



UNITED STATES DEPARTMENT OF AGRICULTURE
AGRICULTURAL MARKETING SERVICE
USDA DOMESTIC HEMP PRODUCTION PROGRAM
USDA PRODUCER ANNUAL REPORT

Hemp producers licensed by the U.S. Department of Agriculture (USDA) must submit this form to USDA by December 15th of each calendar year. Please include data from all production areas and harvest cycles throughout the year. Only include data on hemp planted, disposed, and harvested under a USDA (not State or Tribal) license.

Below is a description of each data point needed:

- **Producer or Business Name:** This is the license holder name as it appears on the license certificate.
- **USDA License Number:** This is the license number as it appears on the license certificate. This number will be in the following format: USDA_XX_XXXX.
- **Farm Number, Tract Number, Field Number, Subfield Number:** This information is provided as part of the USDA Farm Service Agency (FSA) land registration process. Each licensed producer must register the growing location with FSA to receive these numbers.
- **Total Planted (*Outdoor Acres or Indoor Sq Ft*):** This is the total planted growing area expressed in acres if measuring outdoor production or square feet if measuring indoor production.
- **Total Disposed (*Outdoor Acres or Indoor Sq Ft*):** This is the total area disposed for non-compliant THC levels expressed in acres if measuring outdoor production or square feet if measuring indoor production. This number excludes disposals due to damage from weather, pests, etc.
- **Total Harvested (*Outdoor Acres or Indoor Sq Ft*):** This is the total area harvested expressed in acres or square feet. This includes any material that was successfully remediated through an approved remediation method and was permitted to enter into the stream of commerce.
- **Intended End Use (*CBD, Fiber, Grain, Seed, Propagative Material*):** Include all end uses that apply to location.
- **Explain any Discrepancies in Data (*i.e. Weather, Pests*):** This is the explanation of any discrepancies between Total Planted and Total Disposed due to weather, poor germination, or any other type of destruction that was not the result of a disposal due to a non-compliant THC test result.
- If outdoor area is less than one acre, estimate land area and present this figure as a decimal (1/2 acre = .5, 1/4 acre = .25, etc.)

This form shall be submitted to the USDA using a digital format compatible with USDA's information sharing systems, whenever possible. All information submitted must be accurate, legible, and complete. If submission through the USDA information sharing system is not possible, please submit form to:

By Mail:
USDA/AMS/Specialty Crops Program
Hemp Branch
470 L'Enfant Plaza S.W.
P.O. Box 23192
Washington, D.C. 20026

Or via Email at:
Forms.Hemp@usda.gov

Or via Fax at:
(202) 720-8938

The following statements are made in accordance with the Privacy Act of 1974 (5 U.S.C. § 552a) and the Paperwork Reduction Act of 1995. The authority for requesting this information to be supplied on this form is the 7 CFR Part 990 Domestic Hemp Program (Program). The purpose of collecting this information is for USDA to administer the Program and the information provided on this form will be used to monitor Program participants. Failure to provide the information requested on this form may result in ineligibility to participate in the Program.

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 collection is OMB 0581-0318. The time required to complete this information collection is estimated to average 20 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.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotope, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English. To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint_filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410; (2) fax: (202) 690-7442; or (3) email: program.intake@usda.gov. USDA is an equal opportunity provider, employer, and lender.

Name of Licensee: _____ USDA License Number: _____

Primary Address: _____
 Street City State Zip Code

Signature of Licensee or Representative: _____ Date Submitted: _____

Farm Number	Tract Number	Field Number	Subfield Number <i>(if Applicable)</i>	Location Type <i>(Greenhouse/ Indoor, or Field/Outdoor)</i>	Total Planted <i>(Acres or Sq Ft.)</i>	Total Disposed for Non-Compliance <i>(Acres or Sq Ft.)</i>	Total Harvested <i>(Acres or Sq Ft.)</i>	Intended End Use <i>(CBD, Fiber, Grain, Seed, Propagative Material. List all.)</i>	Explain any Discrepancies in Data <i>(i.e. Weather, Pests)</i>
					_____ Acres or _____ Sq Ft	_____ Acres or _____ Sq Ft	_____ Acres or _____ Sq Ft		
					_____ Acres or _____ Sq Ft	_____ Acres or _____ Sq Ft	_____ Acres or _____ Sq Ft		
					_____ Acres or _____ Sq Ft	_____ Acres or _____ Sq Ft	_____ Acres or _____ Sq Ft		

Use additional lines as necessary.