

CONSERVATION PRACTICE ADOPTION MOTIVATIONS SURVEY - VERSION 2

CONFINED LIVESTOCK PRACTICES

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Version 2



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1. Did you, regardless of ownership, raise any swine, poultry, milk cows, veal calves, or feeder cattle (including backgrounders) on your operation during 2021?

1101 Yes - Go to Section 1 - Land Use and Livestock, page 2 No - Continue to Item 1a, then Go to Section 13 - Conclusion, page 32

a. What is the current status of your livestock operation?

1102

- 1 Sold
- 2 Rented out
- 3 Idle for more than a year

After answering Item 1a above, Go to Section 13 - Conclusion, page 32.

Section 1 - Land Use and Livestock

Please report farm/ranch land owned, rented, or used in your operation.

INCLUDE all cropland, Conservation Reserve Program (CRP), pastureland, woodland, wasteland, farmstead, acres used for crop/livestock production facilities, and all other building sites associated with this operation, etc.

1. For 2021, how many acres did this operation:

- a. Own?.....
- b. Rent or Lease from others or use Rent Free?
INCLUDE any short term leases or land used on an animal unit month (AUM) basis
- c. Rent to others?

Acres
901
+
132
+
905
-
900
=

2. Calculate Item 1a + 1b - 1c. Then the total acres operated in 2021 was:

3. Of the total acres operated, how many acres are considered:

- a. Cropland, including land in hay, summer fallow, cropland idle, and cropland in government programs?
- i. How many acres were under an easement against development for non-agricultural uses in 2021?

Acres
101
xxxx

- b. Grazing land, including permanent pasture and rangeland, woodland pastured, and other pasture and grazing land (including rotational pasture) that could have been used for crops without additional improvements?
- i. How many acres were under an easement against conversion to crop production or non-agricultural use in 2021?

102
xxxx
103
104
107

c. Woodland, not pastured?

d. Other land?

4. Of the total acres operated, how many acres were under a permanent or long-term easement or enrolled in a land retirement program in 2021?

INCLUDE any other land enrolled in the Conservation Reserve Program (CRP), Wetland Reserve Program (WRP), Farmable Wetlands Program (FWP), Conservation Reserve Enhancement Program (CREP), Agricultural Conservation Easements Program (ACEP) and the Forest Stewardship Program or any other state, federal or local program

EXCLUDE land included in 3ai or 3bi

Section 1 - Land Use and Livestock (continued)

5. Report the total number of livestock and poultry, by type, on your operation on December 31, 2021.

		Number
a.	Beef cows	108
b.	Milk cows, including any dry cows	109
c.	Other cattle and calves INCLUDE fed cattle, beef and dairy cull animals, stockers and feeders, veal calves, etc.	110
d.	All hogs and pigs	111
e.	All Poultry INCLUDE layers and pullets, including table and hatching, turkeys, broilers, other chickens, ducks, etc.	112
f.	All other livestock, please specify xxxx _____ INCLUDE goats, sheep, etc.	xxxx

6. During 2021, did this operation produce organic products according to USDA's National Organic Program (NOP) standards or have acres transitioning into USDA NOP Production?
EXCLUDE processing and handling

106

1 Yes

3 No

7. During 2021, did this operation participate in a sustainable sourcing contract that requires specific farming practices?

xxxx

1 Yes

3 No

Section 2 - General Conservation

1. Report your agreement or disagreement with the following statements about conservation practices and technology.

	Agree	Neither Agree nor Disagree	Disagree
I seek out information about conservation practices and their implementation. xxxx	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I generally adopt new technologies or conservation practices before other farmers in my local area. xxxx	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I experiment with new conservation practices on my farm. xxxx	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I do not implement new conservation practices unless I know that they will increase my profits or reduce my workload. xxxx	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I am willing to adopt conservation practices that improve environmental quality, even if they do not increase my profit or reduce my workload. xxxx	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I am willing to adopt conservation practices that protect my investment in the land, even if they do not increase my profit or reduce my workload. xxxx	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I am willing to adopt conservation practices that preserve my land for the next generation, even if they do not increase my profit or reduce my workload. xxxx	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

2. Thinking in general about the practices in use on your farming operation, what are your objectives when deciding to use manure management or conservation? Check all that apply.

