hd)	Calf (h.d)	Han (bd)	C1/C+ (1-1)	Od (1. 1)
212	1 at Entity	Steer/Heifer (hd)	Cow/Bull (llu)	Calf (hd)	Hog (hd)	Sheep/Goat (hd)	Other (hd)
	1st Entity 2nd Entity		+				
	3rd Entity		+				
	4th Entity						
316	Total additional pgs.						
317	Total < 100 hd.						
318	Total Total		+				
Com	mitted Procurement:	Livestock procured mo	1	e slaughter:			
		Steer/Heifer (hd)	Cow/Bull (hd)	Calf (hd)	Hog (hd)	Sheep/Goat (hd)	Other (hd)
	Packer owned						
	From other packers		+				
	All other sources		+				
322	Total						
Non-	Committed Procuren	nent: Livestock procure	d 14 days or fewer be	fore slaughter:			
		Steer/Heifer (hd)	Cow/Bull (hd)	Calf (hd)	Hog (hd)	Sheep/Goat (hd)	Other (hd)
323	From other packers						
324	Direct						
325	Through public markets						

Slaughter Adjustments: Livestock procured but not slaughtered:

mber of Livestock Paid for Based on Careass Grade; Careass Weight or Careass Grade and Weight (i.e., not liveweight): Careans Basis Steer/Heifer (hd) Cow/Bull (hd) Calf (hd) Hog (hd) Sheep/Goat (hd) Other Careas Basis	ot liveweight): Sheep/Goat (hd) Other (hd) amb (1000 lbs) Other (1000 lbs)	(i.e., not liveweig	de and Weight (i.e., Hog (hd) 1000 lbs) - SECTION 4	Calf (hd) Carcass Grade Calf (hd) Veal (10	Cow/Bull (hd) le; Carcass Weight Cow/Bull (hd) Pork (1000 lbs)	Steer/Heifer (hd) Based on Carcass G Steer/Heifer (hd)	Dead or condemned Total Slaughter: Line 336 Total Slaughter ber of Livestock Paid Carcass Basis/ Dressed Wt. Processing Activities
Protail Steer/Heifer (hd) Cow/Bull (hd) Calf (hd) Hog (hd) Sheep/Goat (hd) Ot	ot liveweight): Sheep/Goat (hd) Other (hd) amb (1000 lbs) Other (1000 lbs)	(i.e., not liveweig	de and Weight (i.e., Hog (hd) 1000 lbs) - SECTION 4	Calf (hd) Carcass Grade Calf (hd) Veal (10	Cow/Bull (hd) le; Carcass Weight Cow/Bull (hd) Pork (1000 lbs)	Steer/Heifer (hd) Based on Carcass G Steer/Heifer (hd)	Total Slaughter: Line 33t Total Slaughter ber of Livestock Paid Carcass Basis/ Dressed Wt. Processing Activities
As Sarch end of days livestock was purchased during the reporting year Total value of livestock purchased for feeding Total value of livestock purchased for slaughter Number of Abys livestock purchased for feeding Total value of livestock purchased for slaughter Number of favestock purchased for slaughter Total value of livestock purchased for feeding Total value of livestock purchased for slaughter Total value of livestock purchased	ot liveweight): Sheep/Goat (hd) Other (hd) amb (1000 lbs) Other (1000 lbs)	(i.e., not liveweig	de and Weight (i.e., Hog (hd) 1000 lbs) - SECTION 4	Calf (hd) Carcass Grade Calf (hd) Veal (10	Cow/Bull (hd) le; Carcass Weight Cow/Bull (hd) Pork (1000 lbs)	Steer/Heifer (hd) Based on Carcass G Steer/Heifer (hd)	Total Slaughter ber of Livestock Paid Carcass Basis/ Dressed Wt. Processing Activities
Steer/Heifer (hd) Cow/Bull (hd) Calf (hd) Hog (hd) Sheep/Goat (hd) Ot Total Slaughter Steer/Heifer (hd) Cow/Bull (hd) Calf (hd) Hog (hd) Sheep/Goat (hd) Ot Total Slaughter Steer/Heifer (hd) Cow/Bull (hd) Calf (hd) Hog (hd) Sheep/Goat (hd) Ot Total Slaughter Carcass Basis/ Dressed Wt. Steer/Heifer (hd) Cow/Bull (hd) Calf (hd) Hog (hd) Sheep/Goat (hd) Ot Total Slaughter Carcass Basis/ Dressed Wt. Steer/Heifer (hd) Pork (1000 lbs) Veal (1000 lbs) Lamb (1000 lbs) Other Slaughter Carcass Grade and Weight (i.e., not liveweight): ### Total Processing Activities: ### Purchased externally or transferred in Total Products Steer/Heifer (hd) Total Products Steer/Heifer (hd) Sheep/Goat (hd) Other Slaughter Steer (hd) St	ot liveweight): Sheep/Goat (hd) Other (hd) amb (1000 lbs) Other (1000 lbs)	(i.e., not liveweig	de and Weight (i.e., Hog (hd) 1000 lbs) - SECTION 4	Calf (hd) Carcass Grade Calf (hd) Veal (10	Cow/Bull (hd) le; Carcass Weight Cow/Bull (hd) Pork (1000 lbs)	Steer/Heifer (hd) Based on Carcass G Steer/Heifer (hd)	Total Slaughter ber of Livestock Paid Carcass Basis/ Dressed Wt. Processing Activities
Total Slaughter mber of Livestock Paid for Based on Carcass Grade; Carcass Weight or Carcass Grade and Weight (i.e., not liveweight): Steer/Heifer (hd)	ot liveweight): Sheep/Goat (hd) Other (hd) amb (1000 lbs) Other (1000 lbs)	(i.e., not liveweig	de and Weight (i.e., Hog (hd) 1000 lbs) - SECTION 4	Calf (hd) Veal (10	le; Carcass Weight Cow/Bull (hd) Pork (1000 lbs)	Based on Carcass G Steer/Heifer (hd)	ber of Livestock Paid Carcass Basis/ Dressed Wt. Processing Activities
mber of Livestock Paid for Based on Carcass Grade; Carcass Weight or Carcass Grade and Weight (i.e., not liveweight): Carcass Basis Siter/Heifer (hd) Cow/Bull (hd) Calf (hd) Hog (hd) Sheep/Goat (hd) Ot Carcass Basis Dressed Wt. Torses Beef (1000 lbs) Pork (1000 lbs) Veal (1000 lbs) Lamb (1000 lbs) Other Purchased externally or transferred in Total Products Shipped (exclude offal) Total Products Shipped (exclude offal) Shipped (exclude offal) Shipped (exclude offal) Number of days livestock was purchased during the reporting year 2 Total value of livestock purchased for feeding S Shipped (exclude offal)	Sheep/Goat (hd) Other (hd) amb (1000 lbs) Other (1000 lbs)) Sheep/Go	Hog (hd)	Veal (10	Pork (1000 lbs)	Steer/Heifer (hd)	ber of Livestock Paid Carcass Basis/ Dressed Wt. Processing Activities
Steer/Heifer (hd)	Sheep/Goat (hd) Other (hd) amb (1000 lbs) Other (1000 lbs)) Sheep/Go	Hog (hd)	Veal (10	Pork (1000 lbs)	Steer/Heifer (hd)	Carcass Basis/ Dressed Wt.
Carcass Basis/ Dressed Wt. Sheep/Goat (hd) Cow/Bull (hd) Calf (hd) Hog (hd) Sheep/Goat (hd) Other	Sheep/Goat (hd) Other (hd) amb (1000 lbs) Other (1000 lbs)) Sheep/Go	Hog (hd)	Veal (10	Pork (1000 lbs)	Steer/Heifer (hd)	Carcass Basis/ Dressed Wt.
Carcass Basis/ Dressed Wt. Carcass Carcass Basis/ Dressed Wt. Carcass Carcass Pasis Veal (1000 lbs) Carcass Carcass Carcass Pasis Veal (1000 lbs) Carcass Carc	amb (1000 lbs) Other (1000 lbs		- SECTION 4	Veal (10	Pork (1000 lbs)		Dressed Wt. Processing Activities
