FALL RIVER COUNTY UNAPPROVED MEETING MINUTES OCTOBER 16, 2025

The Fall River Board of County Commissioners met in regular session on October 16, 2025. Present: Joe Allen, Les Cope, Joe Falkenburg, Deb Russell, Sandra Wahlert and Sue Ganje, Auditor.

An invocation was given by Wahlert.

The Pledge of Allegiance was given, and the meeting was called to order at 9:00 a.m.

The agenda was reviewed for conflicts; none were noted. ALL MOTIONS RECORDED IN THESE MINUTES WERE PASSED BY UNANIMOUS VOTE, UNLESS OTHERWISE STATED. The full context of the meeting can be found on the county website under Commissioners at http://fallriver.sdcounties.org or on Facebook on the Fall River County website.

Motion made by Russell, seconded by Wahlert, to approve the agenda with the addition of Tim Goodwin coming to talk to the Commission at 10:40 a.m. and Tony March presenting a Right-of-Way permit.

Motion made by Russell, seconded by Wahlert, to approve the Fall River County Commission meeting minutes from October 2nd, 2025

Motion made by Wahlert, seconded by Russell, to set a cash supplement hearing on November 6th, 2025, at 9:35 a.m.

Motion made by Russell, seconded by Wahlert, to set the year end meeting on December 30th, 2025, at 9:00 a.m.

Motion made by Wahlert, seconded by Allen, to approve travel for Sue Ganje, County Auditor, to attend the Auditors Conference on November 18th-20th 2025, with lodging and per diem.

Motion made by Allen, seconded by Wahlert, to approve longevity increase for Rachel Hosterman, Sheriffs Administrative Assistant from \$25.00/month to \$50.00/month for 5 years of service, effective 10/26/2025; as per union contract.

Darren Russell, VSO, met with the Board to give updates and present the VSO 3rd Quarter report, noting awards to veterans in the amount of \$136,855.68.

Anderson Engineering met with the Board to present a plat for approval.

Motion made by Cope, seconded by Russell, to approve the following plat: FALL RIVER COUNTY RESOLUTION #2025-32

A Plat of Lot 1R and Lot 2 of Swett Subdivision, located in the S ½ Government Lot 4 of Section 19, and the N ½ Government Lot 1 of Section 30, T7S, R6E, BHM, Fall River County, South Dakota

Formerly Lot 1 of Tract Swett, The Remainder of tract Swett, Tract Shop, Lot FR 11 and Lot FR 12

WHEREAS, there has been presented to the County Commissioners of Fall River County, South Dakota, the within plat of the above described lands, and it appearing to this Board that the system of streets conforms to the system of streets of existing plats and section lines of the county; adequate provision is made for access to adjacent unplatted lands by public dedication or section line when physically accessible;

Oil, no bid; Nelsons Oil & Gas, declined to bid and provided updates.

Motion made by Russell, seconded by Allen, to approve the low bid from Vollan Oil in the amount of \$2.62/gal for 8,000 gallons of #2 dyed diesel.

Motion made by Cope, seconded by Allen, to approve the Application for Permit to Occupy County Right-of-Way from Golden West Telecommunications, located from an existing vault near approach to 11981 Rocky Ford Rd, Edgemont, SD.

The time being 10:00 a.m. Cash Supplements Hearing took place.

FALL RIVER COUNTY RESOLUTION #2025-33 Supplemental Budget 2025, #8

WHEREAS, SDCL 7-21-22 provides that the Board of County Commissioners may adopt a supplemental budget, and whereas, as due and legal notice has been given, the following Supplements to expenditures for October 16, 2025, be approved as follows:

			1
\$57,481.59	10100X4262111	Comm other projects	Error on Specials
\$40.50	10100X4222130	Judicial Systems	Court Reporter
\$9,866.29	10100X4261154	Abuse & Neglect	Attorneys
\$923.94	10100X4228213	Coroner	Autopsies
\$310.00	10100X4272215	Juvenile Care	Juvenile Services
\$11,071.79	30100x4250161	Building Fund	BlackHills Exteriors
\$4,149.32	20700X4110225	Dispatch	Salaries
\$5,896.44	10100X4340615	Weed Control	Equipment
\$(10,786.41)	10100R3310210	HAVA	HAVA
		Reimbursement	
\$(8,733.56)	10100R3660000	Redeposit Prior Year	Dividends
\$(264,058.90)	10100R3730200	Reimb Ins	Roofs
\$(5,250.00)	10100R3740100	Sale of Property	Online Auction
\$(25,600.00)	20100R3690200	Reimb Ins	
\$(8,003.73)	20100R3740100	Sale of Co Property	Online Auction
\$(1,548.13)	23400R3340100	LEPC	Grant

Means of finance to be cash and cash received, and

NOW THEREFORE BE IT RESOLVED by the Board of County Commissioners to adopt the Supplemental Budget #8 for 2025.

Dated at Fall River County, South Dakota this 16TH day of October 2025.

/s/ Joe Falkenburg
Joe Falkenburg
Fall River County Board of Commissioners

ATTEST:

/s/ Sue Ganje
Sue Ganje
Fall River County Auditor's Office



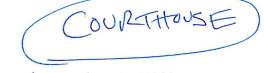
Invoice

Emergent 3

PO Box 119 Logan, UT 84323 United States

Bill to

Rachel Hosterman Fall River County 906 N River Street Hot Springs, SD 57747



Invoice number INV-1960

Invoice date October 31, 2025

Due date November 30, 2025

Total

\$11,875.00

Pay for this invoice online

PRODUCTS & SERVICES	QTY	UNIT PRICE	AMOUNT
E3 Government Safety App and Services E3 Safety Desktop and Mobile Apps - Unlimited Users and Devices - Text/Email - Interactive mapping Approved Sites to be Secured by E3 Lifetime Customer Support	1	\$10,000.00	\$10,000.00
Setup and Implementation Fee Onboarding, Training(s) and Smart Mapping	1	\$1,875.00	\$1,875.00

Comments

Send checks to
Emergent 3
PO Box 119
Logan, UT 84323



Invoice

Emergent 3

PO Box 119 Logan, UT 84323 United States

Bill to

Rachel Hosterman Fall River County 906 N River Street Hot Springs, SD 57747 HWY SHOP - DOE - SOUTH ANNEX

Invoice number INV-1959

Invoice date October 31, 2025

Due date November 30, 2025

Total

\$11,875.00

Pay for this invoice online

PRODUCTS & SERVICES	QTY	UNIT PRICE	AMOUNT
E3 Government Safety App and Services E3 Safety Desktop and Mobile Apps - Unlimited Users and Devices - Text/Email - Interactive mapping Approved Sites to be Secured by E3 Lifetime Customer Support		\$10,000.00	\$10,000.00
Setup and Implementation Onboarding, Training(s) and Smart Mapping	1	\$1,875.00	\$1,875.00