- xxxx Improving water quality (e.g., avoid polluting streams, rivers, and lakes)
- xxxx Enhancing soil health or soil quality
- xxxx Reducing erosion
- xxxx Ensuring compliance with regulations
- xxxx Reducing the cost of manure handling and management
- xxxx Facilitating (a) better use of nutrients on my farm or (b) export to other farms
- xxxx Improving animal health
- xxxx Reducing the need for repetitive maintenance
- xxxx Managing dust, odors, or other air quality issues
- xxxx Other, please specify: xxxx _____

Section 4 - Waste (Manure) Storage Facilities

1. Are the following waste (manure) storage facilities currently in use on your livestock operation?
 EXCLUDE facilities designed to treat manure (e.g., water treatment lagoons and vegetated treatment areas)

Complete the table below and follow the instructions at the bottom of the table below.

1	Are any of these waste storage facilities in use on your operation?	Of facilities in use, how many were taken over from another operation?	Of facilities in use, how many were installed by you?	Number of facilities in use (Col 5 = Col 3 + Col 4)
1	2	3	4	5
Buildings for solid waste	1301 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1302	1303	1304
Impoundments, compacted soil lining	1305 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1306	1307	1308
Impoundments, concrete lining	1309 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1310	1311	1312
Impoundments, geomembrane or geosynthetic clay lining	1313 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1314	1315	1316
Tank, steel lined	1317 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1318	1319	1320

If you answered "No" to all facility types in Item 1, Column 2, above, continue.
 If you answered "Yes" for any facility type in Item 1, Column 2, above, Go to Item 3, page 7.

2. Please report your agreement or disagreement with the following statements regarding waste storage facilities.
 Complete the table and Item 2a below, then go to Section 5 - Animal Mortality Facilities, page 9.

I chose not to install waste storage facilities, at least in part, because:

	Agree	Neither Agree nor Disagree	Disagree
They are not needed on my operation. 1321	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated costs greater than benefits. 1322	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. 1323	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. 1324	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. 1325	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. 1326	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Cost of meeting government standards for financial assistance is too high 1327	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

- a. Please specify any additional reason why you have not installed waste storage facilities.

Other reason, specify: ¹³²⁸ _____

After completing Item 2 and 2a above, Go to Section 5 - Animal Mortality Facilities, page 9.

Section 4 - Waste (Manure) Storage Facilities (continued)

c. Did you receive technical assistance or financial assistance?

	Did you receive technical assistance?	Did you receive financial assistance?	What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0
Buildings for solid waste	1343 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1344 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1345
Impoundment, compacted soil lining	1348 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1349 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1350
Impoundment, concrete lining	1353 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1354 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1355
Impoundment, geomembrane or geosynthetic clay lining	1358 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1359 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1360
Tank, concrete or steel lined	1363 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1364 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1365

i. What portion of financial assistance to begin this practice was from federal sources? Enter 0 if no financial assistance was received.)

1368	%
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d. I decided to install waste storage facilities, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
More storage was required to expand my operation. 1369	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Changing weather required a change in storage. 1370	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
An upgrade was required to be eligible for financial assistance for other facilities. 1371	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. 1372	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. 1373	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Anticipated off-farm environmental benefits. 1374	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

e. Did you select the type of storage based on? Check all that apply.

1375 Cost

1376 Management time or effort

1377 Other criteria, specify: 1378 _____

f. Please specify any additional reason why you have installed waste storage facilities.

Other reason, specify: 1380 _____

Section 5 - Animal Mortality Facilities

1. Do you have animal mortality facilities on your operation?

Complete the table below and follow the instructions at the bottom of the table below.

	Are animal mortality facilities in use on your operation?	Of facilities in use, how many were taken over from another operation?	Of facilities in use, how many were installed by you?	Number of facilities in use (Col 5 = Col 3 + Col 4)
1	2	3	4	5
Animal mortality facilities INCLUDE structures for the treatment or disposal of carcasses from day-to-day operations EXCLUDE emergency mortality events	1409 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1410	1411	1412

If you answered "Yes" in Column 2, above, Go to Item 3, page 10.
If you answered "No" in Column 2, above, continue.