Perchased externally or transferred in Total Products Sampled (exclude offat) Total Products Sampled (exclude offat) Sampled (exclude offat)		Lamb (1000	- SECTION 4		, ,	Beef (1000 lbs)	Processing Activities
Beef (1000 lbs) Pork (1000 lbs) Veal (1000 lbs) Lamb (1000 lbs) Other		Lamb (1000	- SECTION 4		, ,	Beef (1000 lbs)	
Purchased externally or transferred in Total Products shipped (exclude offail) 10		Lamb (1000	- SECTION 4		, ,	Beef (1000 lbs)	Purchased externally
FINANCIAL INFORMATION - SECTION 4 Total value of livestock was purchased during the reporting year S S			_	DRMATION - S	FINANCIAL IN		Purchased externally
Same of Financial Institution Secure 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? 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? 1 At any time during the year, Have you been notified by your financial institution that you were in violation of any terms, conditions, and/or covenants of your financial agreement? 2 If so notified, have you been provided a waiver from your financial institution? Yes 3 If the financial institution named in line 405 is the same as that used for your financial lending institution. Attach additional sheets if more than one. 4 Name of Lending Institution			_	DRMATION - S	FINANCIAL IN		or transferred in
Number of days livestock was purchased during the reporting year Total value of livestock purchased for feeding Total value of livestock purchased for slaughter Total value of all livestock purchased (line 402 plus 403) Enter name and location of bank used for livestock payments. Add additional banks if necessary Name of Financial Institution Physical Address City, State, Zip +4 Contact Name 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? At any time during the year, Have you been notified by your financial institution that you were in violation of any terms, conditions, and/or covenants of your financial agreement? If the notified, have you been provided a waiver from your financial institution? If the financial institution named in line 405 is the same as that used for your financial or loan agreement, check this box. Otherwise, complete lines 414 through 417, as necessary. If the checkbox for 413 is not selected, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4			_	ORMATION - S	FINANCIAL IN		shipped (exclude
Number of days livestock was purchased during the reporting year Total value of livestock purchased for feeding Total value of livestock purchased for slaughter Total value of all livestock purchased (line 402 plus 403) Enter name and location of bank used for livestock payments. Add additional banks if necessary Name of Financial Institution Physical Address City, State, Zip +4 Contact Name 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? At any time during the year, Have you been notified by your financial institution that you were in violation of any terms, conditions, and/or covenants of your financial agreement? If the financial institution named in line 405 is the same as that used for your financial or loan agreement, check this box. Otherwise, complete lines 414 through 417, as necessary. If the checkbox for 413 is not selected, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4			_	ORMATION - S	FINANCIAL IN		
2 Total value of livestock purchased for feeding \$ 3 Total value of livestock purchased (fine 402 plus 403) \$ Enter name and location of bank used for livestock payments. Add additional banks if necessary 5 Name of Financial Institution 6 Physical Address 7 City, State, Zip +4 8 Contact Name 409 Contact Telephone 0 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? 1 At any time during the year, Have you been notified by your financial institution that you were in violation of any terms, conditions, and/or covenants of your financial agreement? 2 If so notified, have you been provided a waiver from your financial institution? Yes 3 If the financial institution named in line 405 is the same as that used for your financial or loan agreement, check this box. Otherwise, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. 4 Name of Lending Institution 5 Mailing Address 6 City, State, Zip +4	<u>\$</u>						
Enter name and location of bank used for livestock payments. Add additional banks if necessary Name of Financial Institution Physical Address City, State, Zip +4 Contact Name 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? At any time during the year, Have you been notified by your financial institution that you were in violation of any terms, conditions, and/or covenants of your financial agreement? If the financial institution named in line 405 is the same as that used for your financial or loan agreement, check this box. Otherwise, complete lines 414 through 417, as necessary. If the checkbox for 413 is not selected, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4	\$			_	e reporting year	urchased for feeding	Total value of livestoc
Enter name and location of bank used for livestock payments. Add additional banks if necessary Name of Financial Institution	3						
Name of Financial Institution Physical Address City, State, Zip +4 Contact Name 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? At any time during the year, Have you been notified by your financial institution that you were in violation of any terms, conditions, and/or covenants of your financial agreement? If so notified, have you been provided a waiver from your financial institution? If the financial institution named in line 405 is the same as that used for your financial or loan agreement, check this box. Otherwise, complete lines 414 through 417, as necessary. If the checkbox for 413 is not selected, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4					s 403)	k purchased (line 402	I otal value of all lives
