This form is available	· · · · · · · · · · · · · · · · · · ·		AMEI	NDED _						. 0560-0097
FSA-153 U.S. DEPARTMENT OF AGRICULTURE Farm Service Agency					1. TYPE ACTIV	VITY (See Ins B. La	_		<i>check one)</i> Land	
(10-13-10)					Holding		quisition	0.	Disposition	on
AGRICULTURAL FOREIGN INVESTMENT DISCLOSURE ACT F					D. Land Use	Change	E. La	nd Use	Change	
	ns on Page 2 Before Filing in Any Data formation in Item 6, Page 2, or attach a			ce is	to Agricult	ure	to	Non-A	griculture	
·	ITEM	ari additioriai si	1001.)				TEM			_
2. Tract Location and Description					Type of Interest Held in the Agricultural Land (Check one) A. Fee Interest (Ownership) Whole					Check
A. Legal Description or FSA Tract Number				B. Fee Interest (Ownership) Partial What Percent						
				C. Life						
B. County or Parish C. Number of Acres				D. Trust Beneficiary E. Purchase Contract					1	
B. County of Failsh		O. Number o	n Acres	F. Other (Check Box and Explain Below:)						
D. State		1								
3 Owner or Lessee of	of Tract (In Item 2A) (See Page 2)			-						
A. Name:	or tract (in hem 277) (See Fage 2)									
					as this Tract Acq	uired or Tra	nsferred?			Check
B. Tax ID No. (Nine					h Transaction					1
C. Legal Address (Street, City, State/Province, Country)					dit or Installment T	ransaction				1
				C. Trac	or Inheritance					1
				E. Foreclosure						
				F. Othe	er (Check Box and	d Explain Bel	ow:)			
**	lf Item D1 is checked, skip Items D2 ai	,	Check							
 Individual. (I if applicable). 	Indicate citizenship of husband and/or	wife		7 Value o	of Agricultural La	ınd:				
	o of individual(s)		1		chase Price of Lan			•		
				dispo	osition, the origina	al price paid b	y seller.	\$		
2. Government (Country)					 B. Non-Purchase, Estimated Value at the Time of Acquisition 			\$		
3. Organization	1		Check	_	at is the estimated			\$		
a. Type 1) Corpora	ation				disposition, the selling price of the tract of land? D. How much of purchase price in Item 7A \$					
2) Partner 3) Estate				rem	ains to be paid?	•	Month		Day	Year
4) Trust					Acquisition or T estructions, Item 8		IVIOTILI	1	Day	Teal
5) Institution 6) Associa				<u>'</u>	t Land Use (Usua	,		1		
7) Other ((Check box and Explain):			for idle	land, report as Oti	her Agricultui	re).		5	
b. Governmer	nt or country under whose law the orga	anization is crea	ated	A. Crop						
c. Principal pla	lace of business (For organizations on	ly)		B. Pasture C. Forest or Timber						
				D. Other Agriculture						
d. List on separate sheet, the Name, Address and Country of all foreign persons who individually or in the aggregate hold significant interest or					E. Non-Agriculture					
·	control 1/ in the person owning the lar	-	1651 01	F. Tota	al Acres (Should e	equal Item 20	C)			
E. Complete only if Item 1C, Land Disposition, is checked.					ded Use as of Th		40 - · · 45			Check or "NA"
Name of Person Receiving Tract Address (Street, City, State/Province, Country)					k one or more or e e is checked.	enter INA IT I	tem 1C or 1E			"NA"
(3.1	., . ,			A. No	change.					
					B. Other Agriculture					
					C. Non-Agriculture 11. Relationship of Owner to Producer. Check one or more items					
					if applicable. Enter "NA" if Item 1C or 1E is checked.					
3. Citizenship: U		nknown	<u></u>							
	Foreign Person (Completing form, if a	applicable)		A. Producer is: 1. Owner						
A. Name			1. Owner 2. Manager							
B. Address (Street, City, State/Province, Country)			Tenant or sharecropper (Item 11B must be completed.)							
					ntal agreement is:	: (Not applica	able if Item 1C	or 1E a	bove is	
					1. A crop share					
C. Telephone No. (Area Code):			Cash or fixed rent							
·	<u> </u>	ı	Check	12. The Pi	roducer on This	Tract is:				
D. Relationship of Representative to Foreign Person Checon 1. Attorney			CHECK	Check one or more. If not applicable for Item 11A, then enter "NA". (Not applicable if Item 1C or 1E above is checked.)						
2. Manager					, ,,				.eu.)	
3. Agent 4. Other (Explain on Item 6, Page 2)					e same person as new person.	when the tra	ect was acquire	a.		
	N: I certify that the information en	tered in this re	port is con		•	tand that fal	sification of r	porting	g is subject	t to
a civil penalty no	ot to exceed 25% of the fair market	value of the in	•	•					, ssjeet	
14A. SIGNATURE (O	wner or Legally Authorized Represe	entative)	14B. TITLI	E		-	140	. DATI	E (MM-DD-Y	YYY)

AMENDED

This form is available electronically.