2. Please report your agreement or disagreement with the following statements regarding animal mortality facilities.

Complete the table and Item 2a below, then go to Section 6 - Waste (manure) Separation Facilities, page 12.

I chose not to install animal mortality facilities because:

	Agree	Neither Agree nor Disagree	Disagree
They are not needed on my operation. 1417	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated costs greater than benefits. 1418	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. 1419	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. 1420	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. 1421	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. 1422	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Cost of meeting government standards for financial assistance is too high. 1423	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

a. Please specify any additional reason why you have not installed animal mortality facilities.

Other reason, specify: ¹⁴²⁴ _____

After completing Items 2 and 2a above, Go to Section 6 - Waste (manure) Separation Facilities, page 12.

Section 5 - Animal Mortality Facilities (continued)

3. Are the animal mortality facilities on your operation required by regulation?

INCLUDE regulation from Federal, State, or local governments.

1425

1 Yes

3 No

4. What type of day-to-day animal mortality management do you implement on your operation? Check all that apply.

1441

Rendering

1442

Composting

1443

Burial

1444

Freezer

1445

Incineration

1446

Gasification

5. Did you install the animal mortality facilities on your operation (as opposed to taking them over from another operation through purchase or lease)?

1451

1 Yes - Continue

3 No - Go to Section 6 - Waste (manure) Separation Facilities, page 12

a. Were the animal mortality facilities you installed:

i. New (no prior facility on the same location)? 1452 1 Yes 3 No

ii. Renovation of existing facilities? 1453 1 Yes 3 No

b. Did the facilities you installed result in an overall increase in capacity? 1454 1 Yes 3 No

c. Did you receive technical assistance or financial assistance?

	Did you receive technical assistance?	Did you receive financial assistance?	What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0
Animal mortality facility	1465 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1466 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1467

i. What portion of financial assistance to begin this practice was from federal sources? Enter 0 if no financial assistance was received. 1470 %

Section 5 - Animal Mortality Facilities (continued)

d. I decided to install animal mortality facilities, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
An upgrade was required to be eligible for financial assistance for other facilities. 1473	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated benefits greater than cost. 1474	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated saving time or effort. 1475	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. 1476	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. 1477	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated off-farm environmental benefits. 1478	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

e. Please specify any additional reason why you have installed animal mortality facilities.

Other reason, specify: ¹⁴⁷⁹ _____

Section 6 - Waste (Manure) Separation Facilities

1. Do you have waste (manure) separation facilities on your operation?

INCLUDE

- filters or screens
- settling tanks
- settling basins
- settling channels used to separate manure solids from liquids

Complete the table below and follow the instructions at the end of the table.

	Are waste separation facilities in use on your operation?	Of facilities in use, how many were taken over from another operation?	Of facilities in use, how many were installed by you?	Number of facilities in use (Col 5 = Col 3 + Col 4)
1	2	3	4	5
Waste (Manure) Separation Facilities	1501 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1502	1503	1504

If you answered "Yes" in Column 2, above, Go to Item 3, page 13.
If you answered "No" in Column 2, above, continue.

2. Please report your agreement or disagreement with the following statements regarding waste separation facilities.

Complete the table and 2a below, then go to Section 7 - Comprehensive Nutrient Management, page 15.

I chose not to install waste (manure) separation facilities because:

	Agree	Neither Agree nor Disagree	Disagree
They are not needed on my operation. 1509	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated costs greater than benefits. 1510	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. 1550	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. 1512	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. 1513	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. 1514	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Cost of meeting government standards for financial assistance is too high. 1515	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

a. Please specify any additional reason why you have not installed waste separation facilities.

Other reason, specify: ¹⁵¹⁶ _____

After completing Items 2 and 2a above, Go to Section 7 - Comprehensive Nutrient Management, page 15.