City, State, Zip +4 Contact Name 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? At any time during the year, Have you been notified by your financial institution that you were in violation of any terms, conditions, and/or covenants of your financial agreement? If the financial institution named in line 405 is the same as that used for your financial or loan agreement, check this box. Otherwise, complete lines 414 through 417, as necessary. If the checkbox for 413 is not selected, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4			necessary	ional banks if ne	payments. Add add	of bank used for lives	Enter name and locati
City, State, Zip +4 Contact Name 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? At any time during the year, Have you been notified by your financial institution that you were in violation of any terms, conditions, and/or covenants of your financial agreement? If so notified, have you been provided a waiver from your financial institution? If the financial institution named in line 405 is the same as that used for your financial or loan agreement, check this box. Otherwise, complete lines 414 through 417, as necessary. If the checkbox for 413 is not selected, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4			· · · · · · · · · · · · · · · · · · ·			tion	Name of Financial Inst
City, State, Zip +4 Contact Name 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? At any time during the year, Have you been notified by your financial institution that you were in violation of any terms, conditions, and/or covenants of your financial agreement? If so notified, have you been provided a waiver from your financial institution? If the financial institution named in line 405 is the same as that used for your financial or loan agreement, check this box. Otherwise, complete lines 414 through 417, as necessary. If the checkbox for 413 is not selected, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4							Physical Address
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? At any time during the year, Have you been notified by your financial institution that you were in violation of any terms, conditions, and/or covenants of your financial agreement? If so notified, have you been provided a waiver from your financial institution? If the financial institution named in line 405 is the same as that used for your financial or loan agreement, check this box. Otherwise, complete lines 414 through 417, as necessary. If the checkbox for 413 is not selected, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4							
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? At any time during the year, Have you been notified by your financial institution that you were in violation of any terms, conditions, and/or covenants of your financial agreement? If so notified, have you been provided a waiver from your financial institution? If the financial institution named in line 405 is the same as that used for your financial or loan agreement, check this box. Otherwise, complete lines 414 through 417, as necessary. If the checkbox for 413 is not selected, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4		hone	Contact Telephone	409			3, , 1
assigned as collateral under a financing or loan agreement? At any time during the year, Have you been notified by your financial institution that you were in violation of any terms, conditions, and/or covenants of your financial agreement? If so notified, have you been provided a waiver from your financial institution? If the financial institution named in line 405 is the same as that used for your financial or loan agreement, check this box. Otherwise, complete lines 414 through 417, as necessary. If the checkbox for 413 is not selected, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4			consecutive reseptions	1.07			
in violation of any terms, conditions, and/or covenants of your financial agreement? If so notified, have you been provided a waiver from your financial institution? If the financial institution named in line 405 is the same as that used for your financial or loan agreement, check this box. Otherwise, complete lines 414 through 417, as necessary. If the checkbox for 413 is not selected, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4	d or Yes N	pledged or			eement?	er a financing or loan	assigned as collateral u
2 If so notified, have you been provided a waiver from your financial institution? Yes If the financial institution named in line 405 is the same as that used for your financial or loan agreement, check this box. Otherwise, complete lines 414 through 417, as necessary. If the checkbox for 413 is not selected, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4	☐ Yes ☐ No		u were				
check this box. Otherwise, complete lines 414 through 417, as necessary. If the checkbox for 413 is not selected, complete lines 414 through 418 for each financial lending institution. Attach additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4	☐ Yes ☐ No						
additional sheets if more than one. Name of Lending Institution Mailing Address City, State, Zip +4	☐ Same as 405	If the financial institution named in line 405 is the same as that used for your financial or loan agreement,					
5 Mailing Address 6 City, State, Zip +4	Attach	tution. Attach	ial lending institution	or each financial	nes 414 through 418	-	
6 City, State, Zip +4						ion	Name of Lending Insti
- V 1							Mailing Address
7 Contact Name 418 Contact Telephone		ı	T				City, State, Zip +4
		hone	Contact Telephone	418			Contact Name
Livestock Trust Ratio Calculation						alculation	T. (1.T. (D.)

