

NATIONAL AGRICULTURAL CLASSIFICATION SURVEY

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Please make corrections to name, address, and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your responses will be kept confidential and any person who willfully discloses ANY identifiable information about you or your operation is subject to a jail term, a fine, or both. This survey is conducted in accordance with the Confidential Information Protection provisions of Title V, Subtitle A, Public Law 107-347 and other applicable Federal laws. For more information on how we protect your information please visit: <https://www.nass.usda.gov/confidentiality>. Response is **voluntary**.

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 number is 0535-0226. The time required to complete this information collection is estimated to average 15 minutes 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.

Your responses to the following items will help us determine your involvement in agriculture. We need your completed form even if you are not involved in agricultural activity. Please complete your report by mail or via the internet at www.agcounts.usda.gov by **May 6, 2019**.

In the past 12 months...

- Did you have any agricultural revenue?
 (Include any crop sales and sales of livestock or their products, fish and other aquaculture. Exclude cash rent received or share of crops received for rented out land.)..... 001 1 Yes - Go to Item 1 3 No - Continue
- Did you own, rent, or operate cropland, pastureland, or land with the potential for agricultural production?..... 002 1 Yes - Go to Item 1 3 No - Continue
- Did you have or sell any type of livestock, including equine, poultry or fowl, bees, or aquaculture?..... 003 1 Yes - Go to Item 1 3 No - Continue
- Did you receive any Federal or state agricultural payments?
 (Include Federal Farm Program, CRP, WRP, FWP, and CREP payments.)..... 004 1 Yes - Go to Item 1 3 No - Continue

→ If you answered **YES** to any questions above, continue with Item 1 below.

→ If you answered **NO** to all questions above, go to Item 21 on page 4.

Location of Agricultural Activity for this Operation

1. In what county and state was the largest value of your agricultural products raised or produced?

Principal County Name	State
0055	0060

Acres Operated

Include the farmstead, all cropland, ponds, woodland, pastureland, wasteland, and land that is in government programs.

2. How many acres does this operation:

a. Own?.....

+

111

Acres

b. Rent or lease **from** others, or use rent free?
(Exclude land used on an animal unit month (AUM) basis.).....

+

112

c. Rent or lease **to** others?.....

-

113

3. **Total acres operated:** [Items 2a + 2b - 2c]?.....

=

900

4. Of the total acres operated [Item 3], how many acres are in permanent pasture, woodland pasture, or rangeland?.....

220

Cropland

5. Of the total acres operated [Item 3], how many acres are in the Conservation Reserve Program (CRP), Wetlands Reserve Program (WRP), Farmable Wetlands Program (FWP), or Conservation Reserve Enhancement Program (CREP)?.....

Acres

200

6. Of the total acres operated [Item 3], how many acres are considered cropland?
(Include planted cropland, land in hay, summer fallow, idle cropland, cropland used for pasture, and cropland in government programs.).....

300

7. Of the total cropland acres [Item 6], how many are used to produce:

a. Any hay or forage crops on this operation?
(Count each acre only once, regardless of the number of cuttings or different uses.).....

345

b. Any fruit, berry, or nut crops on this operation?
(Exclude home garden, personal or home use crops.).....

400

c. Any vegetable or melon crops on this operation?
(Exclude potatoes, home garden, personal or home use crops.).....

689

d. All other crops or idle cropland on this operation?.....

202

e. Any nursery, greenhouse, floriculture crops, or aquatic plants on this operation?.....

939

1

Yes

3

No

Grain Storage

8. What is the total storage capacity of all structures normally used to store whole grains or oilseeds on the total acres operated?.....

305

Bushels

Livestock

9. During the past 12 months, what was the largest number of the following livestock on hand at any one time? (Include animals of any age, including newborns.)

a. All cattle and calves, regardless of ownership?.....

610

Number

i. Milk cows, including dry cows, regardless of ownership?.....

615

b. All hogs and pigs owned by this operation, regardless of location?.....

630

c. All sheep and lambs owned by this operation, regardless of location?.....

640

d. All goats and kids, regardless of ownership?.....

645

e. All horses, ponies, mules, donkeys, or burros, regardless of ownership?.....

675

20. Answer the following for up to four individuals who were involved in the decisions for this operation as of December 31, 2018.

	Person 1	Person 2	Person 3	Person 4
a. Full Name	1836	1852	1872	1873
b. Sex	1926 1 <input type="checkbox"/> Male 2 <input type="checkbox"/> Female	1586 1 <input type="checkbox"/> Male 2 <input type="checkbox"/> Female	1597 1 <input type="checkbox"/> Male 2 <input type="checkbox"/> Female	1614 1 <input type="checkbox"/> Male 2 <input type="checkbox"/> Female
c. What was the person's age on December 31, 2018?	1925 years	1585 years	1596 years	1615 years
d. In what year did the person begin to operate any part of THIS operation?	1930	1584	1595	1627
e. Is this person of Hispanic, Latino or Spanish origin?	1927 Hispanic, Latino or Spanish origin 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1587 Hispanic, Latino or Spanish origin 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1598 Hispanic, Latino or Spanish origin 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1622 Hispanic, Latino or Spanish origin 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
f. Race (Mark one or more)	Mark one or more 2701 <input type="checkbox"/> White 2702 <input type="checkbox"/> Black or African American 2703 <input type="checkbox"/> American Indian or Alaska Native 2705 <input type="checkbox"/> Asian 2704 <input type="checkbox"/> Native Hawaiian or Other Pacific Islander	Mark one or more 1801 <input type="checkbox"/> White 1802 <input type="checkbox"/> Black or African American 1803 <input type="checkbox"/> American Indian or Alaska Native 1805 <input type="checkbox"/> Asian 1804 <input type="checkbox"/> Native Hawaiian or Other Pacific Islander	Mark one or more 1901 <input type="checkbox"/> White 1902 <input type="checkbox"/> Black or African American 1903 <input type="checkbox"/> American Indian or Alaska Native 1905 <input type="checkbox"/> Asian 1904 <input type="checkbox"/> Native Hawaiian or Other Pacific Islander	Mark one or more 1616 <input type="checkbox"/> White 1617 <input type="checkbox"/> Black or African American 1618 <input type="checkbox"/> American Indian or Alaska Native 1620 <input type="checkbox"/> Asian 1621 <input type="checkbox"/> Native Hawaiian or Other Pacific Islander

Change of Operator

21. Has the operator named on the label sold, rented, or turned over this operation to someone else?

1086 1 Yes - Continue 3 No - Go to Item 23

22. Please provide the following information for the operation that has taken over the land.

1088 Operation Name _____ 1089 Operator Name _____
 1090 Address _____
 1091 City _____ 1092 State _____ 1094 Zip Code _____
 1095 Phone _____

Possible Duplication or Other Names

23. It is important that we do not have duplication on our list of farms and ranches. Is it possible the information on this form would be reported by another operation or under another name?

1080 1 Yes - please provide the name and address below 3 No

1081 Operation Name _____ 1087 Operator Name _____
 1082 Address _____
 1083 City _____ 1084 State _____ 1085 Zip Code _____

9912 Completed by: _____	9911 Phone:(____)_____	9910 MM DD YY Date: ____ ____ ____
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Please return this form in the postage-paid envelope provided. Thank you for your cooperation.