Section 6 - Waste (Manure) Separation Facilities (continued)

3. What types of waste separators have you implemented? Check all that apply.

- 1431 Inclined screen
- 1432 Screw press
- 1433 Roller press
- 1434 Belt press
- 1435 Settling basin
- 1436 Weeping wall
- 1437 Vibratory screen
- 1438 Rotating screen
- 1439 Centrifuge
- 1440 Geotextile container

4. Have changes in weather affected your management of waste separation facilities?

- 1447 1 Yes - Continue 3 No - Go to Item 5, page 14

a. Have any of the following changes affected your management of waste separation facilities?

- i. Increased precipitation 1448 1 Yes 3 No
- ii. Decreased precipitation 1449 1 Yes 3 No
- iii. Seasonal change in precipitation 1450 1 Yes 3 No

Section 6 - Waste (Manure) Separation Facilities (continued)

5. Did you install any of the waste separation facilities on your operation (as opposed to taking them over from another operation through purchase or lease)?

1520 1 Yes - Continue

3 No - Go to Section 7 - Comprehensive Nutrient Management, page 15

a. Were the waste separation facilities you installed:

i. New (no prior facility on the same location)? 1521 1 Yes 3 No

ii. Renovation of existing facilities? 1522 1 Yes 3 No

b. Did the facilities you installed result in an overall increase in waste separation capacity? . 1523 1 Yes 3 No

c. Did you receive technical assistance or financial assistance?

	Did you receive technical assistance?	Did you receive financial assistance?	What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0.
Waste separation facility	1524 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1525 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1526

i. What portion of financial assistance to begin this practice was from federal sources? Enter 0 if no financial assistance was received. 1534 %

d. I decided to install waste separation facilities, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
They addressed a waste management or storage problem. 1535	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
The facilitate better use of nutrients or export to other farms. 1536	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
An upgrade was required to be eligible for financial assistance for other facilities. 1537	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated benefits greater than cost. 1538	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated saving time or effort. 1539	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. 1540	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. 1541	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated off-farm environmental benefits. 1542	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

e. Please specify any additional reason why you have installed waste separation facilities.

Other reason, specify: 1543 _____

Section 7 - Comprehensive Nutrient Management

A Comprehensive Nutrient Management Plan (CNMP) is a management plan to utilize nutrients and to manage the collection, handling, storage, application, and utilization of animal waste (manure).

1. Do you have a written comprehensive nutrient management plan (CNMP), developed with assistance from a government agency, private consultant, or other technical expert, to manage manure and other nutrients?

1601 Yes - Go to Item 2 No - Complete Items 1a and 1b below, then go to Section 8 - Waste Utilization, page 18

a. Please report your agreement or disagreement with the following statements regarding a written comprehensive nutrient management plan.

I chose not to develop and implement a written comprehensive nutrient management plan, at least in part, because:

	Agree	Neither Agree nor Disagree	Disagree
It would require changing crops. 1602	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would require export of waste to other farms. 1603	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated costs greater than benefits. xxxx	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. 1604	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I need more information to make a good decision about whether to use a CNMP. xxxx	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. 1605	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. 1606	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. 1607	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

b. Please specify any additional reason why you have not implemented a written comprehensive nutrient management plan.

Other reason, specify: ¹⁶⁰⁸ _____

After completing Items 1a and 1b above, Go to Section 8 - Waste Utilization, page 18.

2. Have you had to modify your CNMP? ¹⁶⁰⁹ 1 Yes 3 No

3. Is a CNMP for your operation required by regulation? ¹⁶¹⁰ 1 Yes 3 No

Section 7 - Comprehensive Nutrient Management (continued)

4. Is spreading of waste on frozen ground limited or prohibited by your CNMP? 1611 1 Yes 3 No

5. Have changes in weather affected your CNMP or how you implement it?

1612

1 Yes - Continue 3 No - Go to Item 6

a. Have any of the following changes affected your CNMP or how you implement it?

i. Increased precipitation 1613 1 Yes 3 No

ii. Decreased precipitation 1614 1 Yes 3 No

iii. Seasonal change in precipitation 1615 1 Yes 3 No

6. Did you manage in accordance with your comprehensive nutrient management plan in 2021? 1645 1 Yes 3 No

7. What year did you first manage in accordance with your comprehensive nutrient management plan? year 1616

a. Did you receive technical assistance or financial assistance?