STATEMENT OF ASSETS, LIABILITIES, AND EQUITY - SECTION 5

Include values only for the reporting entity. NOTE: If you provide custom slaughter, and/or your livestock purchase volume is under \$500k, you do not need to complete sections 5 and 6.

you do not need to complete sections 5 and 6.					
ASSETS					
Current Assets:					
Cash (Enter overdrafts on line 522)		501	\$		
Current Cash Equivalents (CD's, Savings, etc.)		502	\$		
Trade Accounts Receivables-Net (Due in 1 year or less):					
Owners, Officers, and Affiliated Companies	503 \$		-		
All Others (Sources Not Related to Company)	504 \$		-		
Total Trade Accounts Receivable-Net (Due in 1 year or less) (Total lines 503 and 504)	505	\$		
Inventory:					
Livestock Inventory	506 \$		-		
Meat and Meat Products Inventory	507_\$		_		
Other Inventory	508 \$		_		
Total Inventories (Total lines 506, 507, and 508)		509	\$		
Notes and Loans Receivable (Due in One Year or Less):					
Owners, Officers, and Related Entities	510 \$		-		
Others (Sources Not Related to Company)	511 \$		-		
Total Notes and Loans Receivable (Due in 1 Year or Less) (To	otal lines 510 and 511)	512	\$		
Advances Made on Livestock		513	\$		
Other Current Assets		514	\$		
Total Current Assets (Enter the sum total of lines 501, 502, 50.	5, 509, 512, 513, and 514)			515 _\$	
Property, Plant, & Equipment (Net of Depreciation and Amo	artization)			516 \$	
Other Assets:	rtization)			J10 \$	
Investments in Subsidiaries and Affiliated Companies		517	S		
Due from Owners, Officers, and Related Entities (Due in 1					
year or more)		518	\$		
Other Assets		519	\$		
Total Assets (Total of lines 517 through 519)				520 \$	
TOTAL ASSETS (Total of lines 515, 516, and 520)				521 \$	
LIABILITIES					
Current Liabilities:					
Overdraft		522	\$		
Trade AccountsPayables:					
Livestock Payables	523 \$				
Other Payables to Owners, Officers, and Related Entities	524 \$		-		
Other Payables (Sources Not Related to Company)	525 \$		-		
Total Trade Accounts Payables (Total lines 523, 524, and 525)		526	- \$		
Current Maturities of Long-Term Debt: (Demand notes and po					
Owners, Officers, and Related Entities		ic iii i ye	at or iess)		
			-		
Others (Sources Not Related to Company)	528 \$		<u>.</u>		
Total Current Maturities of Long-Term Debt (Total lines 527 a	and 528	529	\$		
Other Current Liabilities		530	\$		
Total Current Liabilities (Total lines 522, 526, 529, and 530)				531 \$	
Other Liabilities:					
Long -Term Debt, Less Current Maturities: (Due in 1 year or 1	more)				
Owners, Officers, and Related Entities		532	\$		
Others (Sources Not Related to Company)		533	\$	<u></u>	
Total Long-Term Debt, Less Current Maturities (Total of lines	532 and 533)			534 \$	
All Other Liabilities	332 and 333 j			535 \$	
TOTAL LIABILITIES (Total of lines 531, 534 and 535)				536 \$	

EQUITY				
Owner's Equity (Unincorporated)		537	\$	
OR				=
Stock Issued (Incorporated)		538	\$	_
Additional Paid-in Capital		539	\$	_
Retained Earnings		540	\$	=
TOTAL EQUITY (Total lines 537 through 540	0)		541	\$
TOTAL LIABILITIES AND EQUITY (should	equal line 521)		542	\$
	STATEMENT OF REV	VENUE AND EXPENSES -	SECTION 6	
Include values only for reporting entity.				
Income Statement				
Net Sales (Gross sales less sales returns & alle	owances)	601	\$	
Cost of Sales				_
Opening Inventory	602	\$		
Livestock Purchases	603	\$	-	
Meat and Meat Product Purchases	604	\$	-	
Other Purchases	605	\$	-	
Subtotal (sum lines 602 to 605)		606	5 \$	
Closing Inventory		607	\$	-
Total Cost of Sales (line 606 less 607)			608	\$
Gross Profit (line 601 less 608)			609	\$
Operating Expenses				
Manufacturing	610	\$		
General, Sales, and Administrative	611	\$	_	
Depreciation & Amortization	612	\$	-	
Total Operating Expenses		613	\$	
Operating Income or Loss (line 609 less l	ine 613)		614	\$
Adjustments to Operating Income				
Other Additions to Income		615	5 \$	
Interest Expense (enter as a negative number	er)	616	5 \$	_
Other Deductions from Income (enter as a r	negative number)	617	\$	_
Adjustments to Operating Income + or - (En	ter the sum total of lines 6	15 through 617; enter as + o	r -) 618	\$
Net Profit or Loss Before Taxes (Add line	e 618 plus line 614)		619	\$
	CERTIFICA	TION - SECTION 7		
Under the Packers and Stockyards Act any per. of offense against the United States, and be sub and imprisonment.				
With my signature, I certify the information officer, or have been authorized by responsil	•		st of my knowledge and be	elief, I am an owner,
701 Print Name		702 Signature		
703 Telephone 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 PSD3005's, Supplement Packer Annual Reports, for multiplant operations.

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not 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 0581-0308. The time required to complete this information collection is estimated to average 7 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, or call (800) 795-3272 (voice) or (202) 720-6382 (TDD). USDA is an equal opportunity provider and employer.

