

COUNTY AGRICULTURAL PRODUCTION SURVEY - 2024 Row Crops

OMB No.0535-0002
 Approval Expires: 9/30/2026
 Project Code: 190
 Survey ID: 3277
 Version 18



USDA/NASS - Indiana
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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.

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 0535-0002. The time required to complete this information collection is estimated to average 20 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.

| Office Use Only | FIPS | POID | Tract | Subtr. |
|-----------------|-------|-------------------|-------|--------|
| | __ __ | __ __ __ __ __ __ | __ __ | __ __ |

1. Please verify name and mailing address of this operation.
 Make corrections (INCLUDE the correct operation name) on the label and continue.
2. Please answer the following question(s) for the total acres you (name on label) operate.
 - a. 5001 Did you grow any crops or cut hay in 2024?..... 1 Yes 3 No
 - b. 5002 Is any of the land in this operation cropland? (INCLUDE idle cropland and cropland in government programs such as CRP, etc.)..... 1 Yes 3 No
 - c. 5004 Do you have facilities for storing whole grains or oilseeds?..... 1 Yes 3 No
 - d. 5005 Do you own or raise any livestock, poultry, or bees?..... 1 Yes 3 No
 - e. 5006 In 2024, did this operation have more than 99 acres of pasture?..... 1 Yes 3 No
3. 5007 Did you answer Yes to any of the questions above?.... 1 Yes - Continue 3 No - Go to Section 3

| | |
|---------------------|---------|
| For Office Use Only | R. Unit |
| | 9921 |

4. Are the day-to-day decisions for this operation made by one individual, a hired manager, or partners? (Check one)

- One individual - Go to Section 1 on Page 3
- A hired manager - Go to Section 1 on Page 3
- Partners - Continue

| |
|--------|
| Number |
| |

5. How many partners are involved in the day-to-day decisions of this operation, including the partner named on the front page and listed below?.....

Do not include landlords and tenants as partners.

6. Please identify the other person(s) in this partnership, then go to Section 1, Page 3. (Verify partners' names and make necessary corrections if names have already been entered.)

| |
|--|
| <input type="checkbox"/> Check if verified |
| Name: _____ |
| Address: _____ |
| City: _____ State: _____ Zip: _____ |
| Phone: (____) _____ <input type="checkbox"/> Check if cell phone |
| Did this partner also operate land individually on June 1, 2024? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No |

| |
|--|
| <input type="checkbox"/> Check if verified |
| Name: _____ |
| Address: _____ |
| City: _____ State: _____ Zip: _____ |
| Phone: (____) _____ <input type="checkbox"/> Check if cell phone |
| Did this partner also operate land individually on June 1, 2024? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No |

| |
|--|
| <input type="checkbox"/> Check if verified |
| Name: _____ |
| Address: _____ |
| City: _____ State: _____ Zip: _____ |
| Phone: (____) _____ <input type="checkbox"/> Check if cell phone |
| Did this partner also operate land individually on June 1, 2024? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No |

| |
|--|
| <input type="checkbox"/> Check if verified |
| Name: _____ |
| Address: _____ |
| City: _____ State: _____ Zip: _____ |
| Phone: (____) _____ <input type="checkbox"/> Check if cell phone |
| Did this partner also operate land individually on June 1, 2024? |
| <input type="checkbox"/> Yes <input type="checkbox"/> No |

| |
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| For Office Use Only |
| Stratum |
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| For Office Use Only |
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| Stratum |
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| For Office Use Only |
| Stratum |
| 9928 |

Section 1 - Acres Operated

Please report total acres operated under this land arrangement.

1. In 2024, how many acres did this operation:

- a. Own?.....
- b. Rent or Lease from others or use Rent Free?
(EXCLUDE land used on an animal unit month (AUM) basis, BLM and Forest Service land.).....
- c. Rent to others?.....

| Acres |
|-------|
| 901 |
| 902 |
| 905 |
| 900 |

2. Calculate item 1a + 1b - 1c. Then the total acres operated in 2024 was:.....

- a. Does this include the farmstead, all cropland, woodland, pasture land, wasteland, and government program land?

Yes - Continue No - Make corrections, then continue

The remaining questions in this survey refer to the total acres operated (Item 2).

3. Of the total acres operated, how many acres are considered cropland, including land in hay, summer fallow, cropland idle, cropland used for pasture and cropland in government programs?.....

| |
|-----|
| 802 |
|-----|

4. In what state and county was the largest value of your agricultural products raised or produced?

| State |
|-------|
| |

| Principal County Name |
|-----------------------|
| |

| Number of Acres in Principal County |
|--|
| 0056 |

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| 0060 |
| 0055 |

Section 2 - Crops

Now I would like to ask about crops grown during the 2024 crop year.

- Please report for all land you operate, including land you rent from others.
- If harvest is not complete, make your best estimate of acres and total production.
- Report crops grown for any purpose for the 2024 crop year, even if the crop has been grazed off, plowed under, or abandoned.
- Corn: Please distinguish between corn harvested for grain, corn harvested for seed, and corn cut for silage.
- Acres for all other purposes: Acres of the crop used for hay, pasture, cover crops, abandoned, etc.