	Did you receive technical assistance?	Did you receive financial assistance?	What percentage of the cost was covered by financial assistance?
Developing or writing a Comprehensive Nutrient Management Plan (CNMP)	1617 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1618 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1619 %
Implementing CNMP	1620 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1621 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1622 %

i. What portion of financial assistance to begin this practice was from federal sources? (Enter 0 if no financial assistance was received.) 1623 %

Section 7 - Comprehensive Nutrient Management (continued)

b. I chose to develop and implement a written CNMP, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
It was required to be eligible for financial assistance on other facilities. 1624	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It facilitates better use of livestock waste nutrients in crop production. 1625	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated benefits greater than costs. 1626	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated saving time or effort. 1627	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. 1628	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. 1629	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated off-farm environmental benefits. 1630	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

c. Please specify any additional reason why you have implemented a CNMP.

Other reason, specify: ¹⁶³¹ _____

8. Have you stopped managing in accordance with your CNMP?

xxxx ¹ Yes - Continue ³ No - Go to Section 8 - Waste Utilization, page 18

a. What year did you last manage in accordance with your CNMP? year xxxx

b. If you did not manage in accordance with your CNMP in 2021, do you plan to do so again within 3 years?

¹⁶³³ ¹ Yes - Go to Section 8 - Waste Utilization, page 18 ³ No - Continue

c. I decided to stop managing in accordance with my CNMP, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
It required changing crops. 1634	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It required export of waste to other farms. 1635	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Costs were greater than benefits. 1636	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It took too much time or effort. 1637	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Technical assistance ended. 1638	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance ended. 1639	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance did not cover enough of the cost. 1640	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

Section 8 - Waste Utilization (continued)

6. Did you install any of the waste utilization facilities on your operation (as opposed to taking them over from another operation through purchase or lease)?

1726

1 Yes - Continue

3 No - Go to Item 7, page 21

a. Did you receive technical assistance or financial assistance?

	Did you receive technical assistance?	Did you receive financial assistance?	What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0
Pipeline	1727 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1728 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1729
Pumping plant	1732 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1733 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1734
Sprinkler Irrigation	1737 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1738 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1739

i. What portion of financial assistance to begin this practice was from federal sources?
Enter 0 if no financial assistance was received.

1760	%
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b. I chose to develop and implement waste utilization facilities, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
It addressed a waste management problem. 1742	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It facilitated better use of manure nutrients. 1743	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
An upgrade was required to be eligible for financial assistance on other facilities. 1744	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated benefits greater than cost. 1745	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated saving time or effort. 1746	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. 1747	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. 1748	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated off-farm environmental benefits. 1749	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

c. Please specify any additional reason why you have installed waste utilization facilities.

Other reason, specify: ¹⁷⁵⁰ _____

Section 8 - Waste Utilization (continued)

7. Does your livestock operation produce solid waste?

xxxx 1 Yes - Continue 3 No - Go to Section 9 - Diversion of Runoff, page 22

a. What type of equipment do you use to handle solid waste? Check all that apply.

If you use a contractor to apply manure, please note the types of equipment used by the contractor(s).

xxxx Tractor equipped with manure loader

xxxx High loader

xxxx Tractor-pulled litter housekeeper

xxxx Low profile loader

xxxx Other equipment for collecting manure

xxxx Tractor-pulled manure or litter spreader

xxxx Truck-mounted manure or litter spreader

b. Do you use a contractor to apply solid manure? xxxx 1 Yes 3 No

c. How is solid manure incorporated into the soil?

xxxx 1 Manure spreading and incorporation are done in a single field operation

2 Tillage within 24 hours of manure application

3 Tillage, but not necessarily within 24 hours

d. Do you export solid manure to other farms? xxxx 1 Yes 3 No

Section 9 - Diversion of Runoff

1. What type of runoff control and diversion structures (designed to "keep the clean water clean") are currently in use on your livestock operation?