Total	\$11,875.00
Subtotal	\$11,875.00

Comments

Send checks to
Emergent 3
PO Box 119
Logan, UT 84323

Date Received	2026 License No. RW-30560
Date Issued	RECEIVED
Uniform Alcoholic Bev A. Corporation, LLC, or Sole Proprietor Name and Mailing Address	rerage License Application B. Doing Business As Name and Physical Address OCT 2 2 2025
THE LODGE AT ANGOSTURA, LLC 1211 MOUNT RUSHMORE RD RAPID CITY, SD 57701-3660 Owner's Telephone#: (605) 721-4647 C. Indicate the class of license being applied for (submit separate application for each class of license). Retail (on-sale) Liquor Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Package (off-sale) Liquor	Lic # RW-30560 THE LODGE AT ANGOSTURA 13297 N ANGOSTURA RD HOT SPRINGS, SD 57747-7204 Business Telephone #: (605) 721-4647 Place of business is located in a municipality? [] Yes [X] No County: Fall River Do you own [X] or lease [] this property? (Check one) Are real property taxes paid to date? [X] Yes [] No
X Retail (on-off sale) Wine and Cider Retail (on-off sale) Malt Beverage & SD Farm Wine Package Delivery Hunting Preserve Other	Are you of good moral character having never been convicted of a felony? [X] Yes [] No D. Legal description of licensed premise: Track Beiley #2A W WY4 NW 1/4, Sec 15, TWPB, R6
Is this License in active use? [X] Yes [] No Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses?	E. State Sales Tax Number: 1039-7686-ST
that the said applicant complies with all of the statutory require agrees to permit agents of the Department of Revenue access to and agrees this application shall constitute a contract between a	o the licensed premises and records as provided in SDCL 35-2-2.1, applicant and the State of South Dakota entitling the same or any y time for the purpose of enforcing the provisions of Title 35 SDCL,
H. APPROVAL OF LOCAL GOVERNING BODY- Notice of he application was held, not less than SEVEN	earing was published Public hearing on the (7) days after official publication. The governing body by majority d certifies that requirements as to location and suitability of premises
For Local Government Use	Renewal - no public hearing held Amount of fee collected with application Amount of fee retained \$ 500.00 Forwarded with application \$

Mayor or Chairman

Name of corporation/part	tnership/LP/LLC	The Lodge of	angostra L	۷C	
Address of office and pri	ncipal place of busines				ortha Rod &
Are all managing officers felony? Yes [] No					•
Name, title of office, occupation Name Nicholar Dypan Alicen Dypan	Office	of the officers/owner Addre 1211 Mt Ru 1211 Mt.Ru	ess	artnership, LP, or LLC Occupation Real F Real	
Name of any officers, director beverage license:	rs, partners or stockhol	ders of applicant havi	ng a financial interest of	or capital stock in any	other alcoholic
Name	Type of License, L	icense Number, Finar	icial Interest Held, and	Address of Business	Location
None					
Where and with whom are all accounts receivable, etc?	company records kept.	3	aws, minutes, accounts	, notes payable, and n	otes and
With signature the applicant That the applicant compato the transfer of stock and provisions of said regulation of stockholder thereof, or by any issued pursuant to and in reliative the undersigned offic true and correct in every respettant that expressly set forth a	any will comply with all ior approval of the transor failure to comply the yone interested in said cance on this application ters and directors of the ect and that there exists	I provisions of ARSD asfer of such stock by erewith, whether by the company, shall constitution, or for refusal to render applicant company as no financial arranger	the Secretary of Revent e undersigned corporate tute cause for revocation we such license upon eacknowledge that the we ment concerning this of	nue and violation of an tion, partnership/LP/L on or suspension of an xpiration thereof. rithin supplement appl r any other alcoholic b	y of the LC or by any y license ication form is everage license
Signature of Authorized Of	ficer/Director/Partner	r	Date		
MT			/6/	22/25	

Date Received	License No. <u>RL-6193</u>
Date Issued	RECEIVE
A. Corporation, LLC, or Sole Proprietor Name and Mailing Address	rerage License Application B. Doing Business As Name and Physical Address OCT 1 6 2025
ALL 5 GEARS LLC 30387 HIGHWAY385 OELRICHS, SD 57763-7828 Owner's Telephone#: (605) 535 - 2099 C. Indicate the class of license being applied for (submit separate application for each class of license). X Retail (on-sale) Liquor Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Package (off-sale) Liquor Retail (on-off sale) Wine and Cider Retail (on-off sale) Malt Beverage & SD Farm Wine	Lic # RL-6193 STATELINE RESTURANT & CASINO 30387 HIGHWAY385 STE A OELRICHS, SD 57763-7828 Business Telephone #: ((o())) SUS-US75 Place of business is located in a municipality? [] Yes [] No County: Fall River Do you own [X] or lease [] this property? (Check one) Are real property taxes paid to date? [M] Yes [] No Are you of good moral character having never been convicted of a felony? [M] Yes [] No D. Legal description of licensed premise:
Package Delivery Hunting Preserve Other Is this License in active use? [] Yes [] No Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? [] Yes [X] No If Yes, please list on the back page	E. State Sales Tax Number: 1034-4794-ST
G. CERTIFICATE: The undersigned applicant certifies under the that the said applicant complies with all of the statutory require agrees to permit agents of the Department of Revenue access to and agrees this application shall constitute a contract between a	the licensed premises and records as provided in SDCL 35-2-2.1, applicant and the State of South Dakota entitling the same or any time for the purpose of enforcing the provisions of Title 35 SDCL.
	(7) days after official publication. The governing body by majority certifies that requirements as to location and suitability of premises
(Seal) Mayor or Chairman	Renewal - no public hearing held Amount of fee collected with application \$ 1, 400.