1. Corn (Exclude popcorn and sweet corn.)

| | | Corn |
|----|---|---------|
| a. | Corn acres planted for all purposes?..... | 530 |
| | Acres | |
| b. | Corn acres harvested and to be harvested for grain? (Exclude seed corn.)..... | 400 |
| | Acres | |
| | | 401 |
| c. | Total production of Corn for grain? (Exclude seed corn.)..... | Bushels |
| | or | 704 |
| d. | Yield per acre of Corn harvested for grain?..... | Bu/Ac |
| e. | Corn acres harvested and to be harvested for seed?..... | Acres |
| | | 398 |
| f. | Total production of Corn for seed? (Report the actual total production. Do not report the settlement account bushels.)..... | Bushels |
| | or | 399 |
| | | 391 |
| g. | Yield per acre of Corn harvested for seed? (Report the actual yield per acre. Do not report the payment yield.)..... | Bu/Ac |
| h. | Corn acres cut for silage?..... | Acres |
| | | 373 |
| i. | Total production of Corn cut for silage?..... | Tons |
| | or | 376 |
| | | 393 |
| j. | Yield per acre of Corn cut for silage?..... | Tons/Ac |
| | | _____ |
| k. | Acres of Corn for all other purposes?..... | Acres |
| | | 379 |

Section 2 - Crops (Continued)

18

2. Soybeans

- | | | Soybeans |
|---|---------|----------|
| a. Soybeans acres planted for all purposes?..... | Acres | 600 |
| b. Soybeans acres harvested and to be harvested for beans or seed?..... | Acres | 763 |
| c. Total production of Soybeans for beans and seed?..... | Bushels | 227 |
| or | | 764 |
| d. Yield per acre of Soybeans harvested for beans or seed?..... | Bu/Ac | |
| e. Acres of Soybeans for all other purposes?..... | Acres | 236 |

For Office Use Only: Completion Code for Crops in This Section

- | | |
|---|-----|
| 1 – Incomplete, has crops listed above | 138 |
| 2 – Incomplete, presence of crops listed above is unknown | |
| 3 – Valid Zero | |

Skip to next page

OR

Space for Notes and Comments

Section 3 - Change in Operator

Complete this section only if all questions in Item 2 on the face page are answered "No".

1. Has the operation named on the label been sold, rented, or turned over to someone else?

Yes - Go to Item 2 No - Continue

a. Will the land be used for any agricultural purpose by you (the operator), or anyone else in the next year?
INCLUDE growing crops, grains, row crops, oilseeds, fruits, vegetables, or specialty crops, raising any livestock, poultry or bees.

Yes No Don't Know

(Regardless of answer to above, write a note to explain the situation, then go to Section 4.)

2. Was the operator (name on label) operating a farm or ranch on June 1, 2024?

Yes - Continue No - Continue

3. Please provide the following information for the operation that has taken over the land:

What is the name and address of the new operation?

Operation Name: _____

Operator Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Check if
cell phone

Phone: (_____) _____

4. Was the (Item 3) new operation in business before June 1, 2024?

Yes - Go to Section 4 No - Continue

5. Is the (Item 3) operation managed?

Yes - Go to Section 4 No - Continue

6. Were any of the individuals associated with the (Item 3) new operation operating land individually before June 1, 2024?

Yes - Go to Section 4 No - Go to Section 4

Section 4 - Conclusion

1. Do you (the operator named on the label) make any day-to-day decisions for another farm or ranch?

1 Yes - Continue 3 No - Go to Section 5

a. What is the name of the other operation(s)?.....

Operation Name: _____

b. Was this additional operation in business before June 1, 2024?

Address: _____

City: _____ State: ____ ZIP: _____

1 Yes - Continue 3 No - Continue

Phone: (____) _____ Check if cell phone

Section 5 - Contact Information

Operator Email:

Operator Phone:

| | | | |
|------|---|----------------------|---|
| 9929 | Check to receive results by email <input type="checkbox"/> | 9918 (____) _____ | Check if cell phone <input type="checkbox"/> |
|------|---|----------------------|---|

Operation Email: (if different from above)

Operation Phone: (if different from above)

| | | | |
|------|---|----------------------|---|
| 9937 | Check to receive results by email <input type="checkbox"/> | 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. The results will be available on the release date at: nass.usda.gov/results

Thank you for your help.

| OFFICE USE ONLY | | | | | | | | | | |
|------------------|------|-------------|------|-----------------------|------|-------|-------|--------|---------------------|------|
| Response | | Respondent | | Mode | | Enum. | Eval. | Change | Office Use for POID | |
| 1-Comp | 9901 | 1-Op/Mgr | 9902 | 1-PASI (Mail) | 9903 | 9998 | 9900 | 9985 | 9989 - - - - - | |
| 2-R | | 2-Spouse | | 2-PATI (Tel) | | | | | | |
| 3-Inac | | 3-Acct/Bkpr | | 3-PAPI (Face-to-Face) | | | | | | |
| 4-Office Hold | | 4-Partner | | 6-Email | | | | | Optional Use | |
| 5-R - Est | | 9-Other | | 7-Fax | | | | | 9907 | 9908 |
| 6-Inac - Est | | | | 19-Other | | | | | 9906 | 9916 |
| 7-Off Hold - Est | | | | | | | | | | |
| S/E Name | | | | | | | | | | |