Complete the table below and follow the instructions at the end of the table.

	Are any of these diversion facilities in use on your operation?	Of facilities in use, how many were taken over from another operation?	Of facilities in use, how many were installed by you?	Number of facilities in use (Col 5 = Col 3 + Col 4)
1	2	3	4	5
Roofs and covers INCLUDE roofs or covers over waste storage facilities, lagoons, animal mortality facilities or waste separation facilities	1801 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1802	1803	1804
Roof runoff structure INCLUDE gutters, downspout pipes and drains that collect, control or transport rainfall from roofs and covers	1805 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1806	1807	1808
Diversion INCLUDE channels constructed on a slope to divert water away from agricultural waste systems	1809 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1810	1811	1812

If you answered "No" to all practices in Column 2, above, Go to Item 2, page 23.
 If you answered "Yes" for any practice in Column 2, above, Go to Item 3, page 23.

Section 9 - Diversion of Runoff (continued)

5. Did you install any of the runoff control and diversion facilities on your operation (as opposed to taking them over from another operation through purchase or lease)?

1830

1 Yes - Continue 3 No - Go to Section 10 - Stabilization or Protection of Heavily Used Areas, page 26

a. Did the runoff diversion facilities you installed:

- i. Replace existing runoff management structures? 1831 1 Yes 3 No
- ii. Expand existing runoff diversion capacity? 1832 1 Yes 3 No
- iii. Divert runoff to waste storage facilities? 1833 1 Yes 3 No
- iv. Divert runoff away from your waste storage facilities? 1834 1 Yes 3 No

b. Did you receive technical assistance or financial assistance?

	Did you receive technical assistance?	Did you receive financial assistance?	What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0
Roofs and covers	1835 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1836 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1837
Roof runoff structures	1840 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1841 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1842
Diversion	1845 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1846 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1847

i. What portion of financial assistance to begin this practice was from federal sources?
Enter 0 if no financial assistance was received.

1855	%
------	---

Section 9 - Diversion of Runoff (continued)

c. I chose to implement runoff control and diversion practices, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
I anticipated benefits greater than cost. 1857	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated saving time or effort. 1857	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
An upgrade was required to be eligible for financial assistance for other facilities. 1858	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. 1859	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. 1860	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated off-farm environmental benefits. 1861	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

d. Please specify any additional reason why you have installed runoff control and diversion structures.

Other reason, specify: ¹⁸⁶² _____

Section 10 - Stabilization or Protection of Heavily Used Areas

1. Do you have vegetative cover, surfacing, or structures to stabilize or protect areas that are frequently and intensively used by people, animals or vehicles?

1901

Yes - Complete Items 1a, 1b, and 1c below, then go to Item 3, page 27 No - Go to Item 2

a. Number taken over from another operation	1902
b. Number installed by you	1903
c. Total number in use (Item 1c = Item 1a + 1b)	XXXX

After completing Item 1a, 1b, and 1c above, Go to Item 3, page 27.

2. Please report your agreement or disagreement with the following statements about vegetative cover, surfacing or structures to stabilize or protect areas that are frequently and intensively used. Complete the table below and Item 2a, then go to Section 11 - Demographics, page 28.

I chose not to install vegetative cover, surfacing or structures to protect heavily used areas, at least in part, because:

	Agree	Neither Agree Nor Disagree	Disagree
1904 They are not needed on my operation.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1905 I anticipated costs greater than benefits.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1906 It takes too much time or effort.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1907 I tried to get but did not receive technical assistance.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1908 I applied for but did not receive financial assistance.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1909 Financial assistance would not cover enough of the cost.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
1910 Cost of meeting government standards for financial assistance is too high.	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

a. Please specify any additional reason why you have not installed vegetative cover, surfacing or structures to protect heavy use areas.

1911

Other reason, specify: _____

After completing Item 2 and 2a above, Go to Section 11 - Demographics, page 28.

Section 10 - Stabilization or Protection of Heavily Used Areas (continued)

3. Are the heavy use protection areas on your operation required by regulation?

INCLUDE regulation from Federal, State, or local governments

1912

1 Yes 3 No

4. For areas of heavy use that were stabilized on your operation, did your operation do the stabilization for at least some of these areas?

