

FSA-2038
 (06-27-23)

U.S. DEPARTMENT OF AGRICULTURE
 Farm Service Agency

Position 3

FARM BUSINESS PLAN WORKSHEET
 Projected/Actual Income and Expense

1. NAME	2. For Production Cycle Beginning: _____ 20 ____ Thru: _____ 20 ____	<input type="checkbox"/> Projected <input type="checkbox"/> Actual
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A - INCOME

1. Crop Production and Sales:

1A. Description	Production				1F. Farm Use	Purchases			Sales		
	1B. Acres	1C. Yield	1D. % Share	1E. # Units		1G. # Units	1H. \$/Unit	1I. Total \$	1J. # Units	1K. \$/Unit	1L. Total \$
1M. Total Crop Production and Sales:											

2. Livestock and Poultry Production and Sales:

2A. Description	2B. Purch/Raised		2C. # Units	Purchases			2G. Death Loss	Sales			
	P	R		2D. Weight	2E. \$/Unit	2F. Total \$		2H. # Units	2I. Weight	2J. \$/Unit	2K. Total \$
	<input type="checkbox"/>	<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>									
2L. Total Livestock and Poultry Production and Sales:											

3. Dairy Livestock Production and Sales:

3A. Description	3B. Purch/Raised		3C. # Head	Purchases			3G. Death Loss	Sales			
	P	R		3D. Weight	3E. \$/Unit	3F. Total \$		3H. # Units	3I. Weight	3J. \$/Unit	3K. Total \$
	<input type="checkbox"/>	<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>									
	<input type="checkbox"/>	<input type="checkbox"/>									
3L. Total Dairy Livestock Production and Sales:											

4. Milk Sales:

4A. Description	4B. # Head	4C. Production/Head/Year	4D. Total Production	4E. Price	4F. Sales \$

5. Livestock Product Sales:

5A. Description	5B. Production	5C. Measure	Sales		
			5D. Units	5E. \$/Unit	5F. Total \$
5G. Total Livestock Product Sales:					

A - INCOME (Continued)

6. Ag Program Payments	\$ Amount	8. Custom Hire Income	\$ Amount
7. Crop Insurance Proceeds	\$ Amount	9. Other Income	\$ Amount
10. Total Income (Items 1 through 9):			

B – EXPENSES

11. Car and Truck	\$ Amount	23. Rent – Land/Animals	\$ Amount
12. Chemicals		24. Repairs and Maintenance	
13. Conservation		25. Seeds and Plants	
14. Custom Hire		26. Supplies	
15. Feed Supplement		27. Taxes – Real Estate	
16. Feed, Grain and Roughage		28. Utilities	
17. Fertilizers and Lime		29. Veterinary/Breeding/Medicine	
18. Freight and Trucking		30. Other Expenses	
19. Gas/Fuel/Oil		31. Other - Irrigation	
20. Insurance			
21. Labor Hired			
22. Rent – Machinery/Equipment/Vehicles		32. Interest	
33. Total Expenses (Items 11 through 32):			

C – NON-OPERATING

34. Owner Withdrawal (Total Family Living Expenses and Non-Farm Debt Payments)		36. Non-Farm Income	
35. Income Taxes		37. Non-Farm Expense	
38. Total Non-Operating:			

D - CAPITAL

39. Capital Sales		41. Capital Expenditures	
40. Capital Contributions		42. Capital Withdrawals	
43. Total Capital:			
44. GRAND TOTAL INCOME (Items A - B + C + D):			

E – WARNING (Certification)

I certify that the information provided is true, complete, and correct to the best of my knowledge and is provided in good faith. (Warning: Section 1001 of Title 18, United States Code, provides for criminal penalties to those who provide false statements. If any information is found to be false or incomplete, such finding may be grounds for denial of the requested action.)

45A. SIGNATURE	45B. DATE (MM/DD/YYYY)

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