OMB CONTROL NO.				TITLE OF I	TITLE OF INFORMATION COLLECTION REQUEST								DATE PREPARED		
0503-New													February 1, 2022		
TYPE OF REQUEST					Agency Information Collection Activities; Outreach and Assistance to Socially Disadvantaged Farmers and								PUBLIC COMMENT DOCKET NO.		
	Ν	ew IC	R	Ran	Ranchers Program (2501 Program) Application and Performance Reporting								USDA FR Doc. 0001-3037		
POIN	IT OF (CONT	ACT										FEDERAL REGISTER NOTICE		
	Kim	Okal	nara										FR Doc. 2024-11906		
TELE	PHON	IE NO											FEDERAL REGISTER DATE		
	240	-810-2	2396										May 30, 2024		
							F	PART I - SUMMAR	Y						
	TOTAL	RESPO	NDENTS	S TOTAL AN	TOTAL ANNUAL RESPONSES % ELECTRONIC			RESPONSES PER RESPONDENT		TOTAL BURDEN HOURS		HOURS PER RESPONSE % S		ALL ENTITIES	
	5,470				15,770 100%			3		34,800		2.207		90%	
						F	PART	II - LIST OF ACTIV	/ITIES				•		
TYPE OF CHANGE	TYPE OF RESPONDENT	FIRST OCCURENCE	TYPE OF RESPONSE	AUTHORITY (U.S.C., CFR, or Manual)	.S.C., CFR, or (title, respondent type, and type of change if discretions)		onary)	FORM NO.	FORMAT		ESTIMATED ANNUAL NUMBER OF RESPONDENTS or RECORDKEEPERS	ESTIMATED TOTAL ANNUAL RESPONSES	ESTIMATED HOURS PER RESPONSE or ANNUAL HOURS PEF RECORDKEEPER	ESTIMATED TOTAL ANNUAL BURDEN	
(A)	(B)	(C)	(D)	(E)		(F)		(G)		(H)	(I)	(J)	(К)	(L)	
	\$1, P\$		I		A: Application (Institutions for Higher Education, State and Tribal Entities, and Non-profit Organizations)						120	120	160.000	19,200	
	\$1, P	3	I		B: Mid-year Report (Institutions for Higher Education, State and Tribal Entities, and Non-profit Organizations)						150	300	2.000	600	
	\$1, P	3	I		B: Annual Report (Institutions for Higher Education, State and Tribal Entities, and Non-profit Organizations)						150	300	20.000	6,000	
	\$1, P	3	I			(Institutions for Higher and Tribal Entities, a nizations)					50	50	30.000	1,500	
	I	x	I		C: Paticipant Re participants/gen	esponse form (prograr eral public)	n				5,000	15,000	0.500	7,500	

TYPE OF CHANGE	TYPE OF RESPONDENT	FIRST OCCURENCE	TYPE OF RESPONSE	AUTHORITY (U.S.C., CFR, or Manual)	ACTIVITY DESCRIPTION (title, respondent type, and type of change if discretionary)	FORM NO.		ESTIMATED ANNUAL NUMBER OF RESPONDENTS or RECORDKEEPERS	TOTAL ANNUAL	ESTIMATED HOURS PER RESPONSE or ANNUAL HOURS PER RECORDKEEPER	ESTIMATED TOTAL ANNUAL BURDEN HOURS
(A)	(B)	(C)	(D)	(E)	(F)	(G)	(H)	(I)	(J)	(К)	(L)