1913

1 Yes - Continue 3 No - Go to Section 11 - Demographics, page 28

a. Did you receive technical assistance or financial assistance?

		What percentage of your costs were covered by financial assistance? If you did not receive financial assistance, enter 0
Technical assistance	1914 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	
Financial assistance	1915 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1916

i. What portion of financial assistance to begin this practice was from federal sources?
Enter 0 if no financial assistance was received.

1919	%
------	---

b. I chose to install vegetative cover, surfacing or structures to protect heavily used areas, at least in part, because:

	Agree	Neither Agree nor Disagree	Disagree
They reduce animal health problems. 1820	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
They reduce repetitive maintenance activities. 1921	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
They make waste collection easier. 1922	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
An upgrade was required to be eligible for financial assistance for other facilities. 1923	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated benefits greater than costs. 1924	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated saving time or effort. 1925	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received technical assistance. 1926	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I received financial assistance. 1927	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated off-farm environmental benefits. 1928	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

c. Please specify any additional reason why you decided to stabilize heavy use areas.

Other reason, specify: ¹⁹²⁹ _____

Section 11 - Demographics

1. Please answer the following for the operator:

a. What is the operator's sex?

910

1 Male

2 Female

b. What was the operator's age on January 1, 2021?

911

912

c. Is the operator of Hispanic, Latino or Spanish origin?

1 Yes

3 No

d. What is the operator's race? Check all that apply.

913

White

914

Black or African American

915

American Indian or Alaska Native

916

Asian

917

Native Hawaiian or Other Pacific Islander

e. Has the operator ever served on active duty in the U.S. Armed Forces, Reserves or National Guard?

918

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

2. How many years have you been continuously managing a forest, farm or ranch operation? years

919

3. At which occupation did the operator spend the majority (50 percent or more) of his/her time in 2021?

920

1 Forestry, farm or ranch work

2 Work other than forestry, farming or ranching

1212

4. Is the operator retired from forestry, farming or ranching?

1 Yes

3 No

Section 11 - Demographics (continued)

5. What is the highest level of formal education the operator has achieved?

922

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

6. In 2021, what was this operation's legal status for tax purposes? Check one answer only.

923

1	<input type="checkbox"/> Family or individual operation - EXCLUDE partnerships and corporations		
2	<input type="checkbox"/> Partnership operation - INCLUDE family partnerships - If option 2 is selected: Is this partnership registered under state law?	924	1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
3	<input type="checkbox"/> Incorporated under state law - If option 3 is selected: Is this a family held corporation? Are there more than 10 stockholders?	925 926	1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No
4	<input type="checkbox"/> Other - If option 4 is selected: Estate or trust Grazing association, government facility or American Indian reservation Other, specify 929 type: _____	927 928 930	1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No

Section 12 - Value of Sales

Farm Producer Value Codes

Dollar Range	Code	Dollar Range	Code	Dollar Range	Code
0 - \$999	1	\$30,000 - \$39,999	8	\$180,000 - \$249,999	15
\$1,000 - \$2,499	2	\$40,000 - \$49,999	9	\$250,000 - \$499,999	16
\$2,500 - \$4,999	3	\$50,000 - \$59,999	10	\$500,000 - \$999,999	17
\$5,000 - \$9,999	4	\$60,000 - \$69,999	11	\$1,000,000 - \$4,999,999	18
\$10,000 - \$14,999	5	\$70,000 - \$79,999	12	\$5,000,000 and over	19
\$15,000 - \$19,999	6	\$80,000 - \$99,999	13		
\$20,000 - \$29,999	7	\$100,000 - \$179,999	14		

	2020	2021
1. Which value code represents this operation in terms of the gross value of sales and government agricultural payments?	xxxx	xxxx

INCLUDE

- Sales of all the crops, livestock, poultry, and livestock products (milk, eggs, etc.)
- The value of hay, silage, and other crops harvested, but not sold
- The value of all crops, livestock and poultry produced under contract
- Landlord's share of government payments and crops sold

