

# CONSERVATION PRACTICE ADOPTION MOTIVATIONS SURVEY - VERSION 2

## CONFINED LIVESTOCK PRACTICES

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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
2600

- 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
2601
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 .....		110
INCLUDE fed cattle, beef and dairy cull animals, stockers and feeders, veal calves, etc.		
d. All hogs and pigs .....		111
e. All Poultry .....		112
INCLUDE layers and pullets, including table and hatching, turkeys, broilers, other chickens, ducks, etc.		
f. All other livestock, please specify	2602	2603
INCLUDE goats, sheep, etc.		

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?

2604

1  Yes

3  No

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**Section 2 - General Conservation**


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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. .... 2605	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. .... 2606	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I experiment with new conservation practices on my farm. .... 2607	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. .... 2608	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. .... 2609	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. .... 2610	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. .... 2611	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.

2612

- Improving water quality (e.g., avoid polluting streams, rivers, and lakes)

2613

- Enhancing soil health or soil quality

2614

- Reducing erosion

2615

- Ensuring compliance with regulations

2616

- Reducing the cost of manure handling and management

2617

- Facilitating (a) better use of nutrients on my farm or (b) export to other farms

2618

- Improving animal health

2619

- Reducing the need for repetitive maintenance

2620

- Managing dust, odors, or other air quality issues

2621

- Other, please specify: 2622

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**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	1303	1304	1302
Impoundments, compacted soil lining .....	1305 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1307	1308	1306
Impoundments, concrete lining .....	1309 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1311	1312	1310
Impoundments, geomembrane or geosynthetic clay lining .....	1313 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1315	1316	1314
Tank, steel lined .....	1317 1 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1319	1320	1318

**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: <sup>1328</sup> \_\_\_\_\_

**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	1411	1412	1410

**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: <sup>1424</sup> \_\_\_\_\_

**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

Yes

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

Yes - Continue

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  
 Yes  No

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

b. Did the facilities you installed result in an overall increase in capacity? ..... 1454  
 Yes  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 <input type="checkbox"/> Yes <input type="checkbox"/> No	1466 <input type="checkbox"/> Yes <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: <sup>1479</sup> \_\_\_\_\_

**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	1503	1504	1502

**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: <sup>1516</sup> \_\_\_\_\_

**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  Yes - Continue

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  Yes  No

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

b. Did the facilities you installed result in an overall increase in waste separation capacity? . 1523  Yes  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 <input type="checkbox"/> Yes <input type="checkbox"/> No	1525 <input type="checkbox"/> Yes <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	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
They facilitate better use of nutrients or export to other farms. .... 1536	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
An upgrade was required to be eligible for financial assistance for other facilities. .... 1537	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I anticipated benefits greater than cost. .... 1538	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I anticipated saving time or effort. .... 1539	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I received technical assistance. .... 1540	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I received financial assistance. .... 1541	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I anticipated off-farm environmental benefits. .... 1542	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Other reason, specify: <sup>1543</sup> \_\_\_\_\_

**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. .... 2628	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. .... 2629	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: <sup>1608</sup> \_\_\_\_\_

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

2. Have you had to modify your CNMP? ..... <sup>1609</sup> 1  Yes 3  No

3. Is a CNMP for your operation required by regulation? ..... <sup>1610</sup> 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: <sup>1631</sup> \_\_\_\_\_

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

<sup>2630</sup>

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

1632
------

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

<sup>1633</sup>

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**

1. Does your livestock operation produce liquid waste?

2631  Yes - Continue  No - Go to Item 6, page 20

a. What type of equipment do you use for in-field application of liquid manure? Check all that apply. If you use a contractor to apply manure, please note the types of equipment used by the contractor.

- 2632  Tractor-pulled spreader with tank (places manure on surface)
- 2633  Tractor-pulled injector with tank (places manure under the surface)
- 2634  Tractor-pulled injector with hose (places manure under the surface)
- 2635  Truck-mounted spreader with tank (places manure on surface)
- 2636  Irrigation equipment

b. Do you use a contractor to apply liquid manure? ..... 2637  
1  Yes    3  No

c. How is liquid manure incorporated into the soil?

- 2638 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 liquid manure to other farms? ..... 2639  
1  Yes    3  No

2. Do you use pipelines, pumping plants, or irrigation equipment to facilitate land application of manure?

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

	Are any of these waste utilization 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
<b>Pipeline</b> A pipeline (and other parts necessary for a functioning pipeline) installed to convey liquid manure for land application.	1701 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1703	1704	1702
<b>Pumping plant</b> A pump used to apply waste to the field. INCLUDE pump(s), power unit(s), and all other parts necessary to the pumping plant that conveys liquid manure for land application	1705 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1707	1708	1706
<b>Sprinkler Irrigation</b> A distribution system that applies liquid waste through nozzles under pressure.	1709 <input type="checkbox"/> Yes 3 <input type="checkbox"/> No	1711	1712	1710

**If you answered "No" to all facility types in Column 2 above, Go to Item 3, page 19. If you answered "Yes" for any facility type in Column 2 above, Go to Item 4, page 19.**

**Section 8 - Waste Utilization (continued)**

3. Please report your agreement or disagreement with the following statements regarding waste utilization facilities. Complete the table below, then go to Item 7, page 21.

