



U.S. Department of Agriculture  
 Grain Inspection,  
 Packers and Stockyards  
 Administration

For P&SP Use Only	P&SP Bar Code Only
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## ANNUAL REPORT OF MARKET AGENCY - SOC

**Packers and  
 Stockyards  
 Program**

**Instructions:** If an item's value is zero, enter "0". If an item does not apply, enter "NA". Upon completion please verify that all items have been answered. Return completed form to the P&SP Central Reporting Unit. See instructions for information about this report.

### GENERAL INFORMATION - SECTION 1

101	Reporting Period (mm/dd/yy)	a. from	b. to
102	Legal Business Name		
103	Business Name (dba)		
104	Mailing Address		
105	City, State, Zip		
106	Physical Address		
107	City, State, Zip		
108	Contact Name		
109	Telephone Number		
110	Fax Number		

### ORGANIZATIONAL STRUCTURE - SECTION 2

*List owners, officers, partners, and managing members in control of this business*

	a. Name	b. Title	c. Percentage Ownership
201			
202			
203			
204			
205			

206	Type of organization: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> L.L.C. <input type="checkbox"/> L.L.P. <input type="checkbox"/> Co-op <input type="checkbox"/> Association <input type="checkbox"/> Other
207	Is this the same organization type reported last year? <input type="checkbox"/> Yes <input type="checkbox"/> No
208	Is this business owned or controlled by another business entity? <input type="checkbox"/> Yes <input type="checkbox"/> No
209	If line 208 is yes, identify the owner/controlling business name and address.
210	Does this business own or control other businesses within the livestock-meat sector? <input type="checkbox"/> Yes <input type="checkbox"/> No

*If line 210 is yes, then provide the names of businesses that you own or control and percentage of control in items 211-214*

	a. Name of Business	b. Percentage of Control
211		
212		
213		
214		

Your response to this form is required under the Packers and Stockyards Act of 1921 (9 CFR 201.97 and 7 U.S.C. 181-229). According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information is 0580-0015. The time required to complete this information collection is estimated to average 2 hour per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection.

**SOC ACTIVITY (CLAUSE 1 BOND) - SECTION 3**

301	Number of public sale days covered by this report					
	<b>Livestock Sold at Market</b>	a. Cattle & Calves	b. Hogs	c. Sheep & Goats	d. Horses & Mules	e. Total (a+b+c+d)
302	Livestock consigned by others to your market (number of head)					
303	Livestock consigned by you to your market (number of head)					
304	Total livestock consigned to your market (number of head)					
305	Gross value of livestock sold on commission	\$	\$	\$	\$	\$

**DEALER OPERATIONS (CLAUSE 2 BOND) - SECTION 4**

	<b>Livestock Dealer Activity</b>	a. Cattle & Calves	b. Hogs	c. Sheep & Goats	d. Horses & Mules	e. Total (a+b+c+d)
401	Cost of livestock purchased on a dealer basis for registrant's account	\$	\$	\$	\$	\$
402	Number of head of livestock purchased on a dealer basis for registrant's account					

	<b>Livestock Bought on Commission</b>	a. Cattle & Calves	b. Hogs	c. Sheep & Goats	d. Horses & Mules	e. Total (a+b+c+d)
403	Cost of livestock bought on commission for the account of others regardless of who paid for the livestock.	\$	\$	\$	\$	\$
404	Number of head of livestock bought on commission for the account of others regardless of who paid for the livestock.					

405 What was the dollar value of livestock dealer and BOC purchases in your highest quarter?

**CLEARER AND CLEAROR DESIGNATIONS - SECTION 5**

501	Are you a clearer (cleared by another business for your livestock purchases)? <input type="checkbox"/> Yes <input type="checkbox"/> No				
502	If you checked yes in item 501, provide the name of the clearing agent:				
503	Are you a clearor (provide clearing services for clearers)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes provide information for lines 504-512				
	Clearer's Name as Registered		Gross Value of Livestock Purchased		
504		505	\$		
506		507	\$		
508		509	\$		
510		511	\$		
	Total Livestock Purchases of all Clearers		512	\$	