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Name of corporation/partn	ership/LP/LLC_A	5 GEARS, LL	<u>C</u>			
Address of office and prine	cipal place of business of	corporation/partnership/LP	/LLC 3 <u>(</u>	1387 H	wy 385 0s	EURICHS SD
Are all managing officers of this corporation/partnership/LP/LLC of good moral character having never been convicted of a felony? [X] Yes [] No						
Name, title of office, occupation	n and address of each of t Office	he officers/owners of the co	orporation		p, LP, or LLC: Occupation	
Shannon Freidel	Owner	30387 HWY. 38	35		nuner/ope	rator
Russell Hines	OLLMEN	NELRICHS, SD			unev/opera	Jov
Name of any officers, directors beverage license:	, partners or stockholders	of applicant having a finan	cial intere	est or capita	l stock in any oth	er alcoholic
Name	Type of License, Licen	se Number, Financial Intere	est Held,	and Address	s of Business Loc	ation
Where and with whom are all o accounts receivable, etc?	company records kept, suc	h as charter, by-laws, minu	tes, accou	ints, notes p	ayable, and notes	and
· · · · · · · · · · · · · · · · · · ·	y 385 DELRICH	3 SD 57763				
	•	,				
to the transfer of stock and price provisions of said regulation o stockholder thereof, or by anyou issued pursuant to and in relian	by will comply with all proper approval of the transfer or failure to comply therewence interested in said complete on this application, or ers and directors of the application that there exists no	ith, whether by the undersign pany, shall constitute cause for refusal to renew such libicant company acknowled financial arrangement conc	ary of Regned corp for revocense upon lge that the cerning the	venue and voration, par ation or sus on expiration e within sur is or any oth	violation of any o tnership/LP/LLC pension of any li thereof. oplement applicater alcoholic beve	f the or by any cense ion form is erage license
Signature of Authorized Off	icer/Director/Partner		Date			
Chammons.	Kanin		6	Oc+	2025	

Date Received	License No. <u>PL-27777</u>
Date Issued	2026 License No. PL-27777
A. Corporation, LLC, or Sole Proprietor Name and Mailing Address	Werage License Application RECEIVED B. Doing Business As Name and Physical Address OCT 1 6 2025
THE BLACK HILLS SALOON COMPANY LLC 29098 HIGHWAY385 OELRICHS, SD 57763-7829 Owner's Telephone#:	Lic # PL-27777 FORNEY'S STANDARD SERVICE 29098 HIGHWAY385 OELRICHS, SD 57763-7829 Business Telephone #: () - 5 3 5 - 2 161 Place of business is located in a municipality? [] Yes [] No County: Fall River Do you own [] T lease [] This property? (Check one) Are real property taxes paid to date? [] Yes [] No Are you of good moral character having never been convicted of a felony? [] Yes [] No D. Legal description of licensed premise:
Package Delivery Hunting Preserve Other Is this License in active use? [MYes []No Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses?	W Y2 SE Y4 Sec 12 Twp 10, RG7 E. State Sales Tax Number: 1042-4361-ST
that the said applicant complies with all of the statutory requir agrees to permit agents of the Department of Revenue access t and agrees this application shall constitute a contract between	F. New license?Transfer? (\$150) Re-issuance? the penalties of perjury that all statements herein are true and correct; ements for the class of license being applied for and in addition to the licensed premises and records as provided in SDCL 35-2-2.1, applicant and the State of South Dakota entitling the same or any sy time for the purpose of enforcing the provisions of Title 35 SDCL, Signature
H. APPROVAL OF LOCAL GOVERNING BODY- Notice of happlication was held Nov. (*, 2025), not less than SEVEN	nearing was published <u>0ct.30, 2025</u> . Public hearing on the V(7) days after official publication. The governing body by majority d certifies that requirements as to location and suitability of premises
For Local Government Use (Seal)	Renewal - no public hearing held Amount of fee collected with application Amount of fee retained \$ 500.00 Forwarded with application \$
Mayor or Chairman	

