

# NATIONAL AGRICULTURAL CLASSIFICATION SURVEY

OMB No. 0535-0140  
 Approval Expires: 5/31/2025  
 Project Code: 649  
 Survey ID: 4042 Form: NACS-24



**USDA/NASS**  
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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 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 0535-0140. The time required to complete this information collection is estimated to average 15 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.

If you are a landlord, do not report agricultural activity for your tenant(s).

1. In the past 12 months:

- |  |     |                                |                               |
|--|-----|--------------------------------|-------------------------------|
| a. Did you raise or produce any livestock or poultry (including aquaculture, bees, equine, goats, sheep, hogs, cattle, animal products, etc.)?.....                          | 003 | 1 <input type="checkbox"/> Yes | 3 <input type="checkbox"/> No |
| b. Did you plant, grow, or cultivate any crops or greenhouse/nursery items or cut hay? (Exclude land rented or leased to others. Exclude personal or home use gardens.)..... | 198 | 1 <input type="checkbox"/> Yes | 3 <input type="checkbox"/> No |
| c. Excluding land you rented or leased to others, did you have any land with potential for agricultural activity such as idle cropland or pasture?.....                      | 199 | 1 <input type="checkbox"/> Yes | 3 <input type="checkbox"/> No |
| d. Did you receive any Federal, State, or local agricultural payments? (Include Federal Farm Program, CRP, WRP, FWP, and CREP payments.).....                                | 004 | 1 <input type="checkbox"/> Yes | 3 <input type="checkbox"/> No |

2. Did you answer Yes to any of the questions above (Items 1a - 1d)?

- Yes - Continue                       No - Go to Conclusion on back page

To avoid further contacts, please complete and return this form by mail or via the internet at [www.agcounts.usda.gov](http://www.agcounts.usda.gov) by **January 28, 2025**.

### Acres Operated and Land Usage

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

3. How many acres are:

		Acres
a. Owned?.....	+	111 <input style="width: 100px; height: 20px;" type="text"/>
b. Rented or leased <b>from</b> others, or used rent free? (Exclude land used on an animal unit month (AUM) basis.).....	+	112 <input style="width: 100px; height: 20px;" type="text"/>
c. Rented or leased <b>to</b> others?.....	-	113 <input style="width: 100px; height: 20px;" type="text"/>
4. <b>Total acres operated</b> (excludes land rented or leased to others): [Items 3a + 3b – 3c]?.....	=	900 <input style="width: 100px; height: 20px; border: 2px solid black;" type="text"/>

5. Of the total acres operated [Item 4], how many were used for the following purposes in the last 12 months? (Exclude land operated by tenant(s).)

a. Permanent pasture, woodland pasture, or rangeland?.....	220	<input style="width: 100px; height: 20px;" type="text"/>
b. Conservation Reserve Program (CRP), Wetlands Reserve Program (WRP), Farmable Wetlands Program (FWP), or Conservation Reserve Enhancement Program (CREP)?.....	200	<input style="width: 100px; height: 20px;" type="text"/>
c. Cropland? (Include planted cropland, land in hay, summer fallow, idle cropland, cropland used for pasture, and cropland in government programs.).....	300	<input style="width: 100px; height: 20px;" type="text"/>

6. Of the total cropland acres [Item 5c], how many are used to produce (exclude cropland operated by tenant(s)):

a. Any hay or forage crops? (Count each acre only once, regardless of the number of cuttings or different uses.).....	345	<input style="width: 100px; height: 20px;" type="text"/>
b. Any fruit, berry, or nut crops? (Exclude home garden, personal or home use crops.).....	400	<input style="width: 100px; height: 20px;" type="text"/>
c. Any vegetable or melon crops? (Exclude potatoes, home garden, personal or home use crops.).....	689	<input style="width: 100px; height: 20px;" type="text"/>
d. All other crops or idle cropland?.....	202	<input style="width: 100px; height: 20px;" type="text"/>
e. Any nursery, greenhouse, floriculture crops, or aquatic plants?.....	939	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Grain Storage**

7. What is the total storage capacity of all structures normally used to store whole grains or oilseeds on the total acres operated? (Exclude storage operated by tenant(s).).....

Bushels
305

**Livestock, Poultry, Aquaculture and Bees**

8. During the past 12 months, what was the largest number of the following livestock on hand at any one time? (Include animals of any age, including newborns.)

