

CATTLE ON FEED INQUIRY - January 1, 2025

OMB No.0535-0213
 Approval Expires: 3/31/2027
 Project Code: 154
 SurveyId:3991 Version 4



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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 to this survey 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 control number for this information collection is 0535-0213. 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.

We need to know about all cattle and calves on feed for the slaughter market, regardless of ownership, on the total acres operated.

- INCLUDE cattle being fed by you for others.
- EXCLUDE any of your cattle being custom fed in feedlots operated by others.
- EXCLUDE cattle being "backgrounded only" for sale as feeders, for later placement on feed in another feedlot, or to be returned to pasture.
- EXCLUDE "cows and bulls" on feed.

		NUMBER
1.	How many cattle and calves were on feed January 1, that will go directly from this operation to the slaughter market?.....	652
2.	Of the TOTAL cattle and calves on feed (Item 1), how many were:	
	a. Steers and steer calves?.....	660
	b. Heifers and heifer calves?.....	666
3.	During December, how many cattle and calves:	
	a. were placed on feed in your feedlot(s)?.....	653
	b. were shipped to slaughter market from your feedlot(s)?.....	654
	c. were shipped to someone else's feedlot(s)?.....	655
	d. were returned to grazing?.....	656
	e. died?.....	657
4.	Of the number placed [Item 3a], how many or what percent weighed:	
	a. Less than 600 pounds?.....	661
	b. 600 - 699 pounds?.....	662
	c. 700 - 799 pounds?.....	663
	d. 800 - 899 pounds?.....	682
	e. 900 - 999 pounds?.....	683
	f. 1,000 pounds and over?.....	684
	TOTAL	100%
		OR
		671
		672
		673
		692
		693
		694
		(Total must equal Item 3a)
5.	What was the total capacity of your feedlot(s) on January 1?	676

HAY PRICES

- INCLUDE any size or type of dry hay bale but exclude hay bought as standing hay.
- EXCLUDE all hay purchased from dealers or any source other than farmers.
- EXCLUDE straw, haylage, greenchop, and baleage.

6. How many tons of baled alfalfa hay and alfalfa hay mixtures did you purchase from other farmers in December?..... TONS
289

7. What was the total amount you paid for the alfalfa hay and alfalfa hay mixtures purchased from other farmers in December?..... DOLLARS
181

8. How many tons of other baled hay, including fescue, clover, bermuda, sudan, sudan crosses, lespedeza, bahia, timothy, grain, ryegrass, other grass, other tame, and wild hays did you purchase from other farmers in December?..... TONS
319

9. What was the total amount you paid for the other baled hay purchased from other farmers in December?..... DOLLARS
187

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

1 Yes - Identify the new operator(s) 3 No - Go to Item 11

Operation Name: _____

Operator Name: _____

Address: _____

City: _____ State: _____ Zip: _____ County: _____

Phone: (____) _____ Check if cell phone.

a. Did this person operate land individually on June 1, 2024? 1 Yes 3 No

11. Survey Results:

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	9909	916
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OFFICE USE ONLY												
Response		Respondent		Mode		Enum.	Eval.	Change	Office Use for POID			
1-Comp 2-R 3-Inac 4-Office Hold 5-R – Est 6-Inac – Est 7-Off Hold – Est	9901	1-Op/Mgr 2-Sp 3-Acct/Bkpr 4-Partner 9-Oth	9902	1-PASI (Mail) 2-PATI (Tel) 3-PAPI (Face-to-Face) 6-Email 7-Fax 19-Other	9903	9998	9900	9985	9989 _____ - _____ - _____			
									Optional Use			
									9907	9908	9906	9916
									R. Unit			
						9921						
S/E Name												