

2021 FARM PRODUCER STUDY

OMB No. 0535-0226
 Approval Expires: XX/XX/20XX
 Project Code: 537
 Survey ID: 9048 Version: 2



USDANASS
 National Operations Division
 9700 Page Avenue, Suite 400
 St. Louis, MO 63132-1547
 Phone: 1-888-424-7828
 Fax: 1-855-415-3687
 Email: nass@nass.usda.gov

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 and Statistical Efficiency Act of 2018, Title III of Pub. L. No. 115-435, codified in 44 U.S.C. Ch. 35 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 10 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.

Acres in 2021

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

	Mark "X" if None	Acres
1. In 2021, how many acres are:		
a. Owned?.....	<input type="checkbox"/>	0043 <input style="width: 100px; height: 20px;" type="text"/>
b. Rented or leased from others, or used rent free? (Exclude land used on an animal unit month (AUM) basis.).....	<input type="checkbox"/>	0044 <input style="width: 100px; height: 20px;" type="text"/>
c. Rented or leased to others?	<input type="checkbox"/>	0045 <input style="width: 100px; height: 20px;" type="text"/>
2. Total acres operated in 2021: [Items 1a + 1b – 1c]?.....		0046 <input style="width: 100px; height: 20px; border: 2px solid black;" type="text"/>

3. Please classify this operation in terms of the gross value of sales and government agricultural payments in 2021.

INCLUDE:

- sales of all crops, livestock, poultry, and livestock products (milk, eggs, etc.) sold in 2021
- value of hay, silage, and other crops harvested in 2021, but not sold
- value of all crops, livestock, and poultry produced under contract in 2021
- landlord's share of government payments and crops sold in 2021

EXCLUDE dollars received on land rented to others.

0201

- | | | | |
|---|---|---|---|
| 2 <input type="checkbox"/> 'None' this year | 3 <input type="checkbox"/> \$1 - \$999 | 4 <input type="checkbox"/> \$1,000 - \$2,499 | 5 <input type="checkbox"/> \$2,500 - \$4,999 |
| 6 <input type="checkbox"/> \$5,000 - \$9,999 | 7 <input type="checkbox"/> \$10,000 - \$24,999 | 8 <input type="checkbox"/> \$25,000 - \$49,999 | 9 <input type="checkbox"/> \$50,000 - \$99,999 |
| 10 <input type="checkbox"/> \$100,000 - \$149,999 | 11 <input type="checkbox"/> \$150,000 - \$249,999 | 12 <input type="checkbox"/> \$250,000 - \$349,999 | 13 <input type="checkbox"/> \$350,000 - \$499,999 |
| 14 <input type="checkbox"/> \$500,000 - \$999,999 | 15 <input type="checkbox"/> \$1,000,000 and over | | |

4. Which of these categories represents the largest portion of the total gross value of sales in 2021 for this operation?

0862

- 1 **Grains, Oilseeds, Dry Beans, and Dry Peas**
(corn, flaxseed, grain silage and forage, grains and oilseeds, popcorn, rice, small grains, sorghum, soybeans, sunflowers, straw, etc.)
- 2 **Tobacco**
- 3 **Cotton and Cottonseed**
- 4 **Vegetables, Melons, Potatoes, and Sweet Potatoes**
(beets, cabbage, cantaloupes, pumpkins, sweet corn, tomatoes, watermelons, vegetable seeds, etc.)
- 5 **Fruit, Tree Nuts, and Berries**
(almonds, apples, blueberries, cherries, grapes, hazelnuts, kiwifruit, oranges, pears, pecans, strawberries, walnuts, etc.)
- 6 **Nursery, Greenhouse, Floriculture, and Sod**
(bedding plants, bulbs, cut flowers, flower seeds, foliage plants, mushrooms, nursery potted plants, shrubbery, sod, etc.)
- 7 **Cut Christmas Trees and Short Rotation Woody Crops**
- 8 **Other Crops, Hay, CRP, and Pasture**
(grass seed, hops, maple syrup, mint, peanuts, sugarcane, sugarbeets, etc.)
- 9 **Hogs and Pigs**
- 10 **Milk and Other Dairy Products (from cows)**
- 11 **Cattle and Calves**
- 12 **Sheep, Goats, and their Products**
(wool, mohair, milk, cheese, etc.)
- 13 **Horses, Ponies, Mules, Burros, and Donkeys**
- 14 **Poultry and Eggs**
(broilers, chickens, turkeys, ducks, eggs, emus, geese, hatchlings, ostriches, pigeons, pheasants, quail, poultry products, etc.)
- 15 **Aquaculture**
(catfish, trout, ornamental and other fish, mollusks, crustaceans, etc.)
- 16 **Other Animals and Other Animal Products**
(honey bees, honey, rabbits, fur-bearing animals, semen, manure, other animal specialties, etc.)

Personal Characteristics

5. In 2021, how many people were involved in decisions for this operation?
(Include family members and hired managers. Exclude hired workers unless they were
a hired manager or family member.) Number
xxxx

6. The following questions should be answered by a person involved in decisions for this operation.
a. What was your age on December 31, 2021? xxxx

b. Are you of Hispanic, Latino, or Spanish origin?

xxxx 1 Yes

3 No

c. What is your race? Select all that apply.

xxxx White

xxxx Black or African American

xxxx American Indian or Alaska Native

Specify tribe: xxxx

xxxx Asian

xxxx Native Hawaiian or Other Pacific Islander

d. What is your sex?

xxxx 1 Male

2 Female

e. At which occupation did you spend the majority (50% or more) of your work time in 2021? Select one.

xxxx 1 Farm or ranch work

2 Work other than farming or ranching

f. How many days did you work off the farm in 2021? Select one.
Include days in which you worked at least four hours per day in an off-farm job.
Include work on someone else's farm for pay.

xxxx 1 None

2 1 - 49 days

3 50 - 99 days

4 100 - 199 days

5 200 days or more

g. Have you ever served on active duty in the U.S. Armed Forces, Reserves, or National Guard? Select one.

- xxxx 1 Never served in the military
- 2 Only on active duty for training in the Reserves or National Guard
- 3 Now on active duty
- 4 On active duty in the past, but not now

h. What is the highest level of formal education you have achieved? Select one.

- xxxx 1 Less than high school diploma
- 2 High school
- 3 Some college (Include associates degree)
- 4 Four-year college graduate or beyond

i. Do you have difficulty seeing, even if wearing glasses?

- xxxx 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all

j. Do you have difficulty hearing, even if using a hearing aid?

- xxxx 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all

k. Do you have difficulty walking or climbing steps?

- xxxx 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all

l. Do you have difficulty remembering or concentrating?

- xxxx 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all

m. Do you have difficulty with self-care, for example, washing all over or dressing?

- xxxx 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all

n. Using your usual (customary) language, do you have difficulty communicating, for example, understanding or being understood?

- xxxx 1 No difficulty
- 2 Some difficulty
- 3 A lot of difficulty
- 4 Cannot do at all

Respondent Name:

Date:

9912	9910	MM	DD	YY
		_ _	_ _	_ _

Respondent Email:

Respondent Phone:

1095	9911 (____) _____	check if cell phone <input type="checkbox"/>
------	---------------------	--

Operation Email (if different from above):

Operation Phone (if different from above):

9937	9936 (____) _____	check if cell phone <input type="checkbox"/>
------	---------------------	--

Please return this form in the postage-paid envelope provided. Thank you for your cooperation.