EXCLUDE

- Dollars received on land rented to others

	2020	2021
2. Which value code represents the net operating income for this operation? (Cash income from all farm sourced sources minus production costs and depreciation; if negative, please indicate with a negative sign before the value code.)	xxxx	xxxx

	2020	2021
3. Which value code represents your total off-farm income? (wages, salaries, tips, interest, dividends, other public sources, etc., before taxes, income from operating another farm, income from operating any other business; if negative, please indicate with a negative sign before the value code.)	xxxx	xxxx

	2020	2021
4. How many people lived in your household?	xxxx	xxxx

Section 12 - Value of Sales (continued)

5. Of the farm or ranch income reported, which of these categories represents the largest portion of the gross income from the operation?

Code

- 1 – Grains, Oilseeds, Dry Beans, and Dry Peas 1
 (corn, flaxseed, grain silage and forage, grains and oilseeds, popcorn, rice, small grains, sorghum, soybeans, sunflowers, straw, etc.)
- 2 – Tobacco 2
- 3 – Cotton and Cottonseed 3
- 4 – Vegetables, Melons, Potatoes and Sweet Potatoes 4
 (beets, cabbage, cantaloupes, pumpkins, sweet corn, tomatoes, watermelons, vegetable seeds, etc.)
- 5 – Fruit, Tree Nuts and Berries 5
 (almonds, apples, blueberries, cherries, grapes, hazelnuts, kiwifruit, oranges, pears, pecans, strawberries, walnuts, etc.)
- 6 – Nursery, Greenhouse, Floriculture and Sod 6
 (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 7
- 8 – Other Crops and Hay, CRP and Pasture 8
 (grass seed, hay and grass silage, hops, maple syrup, mint, peanuts, sugarcane, sugarbeets, CRP, etc.)
- 9 – Hogs and Pigs 9
- 10 – Milk and Other Dairy Products from Cows 10
- 11 – Cattle and Calves 11
 (beef and dairy cattle for breeding stock, fed cattle, beef and dairy cull animals, stockers and feeders, veal calves, etc.)
- 12 – Sheep, Goats, and their Products 12
 (wool, mohair, milk and cheese)
- 13 – Horses, Ponies, and Mules 13
 (burros and donkeys)
- 14 – Poultry and Eggs 14
 (broilers, chickens, turkeys, ducks, eggs, emus, geese, hatchlings, ostriches, pigeons, pheasants, quail, poultry products, etc.)
- 15 – Aquaculture 15
 (catfish, trout, ornamental and other fish, mollusks, crustaceans, etc.)
- 16 – Other Animals and Other Animal Products 16
 (honey bees, honey, rabbits, fur-bearing animals, semen, manure, other animal specialties, etc.)

Farm Type Code

862

Section 13 - Conclusion

1. Has this operation (name on label) been sold, or turned over to someone else?

1086 Yes - Identify the new operator(s) below 3 No - Go to Item 2

1088	Operation Name: _____						
1089	Operator Name: _____						
1090	Address: _____						
1091	City: _____	1092	State: _____	1094	Zip: _____	1007	County: _____
1095	Phone: (_____) _____	9955	<input type="checkbox"/> Check if cell phone				

a. Did this person operate land individually on June 1, 2021? 1010 Yes No

2. Comments related to the information you reported: 1511

Contact Information:

Operation Email: 9937 _____	Operation Phone: 9936 _____ (_____) - _____	check if cell phone <input type="checkbox"/>
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Respondent Name: 9912 _____	Respondent Phone (if different from above) 9911 _____ (_____) - _____	check if cell phone <input type="checkbox"/>	9910 MM DD YY	Date: ____ - ____ - ____
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This completes the survey. Thank you for your help.

OFFICE USE ONLY

Response	9901	Respondent	9902	Mode	9903	Enum.	Eval.	R. Unit	Change	9985	Office Use for POID			
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est		1-Op/Mgr 2-Spouse 3-Acct/Bkpr 4-Partner 9-Other		1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other		9998	9900	9921	9985		____ - ____ - ____ - ____			
											Optional Use			
											9907	9908	9906	9916
S/E Name														