Instructions to Complete Annual Report of Packers Form PSD 3004

As a packer, you must file an annual report with the U.S. Department of Agriculture, Agricultural Marketing Service, Fair Trade Practices Program, Packers and Stockyards Division (hereinafter known as "PSD") on Form PSD 3004, Annual Report of Packers. If your purchases are less than \$500,000, you only need to complete sections 1, 2, 3, and section 7. If you slaughter at more than one plant, you must complete a separate Form PSD 3005, Supplement to the Annual Report of Packers, for each plant.

If you report on a calendar year basis, your form must be postmarked/e-filed by April 15 each year. If you file on a fiscal year basis, you must submit your Annual Report form 90 days after the close of your fiscal year. Requests for additional time to file this report must be received no later than the applicable filing dates above. Failure to file this form may result in a fine of \$110 for each day the report is delinquent. All items must be completed on this form, in its entirety, before submitting the form. Failure to do so will result in the form being returned as incomplete. If available, you may provide financial statements as an attachment to the fully completed annual report form.

For questions about Form PSD 3004, or additional copies of the form, please contact the PSD Central Reporting Unit at 303-375-4264 or PSD-CRU@ams.usda.gov. Forms and instructions are also on PSD's website at www.ams.usda.gov. Please fax the completed form to the Central Reporting Unit at either 314-457-4421/844-303-0332, email to PSD-CRU@ams.usda.gov or mail to:

USDA PSD P.O. Box 110639 Aurora, CO 80042

SECTION-BY-SECTION INSTRUCTIONS

FORM HEADER – BUSINESS ENTITY ID

Business Entity ID should be completed using information on the annual report letter or email.

FORM HEADER - ELECTRONIC FILING

By selecting the Electronic filing check box, the next time you file your annual report you will receive an email message from our system to the address listed on line 111 of the form, each year that you file an annual report, reminding you that your annual report is due, with instructions to go to the E-Forms website located at https://forms.sc.egov.usda.gov/ to file your report. The forms are also located on our website at https://www.ams.usda.gov.

Line No.	Subject	Instruction
		L INFORMATION - SECTION
101 a and b	Reporting Period	The reporting year covers the period of time operated the previous year, either calendar year or fiscal year. (FROM: should be the beginning of your reporting year; TO: should be the end of your reporting year, ie., 01/01/20YY to 12/31/20YY)
		If you recently registered, please enter the date you started operating (<u>FROM</u>) and the end of your reporting year (TO). If you cease operations and go inactive, the end of your reporting year (TO) will be the last date of operation.
102	Entity Name	Enter the name under which you are registered with PSD.
103	Trade Name/d.b.a.	Enter the trade name under which you operate. This is the
		name the business uses, if applicable.
104	Mailing Address	Enter your mailing address. Enter street, city, state, and
and		zip+4. This is the address where all correspondence from
105	O 4' A 11	the Packers and Stockyards Division should be sent.
106 and	Operating Address	Enter the physical location of your operating address. Enter
107		street, city, state, and zip+4. This is the address where you conduct your business services.
107	Contact Name	Enter the name of the person to be contacted regarding
100	Contact Name	questions on the annual report.
109	Contact Telephone	Enter the telephone where the contact may be reached.
110	Fax	Enter the fax used by the entity.
111	E-Mail Address	Enter the entity's e-mail address.
112	Web Site Address (if	Enter the complete Web site address the business operates.
	applicable)	For example: www.WebSiteName@domain.com
	ORGANIZAT	IONAL STRUCTURE – SECTION 2
201a	Owners, Members,	For each owner, officer, member, and every partner, enter
through	Partners, Or Officers,	their name, title, and respective percentage of ownership.
205c	(Name and Title),	Provide this information for every individual with any
	Percent	ownership interest, 10% or greater, in the applicant's
		operation. The person signing this report on line 702, must
206	Type of Openization	be listed. Charly the companies have to indicate the type of
206	Type of Organization	Check the appropriate box to indicate the type of organization as it applies to the business' operation.
207	Same Organization	Check the appropriate box to indicate if your organization is
207	Reported	the same as operated the previous year.
208	Own or Operate a Scale	Check the appropriate box to indicate if this entity owns or
	1	operates a livestock scale which payment to sellers is
		determined.
209	Payment for livestock	Check the appropriate box to indicate the basis of payment for the majority of livestock sold.
210	Electronic Evaluation	Check the appropriate box to indicate whether or not you use
	Device	any type of electronic evaluation device (other than scale)
	Yes/No	for payment determination. If yes, enter the type of
		equipment and the manufacturer on line 212.

