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 0579-0036. The time required to complete this information collection is estimated to average 2 hours 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.							OMB APPROVED 0579-0036	
This report is required by law (7 U.S.C. 2143). Failure to report according to the regulations can result and to be subject to penalties as provided for in Section 2150.					cease and desist	Interagency Report Control No. 0180-DOA-AN	Fiscal Year: 2019	
UNITED STATES DEPARTMENT OF AGRICULTURE ANIMAL AND PLANT HEALTH INSPECTION SERVICE ANNUAL REPORT OF RESEARCH FACILITY (TYPE OR PRINT)				REGISTRATION NUMBER: 87-G-0001				
				Customer Number: 335445				
				2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA, include ZIP Code) POISONOUS PLANT RESEARCH LABORATORY				
				1150 East 1400 North				
				LOGAN, UT 84341				
					Telephone: (435) 752-2941			
					10/1			
		ROL OF RESEARCH FACILIT	•		-			
Α.	В.	C.	D. Number of an upon which exp			s upon which teaching, h, surgery, or tests were	F.	
	Number of animals being bred, conditioned, or held for use in	Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of	teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and		conducted involving a	accompanying pain or distress r which the use of appropriate		
Animals Covered By The					anesthetic, analgesic	, or tranquilizing drugs would	TOTAL NUMBER OF	
Animal Welfare Regulations	teaching, testing, experiments, research,				have adversely affect interpretation of the te	ed the procedures, results, or eaching, research.	ANIMALS	
	or surgery but not yet	pain-relieving drugs.	for which appro	priate	experiments, surgery	, or tests. (An explanation of	(Cols. C + D + E)	
	used for such purposes.		anesthetic, anal tranquilizing dru			icing pain or distress on these ons such drugs were not used		
	0	0	used. 0		must be attached to t	his report.)	0	
4 Dogs	0	0	0		0		0	
5 Cats	0	0	0		0		0	
6 Guinea Pigs	0	0	0		0		0	
7 Hamsters	0	0	0		0		0	
8 Rabbits	0	0	0		0		0	
9 Non-Human Primates	0	0	0		0		0	
10 Sheep	49	70	2		0		72	
11 Pigs	0	0	0		0		0	
12 Other Animals	102	853	113		8		974	
Ars Mice (Mice Used For Ars	Ars Mice (Mice Used For Ars Racility Research Purposes 749		106		4		859	
Cattle / Cow / Ox / Watusi	29	80	3		0		83	
Domestic Goat	73	24	4		4		32	

ASSURANCE STATEMENTS

1.) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.

2.) Each principal investigator has considered alternatives to painful procedures.

3.) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.

4.) The attending veterinarian for this research facility has appropriate authority to ensure the provisions of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

use.					
(Chief Exec Institut	CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL (Chief Executive Officer (C.E.O.) or Legally Responsible Institutional Official (I.O.)) I certify that the above is true, correct, and complete (7 U.S.C. Section 2143).				
		DATE SIGNED			
		02-APR-2020			