## **GRAIN STOCKS REPORT PROFILE 202x**

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United States Department of Agriculture



## USDA/NASS - Nebraska

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Please make corrections to name, address and ZIP Code, if necessary.

The information you provide will be used for statistical purposes only. Your response 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.

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1. Please review the attached sheet. Verify that the list of facilities is correct and complete.
Does the attached sheet reflect your firm?
<sup>0001</sup> <sub>1</sub> Yes <sub>3</sub> No
(Interviewer: If No, make appropriate deletions, additions, and/or capacity changes. Re-verify the list and continue.)
(Interviewer: For firms with one facility, go to item 1b, firms with more than one facility, continue below.)
a. Considering all the facilities listed, how would this firm prefer to report? (select one)
0002 <sub>1</sub> Headquarters reports all facilities separately.
2 Headquarters reports combined total for all facilities.
i. Does this firm store any commodities in <b>other states</b> ?
ii. If Yes, can you report totals by state?
3 Each facility reports individually.
Some other combination.  Please list which facilities this firm would like combined for reporting purposes

b. Does this firm lease additional storage capacity from another firm not listed?
<sup>0005</sup> <sub>1</sub> Yes - ( <b>Interviewer:</b> If Yes, document facilities and capacities on listing.)
3 No - Go to item 1d
c. Will this firm exclude commodities in storage leased from another licensed grain elevator?
<sup>0006</sup> <sub>1</sub> Yes, firms should exclude grain stored at another firm.
₃  No, please explain:
0007
d. Does this firm lease storage capacity to another firm not listed?
<sup>0008</sup> <sub>1</sub> Yes - (Interviewer: If Yes, document facilities and capacities on listing.)
3 No - Go to item 2
e. Will this firm report commodities in storage leased to another licensed grain elevator?
$^{0009}$ <sub>1</sub> $\square$ Yes, firms should include grain stored in their facilities regardless of ownership.
₃  No, please explain:
0010

2. What is the total rated storage capacity of all facilities that will be reported by your firm?

## **INCLUDE**

- capacity of all facilities if this is a Headquarters unit
- storage capacity of all structures normally used by elevators, warehouses, terminals, merchant mills,
   other storage (e.g. ground piles), and oilseed crushers to store whole grains, oilseeds, or pulse crops
- both bulk and sacked capacity in the rated storage capacity

EXCLUDE storage capacity leased from another licensed grain elevator

TOTAL RATED STORAGE CAPACITY		UN	IT (circle	one)	
0011	0012	1 Bu.	2 Lbs.	3 Tons	4 Cwt.

and the Government Commodity	Cred	dit Corp	oration				
<ul> <li>grain to be used for seed</li> </ul>							
both domestic and imported stoo	ks						
EXCLUDE grain owned that is stored	d at a	nother I	icensed	d grain elevator			
Commodities		YES	NO	Commodities		YES	NO
Barley	0017	1	3	Rapeseed	0027	1	3
Canola	0018	1	3	Rye	0028	1	3
Chickpeas (Large)	0019	1	3	Safflower	0029	1	3
Chickpeas (Small)	0020	1	3	Sorghum for Grain	0030	1	3
Corn (Whole)	0021	1	3	Soybeans	0031	1	3
Dry Edible Peas	0022	1	3	Sunflower (Non-oil varieties)	0032	1	3
Flaxseed	0023	1	3	Sunflower (Oil varieties)	0033	1	3
Lentils	0024	1	3	Wheat (Durum)	0034	1	3
Mustard Seed	0025	1	3	Wheat (Other than Durum)	0035	1	3
Oats	0026	1	3				

a. Does this firm have any "temporary" or "emergency" storage capacity?

No

b. What is the "temporary" or "emergency" storage capacity?

TEMPORARY or EMERGENCY STORAGE CAPACITY

No - Go to item 3

c. Was the "temporary" or "emergency" storage capacity included in the total rated storage

3. Including all facilities, does this firm expect to store any of the following commodities during the

0015

all whole grains, pulse crops and oilseeds stored in your facilities and/or piles (temporarily stored)

regardless of ownership for farmers, elevators, millers, processors, farmer owned reserve, under loan,

1 Bu.

UNIT (circle one)

2 Lbs.

3 Tons

4 Cwt.

Yes - Continue

0014

<sup>0016</sup> <sub>1</sub> Yes

next 12 months?

INCLUDE:

capacity in item 2?

Next, we would like to discuss some reporting guidelines for the quarterly Grain Stocks Report:

Each quarter (March, June, September, and December), your firm will be asked to report stocks on the 1st of the month, or as accurate as possible relative to the 1st of the month.

Each quarter we will mail this firm a quarterly Grain Stocks Report to complete. We will also include a copy of the reporting instructions for reference. This firm may also fill this report out on the Internet. Instructions will be made available as to how to access the report. If you have reporting preferences, please indicate below.

4. W	hich method would this firm prefer to rep	ort? Select one.							
0036	1 Mail								
	<sub>2</sub> Telephone								
	3 Web (via agcounts.usda.gov)								
	4 Fax								
	<sub>5</sub> Email (spreadsheet, PDF, etc.)								
5. W	ho will be the <b>primary contact</b> at this fire	m for completing	the q	uarterly Grai	n Stocks	Report	t?		
8705	Name:		8706	Position:					
8707	Telephone: ( )	Check if cell phone	8708	Fax: (	)				
8709	Email:								
6. W	ho will be the <b>alternate contact</b> at this fi	rm for completing	the	quarterly Gra	ain Stock	s Repo	rt?		
8715	Name:		8716	Position:					
8717	Telephone: ( )	Check if cell phone	8718	Fax: (	)				
8719	Email:								
questio	you so much for your assistance today and for yons, feel free to contact our office using our toll frey contact and take some time to review the report	e number. [If you did	l not in						<b>.</b>
Respon	dent Name:	Respondent Phone							
9912		9911			check if cell phone	9910 Date:	MM 	DD — —	YY

This completes the survey. Thank you for your help.

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Response	)	Respond	lent	Mode		Enum. Eval.	Enum.	Change	Office Use for POID				
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est	9901	1-Op/Mgr 2-Spouse 3-Acct/Bkpr 4-Partner 9-Other 9902 1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax	9998	9900	9985	9989 Optional Use							
7-Off Hold – Est				19-Other					9921	9907	9908	9906	9916