ness trol/Ownership ness Name and ress rest in other Market ncy, Dealer anization or Packing npany tted firms' names	List the manufacturer and type of instrument used to measure carcass characteristics to determine payment to sellers. Check the appropriate box to indicate if this entity is owned or controlled by another business entity. If line 212 is yes, list the name and address of the owner/controlling business. Check the appropriate box to indicate if this entity, or any of its owners, officers, directors, members or employees own an interest in any other market agency, dealer business, or packing company. If line 214 is yes, complete 215a-218c.
ness trol/Ownership ness Name and ress rest in other Market ncy, Dealer anization or Packing apany	sellers. Check the appropriate box to indicate if this entity is owned or controlled by another business entity. If line 212 is yes, list the name and address of the owner/controlling business. Check the appropriate box to indicate if this entity, or any of its owners, officers, directors, members or employees own an interest in any other market agency, dealer business, or packing company. If line 214 is yes, complete 215a-218c.
ress Name and ress rest in other Market ncy, Dealer anization or Packing apany	Check the appropriate box to indicate if this entity is owned or controlled by another business entity. If line 212 is yes, list the name and address of the owner/controlling business. Check the appropriate box to indicate if this entity, or any of its owners, officers, directors, members or employees own an interest in any other market agency, dealer business, or packing company. If line 214 is yes, complete 215a-218c.
ress Name and ress rest in other Market ncy, Dealer anization or Packing apany	or controlled by another business entity. If line 212 is yes, list the name and address of the owner/controlling business. Check the appropriate box to indicate if this entity, or any of its owners, officers, directors, members or employees own an interest in any other market agency, dealer business, or packing company. If line 214 is yes, complete 215a-218c.
ness Name and ress rest in other Market ncy, Dealer anization or Packing apany	If line 212 is yes, list the name and address of the owner/controlling business. Check the appropriate box to indicate if this entity, or any of its owners, officers, directors, members or employees own an interest in any other market agency, dealer business, or packing company. If line 214 is yes, complete 215a-218c.
ress rest in other Market ncy, Dealer anization or Packing apany	owner/controlling business. Check the appropriate box to indicate if this entity, or any of its owners, officers, directors, members or employees own an interest in any other market agency, dealer business, or packing company. If line 214 is yes, complete 215a-218c.
rest in other Market ncy, Dealer anization or Packing apany	Check the appropriate box to indicate if this entity, or any of its owners, officers, directors, members or employees own an interest in any other market agency, dealer business, or packing company. If line 214 is yes, complete 215a-218c.
ncy, Dealer anization or Packing apany	its owners, officers, directors, members or employees own an interest in any other market agency, dealer business, or packing company. If line 214 is yes, complete 215a-218c.
anization or Packing npany	an interest in any other market agency, dealer business, or packing company. If line 214 is yes, complete 215a-218c.
npany	packing company. If line 214 is yes, complete 215a-218c.
<u> </u>	
ted firms' names	- 1
ica mins names	List the names of the related firms owned by the person or
	firm's described in line 214.
on or firm with	List the name of the person or firm with ownership or
tionship	control of the entity listed in column a.
•	·
entage	List the percentage of ownership/control held by the
-	person/firm listed in column b.
	_
	PERATIONS, PROCUREMENT, SLAUGHTER,
	entage

AND MEAT PROCESSING – SECTION 3

NOTE: If you provide custom slaughter, and/or your livestock purchase volume is under \$500k, you do not need to complete sections 5 and 6.

φυσση, jou	do not need to complete s	ections c una or
301	Plant Name	Enter the name of plant used for your slaughter operation.
302	Mailing Address	Enter the mailing address of the plant. Enter street, city,
and		state, and
303		Zip+4. This is the address where all correspondence to the
		plant from Packers and Stockyards Division should be sent.
201		
304	Plant Physical Address	Enter the physical address of the plant if it is different from
		the mailing address. Enter street, city, state, and zip+ 4.
305	Federal or State	Select the level of inspection provided at the plant.
	Inspection	
306	FSIS or State Inspection	Enter the inspection number assigned to the plant.
	Number	
307	Own or Lease	Check the ownership status. "Neither" indicates the plant
		performs custom slaughter.
308	Custom Slaughter	Enter name and address (street, city, state, and zip+4), for
through	Entities	each entity for which you slaughter at least 100 head or more
311		on a custom basis at this plant during the reporting period.
		Add additional pages, as necessary.
		Add additional pages, as necessary.

Line No.	Subject	Instruction
312	Number of head of	For each of the entities listed on lines 308-311, enter total
through	livestock custom	number of head of each category of livestock slaughtered by
318	slaughtered	you on a custom basis during the reporting period. Add
		additional pages, as necessary. Enter custom slaughter
		numbers of head for all others that were listed on separate
		pages on line 316. Enter the total number of head for those
		entities for whom you slaughter less than 100 head on line
		317. Enter sum totals of lines 312 through 317 on line 318,
		for each category livestock reported.

For lines 319 through 322 committed supply arrangements include marketing agreements, forward contracts, and formula contracts agreed on more than 14 days before slaughter. The term "formula contract" means the commitment of livestock for slaughter by any means other than through a negotiated purchase or a forward contract, using a method for calculating price in which the price is determined at a future date. Committed supply arrangements also include written and verbal agreements on delivery volume and pricing terms in some combination agreed on more than 14 days before slaughter, or to those commitments that only specify number of livestock delivered or commitments that only specify how price will be settled if livestock are delivered.

319	Packer Owned	Enter all livestock slaughtered which were owned, in whole or in part, more than 14 days by your firm or its subsidiaries. Your firm's parent or ultimate parent firm, or another firm owned, in whole or in part, by your firm's parent or ultimate parent firm.
320	From other packers	Enter all livestock slaughtered that were procured from other packers through committed supply arrangements more than 14 days before slaughter.
321	All other sources	Enter all other livestock slaughtered that were procured through committed supply arrangements more than 14 days before slaughter, not entered in lines 317 or 318.
322	Total Procurement	Enter column totals of lines 319 through 321.
323	From Other Packers	Enter all livestock slaughtered that were procured from other packers through non-committed supply arrangements, which procure 14 days or less before slaughter.
324	Direct	Enter the number of head procured directly at the packing plant, buying stations, feedlots, etc., from non-committed supply arrangements, which procure 14 days or less before slaughter.
325	Through Public Markets	Enter the number of head procured through public markets from non-committed supply arrangements, which were procured 14 days or less before slaughter.
326	Total Procurement	Enter column totals of lines 323 through 325.
327	Livestock Sold	For each category of livestock procured but not slaughtered, enter the number of head sold during the reporting period.
328	Dead or Condemned	For each category of livestock procured but not slaughtered, enter the number of head that died or were condemned during the reporting period.
329	Total	Enter column totals of lines 327 and 328.
330	Total Slaughter	For each category of livestock, add lines, 318, 322, 326, then subtract line 329; enter as Total Slaughter.