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

		Agree	Neither Agree nor Disagree	Disagree
They are not needed on my operation. ....	1713	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated costs greater than benefits. ....	1714	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. ....	1715	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. ....	1716	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. ....	1717	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. ....	1718	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Cost of meeting government standards for financial assistance is too high. ....	1719	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

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

Other reason, specify: <sup>1720</sup> \_\_\_\_\_

**After completing Item 3 and 3a above, Go to Item 7, page 21.**

4. Are the waste utilization facilities on your operation required by regulation?

INCLUDE regulation from Federal, State, or local governments

<sup>1721</sup> 1  Yes 3  No

5. Have changes in weather affected your waste utilization?

<sup>1722</sup> 1  Yes - Continue 3  No - Go to Item 6, page 20

a. Have any of the following changes affected your waste utilization?

- i. Increased precipitation ..... <sup>1723</sup> 1  Yes 3  No
- ii. Decreased precipitation ..... <sup>1724</sup> 1  Yes 3  No
- iii. Seasonal change in precipitation ..... <sup>1725</sup> 1  Yes 3  No

**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: <sup>1750</sup> \_\_\_\_\_



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**Section 9 - Diversion of Runoff**


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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	1803	1804	1802
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	1807	1808	1806
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	1811	1812	1810

**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)**

2. Please report your agreement or disagreement with the following statements regarding runoff control and diversion structures. Complete the table below, then go to Section 10 - Stabilization or Protection of Heavily Used Areas, page 26.

I chose not to install runoff control and diversion structures, at least in part, because:

	Agree	Neither Agree nor Disagree	Disagree
They are not needed on my operation. .... 1817	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated costs greater than benefits. .... 1818	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It would take too much time or effort. .... 1819	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. .... 1820	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. .... 1821	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. .... 1822	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Cost of meeting government standards for financial assistance is too high. .... 1823	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>

**After completing Item 2 above, Go to Section 10 - Stabilization or Protection of Heavily Used Areas, page 26.**

3. Are the runoff control and diversion structures on your operation required by regulation?

INCLUDE regulation from Federal, State, or local governments

1825 1  Yes                      3  No

4. Have changes in weather affected your use of runoff control and diversion structures?

This would include more than just diversions, which is only one structure listed.

1826 1  Yes - Continue                      3  No - Go to Item 5, page 24

a. Have any of the following changes affected your use of runoff control and diversion structures?

- i. Increased precipitation ..... 1827                      1  Yes      3  No
- ii. Decreased precipitation ..... 1828                      1  Yes      3  No
- iii. Seasonal change in precipitation ..... 1829                      1  Yes      3  No

**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	%
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**Section 9 - Diversion of Runoff (continued)**


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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. ....	1856	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: <sup>1862</sup> \_\_\_\_\_

**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

1  Yes - Complete Items 1a, 1b, and 1c below, then go to Item 3, page 27      3  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) .....	2651

**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	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
They are not needed on my operation. ....			
1905	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I anticipated costs greater than benefits. ....			
1906	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
It takes too much time or effort. ....			
1907	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I tried to get but did not receive technical assistance. ....			
1908	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
I applied for but did not receive financial assistance. ....			
1909	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Financial assistance would not cover enough of the cost. ....			
1910	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
Cost of meeting government standards for financial assistance is too high. ....			

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. .... 1920	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: <sup>1929</sup> \_\_\_\_\_

**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, 2022? .....

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

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

1212

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	1 <input type="checkbox"/> Yes      3 <input type="checkbox"/> No 926 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	1 <input type="checkbox"/> Yes      3 <input type="checkbox"/> No 928 1 <input type="checkbox"/> Yes      3 <input type="checkbox"/> No 930 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		

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

2020	2021
2497	2498

**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

2. Which value code represents the net operating income for this operation? .....

2020	2021
2499	2500

(Cash income from all farm sourced sources minus production costs and depreciation; if negative, please indicate with a negative sign before the value code.)

3. Which value code represents your total off-farm income? .....

2020	2021
2501	2502

(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.)

4. How many people lived in your household? .....

2020	2021
2503	2504

**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
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**Section 13 - Conclusion**

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

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

Operation Name: _____		
Operator Name: _____		
Address: _____		
City: _____	State: _____	Zip: _____
Phone: (____) _____		<input type="checkbox"/> Check if cell phone

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

1511

2. Comments related to the information you reported:

**Contact Information:**

Operation Email:	Operation Phone:	
9937	9936 ( ) - _____	check if cell phone <input type="checkbox"/>

Respondent Name:	Respondent Phone (if different from above)					
9912	9911 ( ) - _____	check if cell phone <input type="checkbox"/>	9910	MM	DD	YY
			Date: ____ - ____ - ____			

This completes the survey. Thank you for your help.

**OFFICE USE ONLY**

Response	9901	Respondent	9902	Mode	9903	Enum.	Eval.	R. Unit	Change	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	9989 ____ - ____ - ____			
Optional Use													
										9907	9908	9906	9916
S/E Name													