



2024 HEMP GROWER PRODUCTION REPORT
(END-OF-YEAR REPORT)

- This completed report is due by **DECEMBER 1ST, 2024**.
- This form is due for all Hemp Growers that **planted** hemp in 2024 with the AR Hemp Program.
- Submit Section II (page 3) for each growing STREET ADDRESS.
- Only completed & signed forms will be accepted.

OFFICIAL USE ONLY:

LICENSE HOLDER/COMPANY NAME:	GROWER LICENSE #:
SIGNING AUTHORITY NAME:	
E-MAIL ADDRESS:	PHONE #:

SECTION I – INDUSTRY OVERVIEW DATA

- 1) Did you experience a financial profit or loss on the crop you grew in 2024? PROFIT LOSS
- 2) Provide your total gross sales of the harvested hemp crop grown in 2024. \$ _____
- 3) Indicate if you still have unsold material in storage. YES NO

(a.) If "YES," complete the following table and answer the question (b.) below.

DESCRIPTION OF HEMP MATERIAL (floral, seed, stalks, etc.)	WEIGHT IN LBS.	ESTIMATED VALUE (\$)

(b.) Indicate the reason(s) that you still have hemp materials in storage. Check all that apply.

- | | |
|--|--|
| Unable to find a buyer (at ANY price) | Sales Agreement made, expecting payment after processing |
| Market Price too low to make a profit | Processor will not accept due to quality of material |
| Waiting for processor to take delivery | Other (specify): _____ |

- 4) Did you make any capital investments for your hemp farm (equipment, land, buildings, etc.) in 2024?
 YES NO If "YES," provide the amount: \$ _____

- 5) Were any new jobs created in 2024 for your hemp farm? YES NO
 If "YES," provide the number of full-time equivalent positions: _____

6) Did you have a signed contract with a processor to buy your hemp prior to planting your 2024 crop?
YES NO If "YES," did the processor/buyer fulfill the contract? YES NO

7) How many in-state processor/handlers did you sell to or utilize during 2024? _____

8) How many out-of-state processor/handlers did you sell to or utilize during 2024? _____

9) Did you experience any theft of any hemp plants or plant material this year?
YES NO If "YES," was a police report filed? YES NO

10) In one sentence, summarize the most important thing(s) learned about hemp crop production this year:

11) Please provide any constructive comments or feedback for program improvements:

12) Do you currently plan on re-applying for a Hemp Grower License in 2024?

YES NO

If "NO," please describe why not: _____

13) Complete SECTION II for EACH street address hemp was planted at in 2024. Attach all copies to your final submission. Indicate number of pages attached: _____

SECTION II – ON PAGE 3, FILL-OUT FOR EACH STREET ADDRESS.

SECTION II – GROWING LOCATION PRODUCTION DATA

15) Provide the growing street address where you planted hemp in 2024. Please use a separate copy of this page 3 for EACH street address hemp was planted at in 2024.

STREET ADDRESS
(one per page 3):

16) Complete the following table for each planted Location ID listed on your License Certificate for the street address you wrote above in question 15. If you harvested and sold multiple components of the crop (e.g., grain and floral material), report the yields, operating costs, amount sold, and income generated for the specific component on separate rows in the table. ***PLEASE COMPLETE ALL INFORMATION REQUESTED***

LOCATION ID	VARIETY NAME	ACTUAL HARVEST COMPLETION DATE	ACTUAL ACRES/SQ FT HARVESTED	CLEAN GRAIN (in LBS.)	DRIED STALKS FOR FIBER (in LBS.)	DRIED FLORAL MATERIAL (in LBS.)	% OF CBD OF FLORAL	TOTAL OPERATING COSTS* (per lot)	AMOUNT SOLD (\$)	GROSS INCOME (per lot)
<i>Ex: FIELD 1</i>	<i>Ex: BERRY</i>	<i>Ex:9/30/2022</i>	<i>Ex: 1 ACRE</i>	<i>Ex: 10 LBS.</i>	<i>Ex: 10 LBS.</i>	<i>Ex: 100 LBS.</i>	<i>Ex: 9%</i>	<i>Ex: \$1,000</i>	<i>Ex: \$200</i>	<i>Ex: \$200</i>

*Operating costs include all the money necessary for the production and harvesting of the lot, including seeds or clones (regardless of who paid for it), labor (even your time if you don't pay yourself), fertilizer, fuel, program fees, etc.

By signing below, I attest that I am the License Holder, or a signing authority of the License Holder, and that this information is accurate to the best of my knowledge. I further acknowledge that providing false or misleading information to the Department's AR Hemp Program may result in enforcement action against me by the Department, which may result in license suspension or revocation.

PRINTED NAME & DATE

SIGNATURE

Submit via e-mail to: industrialhemp@agriculture.arkansas.gov