Line No.	Subject	Instruction
331	Number Paid on	For each category of livestock, enter total number of
	Carcass Basis/Dressed	livestock slaughtered that were purchased and paid for on a
	Weight	dressed weight or a carcass merit basis (i.e., other than live-
		weight purchases)
332	Meat Purchased	For each category of livestock, enter total pounds of meat in
	Externally	thousands that are purchased externally or transferred in
		from another plant for processing at your plant during the
		reporting period.
333	Total Products Shipped	For each category of livestock, enter total pounds of
		processed meat in thousands, excluding offal, shipped from
		your plant during the reporting period.
401		L INFORMATION – SECTION 4
401	Number of days	Enter the number of days livestock was purchased during the
402	livestock purchased	reporting year.
402	Livestock purchased for	Enter the gross dollar value of all livestock purchased for
402	feeding	feeding.
403	Livestock purchased for	Enter the gross dollar value of all livestock purchased for
	slaughter	slaughter.
404	Total value livestock	Total amount of lines 402 plus 403. This should be equal to
404	purchased	line 603.
405	Name, Address, City,	Enter the name, mailing address, contact name, and contact
through	State, Zip+4, Contact	telephone number of the financial institution used for
409	Name, Contact Number	livestock payments.
410	Accounts	Check the appropriate box indicating whether or not any
	Receivables/Inventories	Accounts Receivable and/or Inventories, or any part thereof,
	committed as collateral	have been pledged or assigned as collateral under a financing
		or loan agreement.
411	Violation of Financial	Check appropriate box indicating whether you received
	Agreement	notification you were in violation of any of the terms,
		conditions, and/or covenants of your financial agreement.
412	Waiver Provided	If line 411 is "Yes", check appropriate box indicating
		financial institution provided a waiver.
413	Financial Institution	Check the box if using the same financial institution for
	same for livestock	livestock payments and financial or borrowing agreements.
	payments and loan	If not checked, complete lines 414 through 418 with
	agreements	appropriate information.
414	Name, Address, City,	Enter the name, mailing address, contact name, and contact
through	State, Zip+4, Contact	telephone number of the financial institution used for
418	Name, Contact Number	financial or loan agreements.
419	Livestock Trust Ratio	To calculate your Livestock Trust ratio, add Cash, Short-
		Term Securities (Certificate of Deposits, Money Market
		accounts, etc.) Account Receivables, and Livestock and
		Meat Inventories together, as of the analysis date. Divide
		this number by the amount of livestock Account Payables as of the analysis date. Enter this amount. (Add lines 501, 502,
		505, 506, 507, and 512 and divide by line 523)
		505, 500, 507, and 512 and divide by fille 525)
		I .

Line No.	Subject	Instruction
Line 110.		TS, LIABILITIES AND EQUITY – SECTION 5
the report	n must be completed on this	s form. Include only the Assets, Liabilities and Net Worth of a may provide financial statements as an attachment to the
501	Cash	Enter the total book balances of all bank accounts. An overdraft should be reported on line 522.
502	Current Cash Equivalents	Enter the dollar value of any current cash investments (money market accounts, securities, CD's, etc.). Include only those marketable securities that represent the cash available for current operations and not otherwise pledged as security.
503	Trade Accounts Receivable from Owners, Officers, and Affiliated Companies	Enter the dollar amounts owed by owners, officers, or affiliated companies as a result of delivering goods or services, and extending credit in the ordinary course of business.
504	Accounts Receivable from All Others (Sources Not Related to Company)	Enter the dollar amounts owed by customers as a result of delivering goods or services, and extending credit in the ordinary course of business.
505	Total Accounts Receivable-Net (Due in 1 year or less)	Enter the sum total of lines 503 and 504.
506	Livestock Inventory	Enter the dollar amount of livestock inventory
507	Meat and Meat Food Products Inventory	Enter the dollar amount of meat and meat food products inventory.
508	Other Inventory	Enter any merchandise, raw materials, work in process, finished goods, operating supplies and ordinary maintenance materials and parts other than livestock, or meat and meat products to be consumed in the business during the next year.
509	Total Inventories	Enter the sum total of lines 506 through 508.
510	Notes Receivable from Owners, Officers, Related Entities	Enter the total dollar value owed to the company by owners officers, or related entities that is due in 1 year or less.
511	Notes Receivable from All Others (Sources Not Related to Company)	Enter the total dollar value owed to the company by other than owners, officers or related entities that is due in 1 year or less.
512	Total Notes and Loans Receivable (Due in 1 year or less)	Enter the sum total of lines 510 and 511.
513	Advances on Livestock	Enter the dollar value of cash advances given for the purchase of livestock.
514	Other Current Assets	Enter the dollar value of prepaid expenses and other assets expected to be converted to cash or sold or consumed during the next year.
515	Total Current Assets	Enter the sum total of lines 501, 502, 505, 509, 512, 513 and

514.