Name of corporation/partnership/LP/LLC The Black Hills Salon Co. LLC	
Address of office and principal place of business of corporation/partnership/LP/LLC 29094 Hay 385 Oct	rid
Are all managing officers of this corporation/partnership/LP/LLC of good moral character having never been convicted of a felony? [Yes [] No	D
Name, title of office, occupation and address of each of the officers/owners of the corporation, partnership, LP, or LLC: Name Office Address Occupation Eric (Former Owner PO Box (0) Oxlvichs SD Box own	<i>⊾1</i> —
Name of any officers, directors, partners or stockholders of applicant having a financial interest or capital stock in any other alcoholic beverage license:	-
Name Type of License, License Number, Financial Interest Held, and Address of Business Location Exic L forcey PL-7729, 100% 507 Main St Oelrichs 1 RC-6209 "1"	<u>-</u> D
Where and with whom are all company records kept, such as charter, by-laws, minutes, accounts, notes payable, and notes and accounts receivable, etc? 29094 Hay 385 Oulrich SD SM63 with Eric L Forcey	
With signature the applicant agrees to the following: That the applicant company will comply with all provisions of ARSD chapter No. 64:75:02 of the Department of Revenue, relating to the transfer of stock and prior approval of the transfer of such stock by the Secretary of Revenue and violation of any of the provisions of said regulation or failure to comply therewith, whether by the undersigned corporation, partnership/LP/LLC or by any stockholder thereof, or by anyone interested in said company, shall constitute cause for revocation or suspension of any license issued pursuant to and in reliance on this application, or for refusal to renew such license upon expiration thereof. We the undersigned officers and directors of the applicant company acknowledge that the within supplement application form is true and correct in every respect and that there exists no financial arrangement concerning this or any other alcoholic beverage license than that expressly set forth above. If company stock is to be transferred we ask for approval of such voluntary stock transfer.	
Signature of Authorized Officer/Director/Partner Date	

RECEIVED

SEP 2 9 2025

Date Received	License No. PL-27716				
Date Issued	2020				
Uniform Alcoholic Bev A. Corporation, LLC, or Sole Proprietor Name and Mailing Address	erage License Application B. Doing Business As Name and Physical Address				
H & H ENTERPRISES INC 2508 S CAROLYN AVE SIOUX FALLS, SD 57106 Owner's Telephone#: (605) 274-2540 C. Indicate the class of license being applied for	Lic # PL-27716 COFFEE CUP FUEL STOP #9 - HOT SPRINGS 27638 US HIGHWAY385 HOT SPRINGS, SD 57747-7249 Business Telephone #: (605) 745-4215				
(submit separate application for each class of license). Retail (on-sale) Liquor	Place of business is located in a municipality? [] Yes [X] No County: Fall River				
Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor X Package (off-sale) Liquor Retail (on-off sale) Wine and Cider Retail (on-off sale) Malt Beverage & SD Farm Wine	Do you own [X] or lease [] this property? (Check one) Are real property taxes paid to date? [X] Yes [] No Are you of good moral character having never been convicted of a felony? [X] Yes [] No D. Legal description of licensed premise:				
Package Delivery Hunting Preserve Other Is this License in active use? [x] Yes [] No	Tract A-1, Tract A-2, (excludes Lot H1), and tract B in the NW 1/4 of Section 34, Twsp 7S, Range 6E, Fall River County, Hot Springs, South Dakota, according to the recorded plat therof				
Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? [X] Yes [] No If Yes, please list on the back page	E. State Sales Tax Number: 1031-5042-ST F. New license? Transfer? (\$150) Re-issuance? X				
that the said applicant complies with all of the statutory require agrees to permit agents of the Department of Revenue access to and agrees this application shall constitute a contract between a	the licensed premises and records as provided in SDCL 35-2-2.1, applicant and the State of South Dakota entitling the same or any time for the purpose of enforcing the provisions of Title 35 SDCL,				
H. APPROVAL OF LOCAL GOVERNING BODY- Notice of hearing was published 10th 30, 2025. Public happlication was held Nov. 6, 2025, not less than SEVEN (7) days after official publication. The governing body					
vote recommends the approval and granting of this license and applicant have been reviewed and conform to the requiren	certifies that requirements as to location and suitability of premises nents of local and South Dakota law.				
For Local Government Use (Seal)	Renewal - no public hearing held Amount of fee collected with application \$500.				
Mayor or Chairman	* *				