**ANALYSIS OF CUSTODIAL BANK ACCOUNT FOR SHIPPERS' PROCEEDS - SECTION 6**

601	Balance per Bank Statement as of (Date): _____	602	\$ _____
	Deposits in Transit (in mail or bank, but not on statement)	603	\$ _____
	CD's and Savings Accounts designated as Custodial Funds	604	\$ _____
	Proceeds on Hand	605	\$ _____
	Proceeds Receivables	606	\$ _____
	Total Debits	607	\$ _____
	Outstanding Checks and Drafts which have not Cleared Bank	608	\$ _____
	Proceeds Due Consignors of Livestock for which no Checks were issued	609	\$ _____
	Expense Items incident to Sales remaining in Account	610	\$ _____
	Total Credits	611	\$ _____
	Overage in account (Debits exceed Credits) - Enter on line 702	612	\$ _____
	Shortage in account (Credits exceed Debits) - Enter on line 719	613	\$ _____

**BALANCE SHEET - SECTION 7**

*Include values only for the reporting entity.*

**Assets**

**Current Assets**

<b>Cash on Hand and in Non-Custodial Bank Accounts (Enter overdrafts under Current Liabilities - line 718)</b>	701	\$ _____
<b>Overage in Analysis of Custodial Bank Account (From Line 612)</b>	702	\$ _____
<b>Temporary Cash Investments (Marketable Securities, Certificates of Deposit, Commercial Paper, etc.)</b>	703	\$ _____
<b>Accounts Receivable (Due in 1 Year or Less)</b>		
From Sources Not Related to Company	704	\$ _____
From Sources Related to Company	705	\$ _____
<b>Total Accounts Receivable</b>	706	\$ _____
<b>Notes and Loans Receivable (Portion due in 1 Year or Less)</b>	707	\$ _____
<b>Inventory</b>		
Livestock	708	\$ _____
Other Inventory	709	\$ _____
<b>Total Inventory</b>	710	\$ _____
<b>Other Current Assets</b>	711	\$ _____
<b>Total Current Assets</b>	712	\$ _____

**Long-Term Assets**

<b>Investments</b>	713	\$ _____
<b>Property, Plant &amp; Equipment (Net of Depreciation and Amortization)</b>	714	\$ _____
<b>Other Long-Term Assets</b>	715	\$ _____
<b>Total Long-Term Assets</b>	716	\$ _____
<b>Total Assets</b>	717	\$ _____

**Liabilities and Net Worth**

**Liabilities**

**Current Liabilities**

<b>Bank Overdraft in Non-Custodial Bank Accounts</b>	718	\$ _____
<b>Shortage in Analysis of Custodial Bank Account (from line 613)</b>	719	\$ _____
<b>Accounts Payable</b>		
Livestock Payables	720	\$ _____
Other Payables to Sources Not Related to Company	721	\$ _____
Other Payables to Sources Related to Company	722	\$ _____
<b>Total Accounts Payable</b>	723	\$ _____
<b>Notes and Loans Payable (demand notes and portion of long-term notes due in 1 year or less)</b>	724	\$ _____
<b>Other Current Liabilities</b>	725	\$ _____
<b>Total Current Liabilities</b>	726	\$ _____

**Long-Term Liabilities (Due after 1 Year)**

727 \$ \_\_\_\_\_

**Total Liabilities**

728 \$ \_\_\_\_\_

**Total Net Worth**

729 \$ \_\_\_\_\_

**Total Liabilities and Net Worth (Equals Total Assets)**

730 \$ \_\_\_\_\_

**INCOME STATEMENT - SECTION 8**

**Income Statement**

<b>Selling Commissions of Market</b>	801	\$ _____
<b>Gross Dealer Profit (+) or Loss (-)</b>	802	\$ _____
<b>Buying Commission</b>	803	\$ _____
<b>Other Income</b>	804	\$ _____
<b>Total Income</b>	805	\$ _____
<b>Total Expenses</b>	806	\$ _____
<b>Net Profit (+) or Loss (-) before Income Taxes</b>	807	\$ _____

**CERTIFICATION - SECTION 9**

*Under the Packers and Stockyards Act any person who willfully makes, or causes any false entry or statement of fact in this report shall be deemed guilty of offense against the United States, and be subject to a fine of \$1,000 to \$5,000, or to imprisonment for a term of not more than 3 years, or to both fine and imprisonment.*

**I certify that this report has been prepared by me or under my direction, and to the best of my knowledge and belief correctly reflects reporting entity operations.**

901 Print Name		902 Signature (Must be signed by a person listed on 201-205)	
903 Phone Number	904 Date	905 Title	

*Submitted information is confidential (9 CFR 201.96). Failure to report will result in forfeiture to the United States \$110 per day until report receipt 7 (U.S.C. 222).*

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