Line No.	Subject	Instruction
516	Plant, Property and	Enter the dollar value of land, buildings, plant, equipment
	Equipment	and amortizable assets less accumulated depreciation and
		amortization.
517	Investments in	Enter the total dollar value of any investments in subsidiaries
	subsidiaries and related companies	and related companies.
518	Due from owners,	Enter the dollar value due from owners, officers, and related
310	officers and related	entities that is expected to be received in more than 1 year
	entities	from the reporting date of this report.
519	Other Assets	Enter the total dollar value of all others assets expected to be
		converted to cash, or sold or consumed in more than 1 year
		from the reporting date of this report.
520	Total Other Assets	Enter the sum total of lines 517 through 519.
521	Total Assets	Enter the sum total of lines 515, 516 and 520.
522	Overdraft	Enter the total overdraft balances of all bank accounts.
523	Livestock Payables	Enter the total dollar amount you owe for livestock.
524	Other Payables to	Enter the total dollar amount you owe to owners, officers,
	Owners, Officers, and	and related entities, for other than livestock.
	Related Entities	
525	Other Payables (Sources	Enter the total dollar amount you owe to all vendors for
	Not Related to	other than livestock, meat, and meat products.
526	Company) Total Trade Accounts	Enter the sum total of lines 523, 524, and 525
320	Payables	Effect the sum total of fines 323, 324, and 323
527	Amount due to owners,	Enter dollar amount of notes and loans due by you to
	officers, or related	owners, officers, and related entities in 1 year or less.
	entities, 1 year or less	
528	Amount due to others 1	Enter the dollar amount of notes and loans due by you to
	year or less (Sources not	other than owners, officers, and related entities in 1 year or
529	Related to Company) Total Current Maturities	less. Enter the sum total of lines 527 and 528.
329	of Long Term Debt	Effect the sum total of fines 327 and 328.
530	Other Current Liabilities	Enter the total dollar value of any accrued liabilities and
		other current liabilities due within 1 year of the reporting
		date of this report.
531	Total Current Liabilities	Enter the sum total of lines 522, 526, 529 and 530.
532	Amount due to owners,	Enter the total dollar value of notes, mortgages, bonds, and
	officers, or related	installments that are payable to owners, officers, and related
	entities, after 1 year	entities after 1 year.
533	Amount due to others	Enter the total dollar value of notes, mortgages, bonds, and
	after 1 year (Sources	installments that are payable to other than owners, officers,
	Not Related to Company)	and related entities after 1 year.
534	Total Long-Term Debt,	Enter the sum total of lines 532 and 533.
33 T	Less Current Maturities	Eliter the built tour of filled 332 und 333.
535	All Other Liabilities	Enter all other liabilities owed after 1 year.
536	Total Liabilities	Enter the sum total of lines 531, 534, and 535.
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Line No.	Subject	Instruction
537	Owner's Equity	If unincorporated, enter the dollar value of the owner's net
	(Unincorporated)	worth (should equal line 521 less line 536).
539	Stock Issued	If incorporated, enter the dollar value of stock issued.
	(Incorporated)	
530	Additional paid-in	If incorporated, enter the dollar value of any additional paid-
	capital	in capital.
540	Retained Earnings	If incorporated, enter the retained earnings.
541	Total Equity	Enter the sum of lines 537 through 540 (should equal line 521 less line 536).
542	Total Liabilities and Equity	Enter the sum total of lines 536 and 541 (should equal line 521).
	STATEMENT OF R	EVENUE AND EXPENSES – SECTION 6
601	Net Sales	Enter the value of gross sales less sales returns and allowances.
602	Opening Inventory	Enter the dollar amount of inventory at the beginning of the reporting period.
603	Livestock Purchases	Enter the dollar amount of livestock purchases during the reporting period (this should equal line 404).
604	Meat and Meat Products	Enter the dollar amount of meat and meat products
(05	Purchases	purchased during the reporting period.
605	Other Purchases	Enter the dollar amount of all other purchases during the
606	Subtotal	reporting period. Enter the sum of lines 602 through 605.
607	Closing Inventory	Enter the dollar amount of inventory at the end of the reporting period.
608	Total Cost of Sales	Subtract line 607 from 606.
609	Gross Profit	Subtract line 608 from line 601.
610	Manufacturing	Enter the dollar amount of manufacturing expenses incurred during the reporting period. This includes all direct costs related to your slaughtering and process operations.
611	General, Sales, and Administrative	Enter the dollar amount of all General, Sales, and Administrative expenses incurred during the reporting period.
612	Depreciation and Amortization	Enter the dollar amount of depreciation and amortization during the reporting period.
613	Total Operating Expenses	Enter the sum of lines 610 through 612.
614	Operating Income or Loss	Subtract line 613 from line 609; enter the difference as Operating Income (+) or Loss (-).
615	Other Additions to Income	Enter any other additions to income during the reporting period.
616	Interest Expense	Enter the dollar amount of all interest expenses incurred
617	Other Deductions from	during the reporting period as a negative number.
617	Other Deductions from	Enter any other deductions from income during the reporting
<i>C</i> 10	Income A division and to	period as a negative number.
618	Adjustments to	Enter the sum of lines 615 through 617.
	Operating Income + or -	

Line No.	Subject	Instruction		
619	Net Profit or Loss	Add line 618 to line 614; enter the sum as Net Profit (+) or		
		Loss (-) Before Income Tax.		
CERTIFICATION – SECTION 7				
701	Print Name	Print the name of the owner, officer, partner, or member		
		responsible for this report.		
702	Signature	The report must be signed a responsible person.		
703	Telephone	Enter the telephone number of the person signing the report.		
704	Date	Enter the date the report is signed.		
705	Title	Enter the title of the person signing the report.		