If disannroved, endorse reason thereon and return to applicant

Name of corporation/partnership/LP/LLC H&H Enterprises, Inc.
--

Address of office and principal place of business of corporation/partnership/LP/LLC 2508 S Carolyn Ave, Sioux Falls, SD 57106

Are all managing officers of this corporation/partnership/LP/LLC of good moral character having never been convicted of a felony? [X] Yes [] No

Name, title of office, occupation and address of each of the officers/owners of the corporation, partnership, LP, or LLC:

Name	Office	Address	Occupation
Tom Heinz	President	353 W Sawgrass Tr, Dakota Dunes, SD 57049	Owner/Operator
Chris Heinz	Vice President		Director of Operations & Finance
Ericka Schapekahm	Director	215 Court St, Vermillion, SD 57049	Human Resources Director
Jane Heinz	Director	353 W Sawgrass Tr. Dakota Dunes, SD 57049	Director of Inside Sales
Richard Heinz	Director	3201 S Covell Ave, Sioux Falls, SD 57105	Truck Driver
Taite Heinz	Director	4601 S Dunlap Ave, Sioux Falls, SD 57106	Operations Coordinator

Name of any officers, directors, partners or stockholders of applicant having a financial interest or capital stock in any other alcoholic beverage license:

Name	Type of Licer	cense, License Number, Financial Interest Held, and Address of Business Location		
See above	Beer:	RB-3217 47051 SD Hwy 50, Burbank, SD 57010 RB-2632 27638 US Hwy 385, Hot Springs, SD 57747		
		RB-2824 45789 US Hwy 12, Summit, SD 57266		
	Wine:	RW-19559 45789 US Hwy 12, Summit, SD 57266		
		RW-19495 47051 SD Hwy 50, Burbank, SD 57010 RW-19689 27638 US Hwy 385, Hot Springs, SD 57747		
	On-sale Liquor:	RL-6192 27638 US Hwy 385, Hot Springs, SD 57747		
	Off-sale Liquor:	PL-27716 27638 US Hwy 385, Hot Springs, SD 57747 PL-27717 47051 SD Hwy 50, Burbank, SD 57010		
	Retail Alcohol Bev:	AB-02825 620 Mitchell Ave, Steele, ND 58482		

Where and with whom are all company records kept, such as charter, by-laws, minutes, accounts, notes payable, and notes and accounts receivable, etc?

2508 S Carolyn Ave, Sioux Falls, SD 57106

With signature the applicant agrees to the following:

That the applicant company will comply with all provisions of ARSD chapter No. 64:75:02 of the Department of Revenue, relating to the transfer of stock and prior approval of the transfer of such stock by the Secretary of Revenue and violation of any of the provisions of said regulation or failure to comply therewith, whether by the undersigned corporation, partnership/LP/LLC or by any stockholder thereof, or by anyone interested in said company, shall constitute cause for revocation or suspension of any license issued pursuant to and in reliance on this application, or for refusal to renew such license upon expiration thereof.

We the undersigned officers and directors of the applicant company acknowledge that the within supplement application form is true and correct in every respect and that there exists no financial arrangement concerning this or any other alcoholic beverage license than that expressly set forth above. If company stock is to be transferred we ask for approval of such voluntary stock transfer.