NOTE: The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a – as amended). The authority for requesting the information identified on this form is 7 CFR Part 781 and the Agricultural Foreign Investment Disclosure Act of 1978 (Pub. L. 95-460). The information will be used to ensure that a foreign person who acquires, disposes of, or holds an interest in United States agricultural land discloses such transactions and holdings to the Secretary of Agriculture and to determine the effects of such transactions and holdings on family farms and rural communities. The information collected on this form may be disclosed to other Federal, State, Local government agencies, Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is mandatory. Failure to furnish the requested information or falsification of reporting will result in a determination of non-compliance with the program which is subject to a civil penalty not to exceed 25 percent of the fair market value, as determined by the Farm Service Agency on the date of the assessment of such penalty, of the foreign person's interest in the agricultural land with respect to which such violation occurred.

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 0560-0097. The time required to complete this information collection is estimated to average 30 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. The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

DETERMINATION OF "FOREIGN PERSON" STATUS

DEFINITION: "Person" means any individual, corporation, company, association, firm, partnership, society, joint stock company, trust, estate, or any other legal entity.

You are an "individual/foreign person" under the provisions of Pub. L. 95-460 and must complete the front side of this form (FSA-153) if your answer is "NO" to all the statements in Items 1, 2 and 3 below:				
1. I AM a citizen of the United States.				
2. I AM a citizen of the Northern Mariana Islands or the Trust Territories of the Pacific Islands.				
3. I AM lawfully admitted to the United States for permanent residence, or paroled into the United States, under the Immigration and Nationality Act.				
You are a "foreign person, organization or government," under the provisions of Pub. L. 95-460 and must complete the front side of this form (FSA-153) if your answer is "YES" to any of the statements in Items 4a, 4b and 5 below:				
4. I AM a "person" other than an individual or government, which is created or organized under the laws of:				
a. A foreign government of which has its principal place of business located outside the United States.				
b. Any State of the United States, and in which significant interest or substantial control 1/1 is held directly or indirectly by any foreign individual, government, or person.				
5. I AM a foreign government.				

GENERAL INSTRUCTIONS

Complete this form for each tract of land. Report as a tract all acreages under the same ownership in each county or parish acquired or transferred on the same date. Land in different counties or parishes and land acquired or transferred on different dates must be reported as separate tracts.

Return the original and two (2) copies to the County Farm Service Agency (FSA) Office where the tract of land is located. Retain a copy for your records.

After the original disclosure on FSA-153 on the tract(s) of land owned by the same person within a county or parish, each subsequent change of ownership or use must be reported by filing another FSA-153.

ITEMS 1 AND 8 BELOW ARE TO BE USED AS INSTRUCTIONS ONLY. THESE INSTRUCTIONS ARE TO BE USED FOR INFORMATION AS YOU COMPLETE ITEMS 1 AND 8 ON PAGE 1.

ITEM 1. ONLY ONE BOX MAY BE CHECKED

If the tract of land to be listed under Item 2 on the front side of this document was:

- Owned on February 1, 1979, check A. Land Holding Reporting Date: This document is required to be completed and returned by August 1, 1979.

If the tract of land to be listed under Item 2 on the front page of this document was, on or after February 2, 1979:

- Acquired, check B. Land Acquisition
- Disposed of, check **C. Land Disposition**
- Changed from non-agricultural to agricultural use, check D. Land Use Change to Agriculture
- Changed from agricultural to non-agricultural, use check E. Land Use Change to Non-Agriculture

NOTE: REPORT DATE. If activity B, C, D or E is checked in Item 1 above, then return the completed FSA-153 within ninety (90) days from the date of the transaction.

ITEM 8. The date entered would be as follows for the activity checked in Item 1 above:

Box A or B – Date acquired.

Box C - Date disposed of.

Box D or E – Date land use changed.

6. Additional Information (Use additional sheets if more space is needed).

1/ Significant interest or substantial control as defined in 7 CFR Part 781.2(k)

The U.S. Department of Agriculture (USDA) prohibits discrimination in all of its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, political beliefs, genetic information, reprisal, or because all or part of an individual's income is derived from any public assistance program. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). To file a complaint of discrimination, write to USDA, Assistant Secretary for Civil Rights, Office of the Assistant Sec