- a. All cattle and calves, regardless of ownership?.....
  - i. Milk cows, including dry cows, regardless of ownership?.....
- b. All hogs and pigs owned by this operation, regardless of location?.....
- c. All sheep and lambs owned by this operation, regardless of location?.....
- d. All goats and kids, regardless of ownership?.....
- e. All horses, ponies, mules, donkeys, or burros, regardless of ownership?.....

Number
610
615
630
640
645
675

9. Chickens: Report any chickens on the total acres operated during the past 12 months, regardless of ownership.

- Number
- a. What was the total number of broilers, fryers, capons, roasters, and other chickens being raised for meat production during the past 12 months?..... 767
- b. What was the largest number of layers, pullets, and roosters for laying flock at any one time? (Exclude chickens reported in Item 9a.)..... 892
- i. If there were any layers, pullets, or roosters, what was the primary type of layer/pullet operation?
- 756    3  Table Egg
- 2  Broiler Type Hatchery
- 1  Egg Type Hatchery
- 4  Pullets for Laying Flock

Number

10. Turkeys: During the past 12 months, how many total turkeys were raised on the total acres operated, regardless of ownership?..... 770

11. Aquaculture: During the past 12 months, did you or anyone else have any aquaculture on this operation? (Exclude aquatic plants reported in Item 6e.)..... 679    1  Yes    3  No

Number

12. Bees: During the past 12 months, what was the largest number of colonies of bees owned by this operation regardless of location?..... 839

**Production Contracts**

13. Did this operation have a contract to raise or custom feed any livestock or poultry that it **did not own**, with the contractor providing at least some inputs (such as feed) within the past 12 months?

- 1301    1  Yes - Continue                    3  No - Go to Item 16

14. What livestock or poultry was raised under a production contract?

Specify: \_\_\_\_\_

Number

15. What quantity was removed from the operation under this contract in the past 12 months?..... 1313



20. Answer the following for up to four individuals who were involved in the decisions for this operation as of December 31, 2024.

	Person 1	Person 2		
a. Full Name	1836	1852		
b. Sex	1926    1 <input type="checkbox"/> Male   2 <input type="checkbox"/> Female	1586    1 <input type="checkbox"/> Male   2 <input type="checkbox"/> Female		
c. Age on 12/31/24	1925 years	1585 years		
d. Year this person began operating any part of this operation	1930 YYYY	1584 YYYY		
e. Race and/or Ethnicity <b>Select all that apply</b>	<p>2703 <input type="checkbox"/> American Indian or Alaska Native – Provide details below</p> <p>Enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.</p> <p>XXXX <input type="text"/></p> <p>2705 <input type="checkbox"/> Asian – Provide details below</p> <p>XXXX <input type="checkbox"/> Chinese XXXX <input type="checkbox"/> Asian Indian XXXX <input type="checkbox"/> Filipino XXXX <input type="checkbox"/> Vietnamese XXXX <input type="checkbox"/> Korean XXXX <input type="checkbox"/> Japanese</p> <p>Enter, for example, Pakistani, Hmong, Afghan, etc.</p> <p>XXXX <input type="text"/></p> <p>2702 <input type="checkbox"/> Black or African American – Provide details below</p> <p>XXXX <input type="checkbox"/> African American XXXX <input type="checkbox"/> Jamaican XXXX <input type="checkbox"/> Haitian XXXX <input type="checkbox"/> Nigerian XXXX <input type="checkbox"/> Ethiopian XXXX <input type="checkbox"/> Somali</p> <p>Enter, for example, Trinidadian and Tobagonian, Ghanaian, Congolese, etc.</p> <p>XXXX <input type="text"/></p> <p>XXXX <input type="checkbox"/> Hispanic or Latino – Provide details below</p> <p>XXXX <input type="checkbox"/> Mexican XXXX <input type="checkbox"/> Puerto Rican XXXX <input type="checkbox"/> Salvadoran XXXX <input type="checkbox"/> Dominican XXXX <input type="checkbox"/> Cuban XXXX <input type="checkbox"/> Guatemalan</p> <p>Enter, for example, Colombian, Honduran, Spaniard, etc.</p> <p>XXXX <input type="text"/></p>	<p>XXXX <input type="checkbox"/> Middle Eastern or Northern African – Provide details below</p> <p>XXXX <input type="checkbox"/> Lebanese XXXX <input type="checkbox"/> Iranian XXXX <input type="checkbox"/> Egyptian XXXX <input type="checkbox"/> Syrian XXXX <input type="checkbox"/> Iraqi XXXX <input type="checkbox"/> Israeli</p> <p>Enter, for example, Moroccan, Yemeni, Kurdish, etc.</p> <p>XXXX <input type="text"/></p> <p>2704 <input type="checkbox"/> Native Hawaiian or Pacific Islander – Provide details below</p> <p>XXXX <input type="checkbox"/> Native Hawaiian XXXX <input type="checkbox"/> Samoan XXXX <input type="checkbox"/> Chamorro XXXX <input type="checkbox"/> Tongan XXXX <input type="checkbox"/> Fijian XXXX <input type="checkbox"/> Marshallese</p> <p>Enter, for example, Chuukese, Palauan, Tahitian, etc.</p> <p>XXXX <input type="text"/></p> <p>2701 <input type="checkbox"/> White – Provide details below</p> <p>XXXX <input type="checkbox"/> English XXXX <input type="checkbox"/> German XXXX <input type="checkbox"/> Irish XXXX <input type="checkbox"/> Italian XXXX <input type="checkbox"/> Polish XXXX <input type="checkbox"/> Scottish</p> <p>Enter, for example, French, Swedish, Norwegian, etc.</p> <p>XXXX <input type="text"/></p>	<p>1803 <input type="checkbox"/> American Indian or Alaska Native – Provide details below</p> <p>Enter, for example, Navajo Nation, Blackfeet Tribe of the Blackfeet Indian Reservation of Montana, Native Village of Barrow Inupiat Traditional Government, Nome Eskimo Community, Aztec, Maya, etc.</p> <p>XXXX <input type="text"/></p> <p>1805 <input type="checkbox"/> Asian – Provide details below</p> <p>XXXX <input type="checkbox"/> Chinese XXXX <input type="checkbox"/> Asian Indian XXXX <input type="checkbox"/> Filipino XXXX <input type="checkbox"/> Vietnamese XXXX <input type="checkbox"/> Korean XXXX <input type="checkbox"/> Japanese</p> <p>Enter, for example, Pakistani, Hmong, Afghan, etc.</p> <p>XXXX <input type="text"/></p> <p>1802 <input type="checkbox"/> Black or African American – Provide details below</p> <p>XXXX <input type="checkbox"/> African American XXXX <input type="checkbox"/> Jamaican XXXX <input type="checkbox"/> Haitian XXXX <input type="checkbox"/> Nigerian XXXX <input type="checkbox"/> Ethiopian XXXX <input type="checkbox"/> Somali</p> <p>Enter, for example, 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Islander – Provide details below</p> <p>XXXX <input type="checkbox"/> Native Hawaiian XXXX <input type="checkbox"/> Samoan XXXX <input type="checkbox"/> Chamorro XXXX <input type="checkbox"/> Tongan XXXX <input type="checkbox"/> Fijian XXXX <input type="checkbox"/> Marshallese</p> <p>Enter, for example, Chuukese, Palauan, Tahitian, etc.</p> <p>XXXX <input type="text"/></p> <p>1801 <input type="checkbox"/> White – Provide details below</p> <p>XXXX <input type="checkbox"/> English XXXX <input type="checkbox"/> German XXXX <input type="checkbox"/> Irish XXXX <input type="checkbox"/> Italian XXXX <input type="checkbox"/> Scottish</p> <p>Enter, for example, French, Swedish, Norwegian, etc.</p> <p>XXXX <input type="text"/></p>



**Conclusion**

21. Has the operator named on the label sold, rented, or turned over this operation to someone else?

<sup>1086</sup> <sub>1</sub>  Yes, sold/turned over - Continue      <sub>2</sub>  Yes, rented/leased - Continue      <sub>3</sub>  No - Go to Item 22

New Operation Name \_\_\_\_\_ New Operator Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ check if cell phone

22. It is important that we do not have duplication on our list of farms and ranches. Is it possible the information on this form would be reported by another operation or under another name?

<sup>1080</sup> <sub>1</sub>  Yes - Please provide information for the other operation or name      <sub>3</sub>  No

Operation Name \_\_\_\_\_ Operator Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ check if cell phone

Respondent Name:

Respondent Phone:

Date:

9912	9911 (____) _____ check if cell phone <input type="checkbox"/>	9910    MM    DD    YY ___    ___    ___
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Operator Email:

Operator Phone (if different from above):

9929	9918 (____) _____ check if cell phone <input type="checkbox"/>
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Operation Email (if different from above):

Operation Phone (if different from above):

9937	9936 (____) _____ check if cell phone <input type="checkbox"/>
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Please return this form in the postage-paid envelope provided. Thank you for your cooperation.