Signature of Authorized Officer/Director/Partner	Date	
Chata N. A.	9 24 25	

Data

RECEIVED

SEP 2 9 2025

Date Received	2026 License No. RL-6192
Date Issued	2020
Uniform Alcoholic Bev A. Corporation, LLC, or Sole Proprietor Name and Mailing Address	verage License Application B. Doing Business As Name and Physical Address
H & H ENTERPRISES INC 2508 S CAROLYN AVE SIOUX FALLS, SD 57106	Lic # RL-6192 COFFEE CUP FUEL STOP #9 - HOT SPRINGS 27638 US HIGHWAY385 HOT SPRINGS, SD 57747-7249
Owner's Telephone#: (6057454215) (605) 274-2540 C. Indicate the class of license being applied for (submit separate application for each class of license).	Business Telephone #. (605) 745-4215 Place of business is located in a municipality? [] Yes [X] No
X Retail (on-sale) Liquor Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Package (off-sale) Liquor Retail (on-off sale) Wine and Cider Retail (on-off sale) Malt Beverage & SD Farm Wine	County: Fall River Do you own [X] or lease [] this property? (Check one) Are real property taxes paid to date? [X] Yes [] No Are you of good moral character having never been convicted of a felony? [X] Yes [] No D. Legal description of licensed premise:
Package Delivery Hunting Preserve Other Is this License in active use? [X] Yes [] No	Tract A-1, Tract A-2, (excludes Lot H1), and tract B in the NW 1/4 of Section 34, Twsp 7S, Range 6E, Fall River County, Hot Springs, South Dakota, according to the recorded plat therof
Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? [X] Yes [] No If Yes, please list on the back page	E. State Sales Tax Number: 1031-5042-ST F. New license?Transfer? (\$150) Re-issuance? X
that the said applicant complies with all of the statutory require agrees to permit agents of the Department of Revenue access the and agrees this application shall constitute a contract between a peace officers to inspect the premises, books and records at any as amended. Date 9/24/25 Print Name Christopher D Heim	o the licensed premises and records as provided in SDCL 35-2-2.1, applicant and the State of South Dakota entitling the same or any y time for the purpose of enforcing the provisions of Title 35 SDCL, nz Signature
	I (7) days after official publication. The governing body by majority d certifies that requirements as to location and suitability of premises
For Local Government Use (Seal)	Renewal - no public hearing held Amount of fee collected with application \$ 1,400.00 Amount of fee retained \$ 1,400.00 Forwarded with application \$ 5
Mayor or Chairman	

Name of corporation/partnership/LP/LLC H&H Enterprises, Inc.	
--	--

Director

Address of office and principal place of business of corporation/partnership/LP/LLC 2508 S Carolyn Ave, Sioux Falls, SD 57106

Are all managing officers of this corporation/partnership/LP/LLC of good moral character having never been convicted of a felony? [X] Yes [] No

Name, title of office, occupation and address of each of the officers/owners of the corporation, partnership, LP, or LLC: Name Office Address Occupation Tom Heinz President 353 W Sawgrass Tr, Dakota Dunes, SD 57049 Owner/Operator Chris Heinz Vice President 1319 N Olde Wagon Rd, Sioux Falls, SD 57110 Director of Operations & Finance 215 Court St, Vermillion, SD 57049 Ericka Schapekahm Director Human Resources Director Jane Heinz Director 353 W Sawgrass Tr. Dakota Dunes SD 57049 Director of Inside Sales Richard Heinz Director 3201 S Covell Ave. Sioux Falls, SD 57105 Truck Driver

4601 S Dunlap Ave, Sioux Falls, SD 57106

Operations Coordinator

Name of any officers, directors, partners or stockholders of applicant having a financial interest or capital stock in any other alcoholic beverage license:

Name Type of License, License Number, Financial Interest Held, and Address of Business Location Beer: RB-3217 47051 SD Hwy 50, Burbank, SD 57010 See above RB-2632 27638 US Hwy 385, Hot Springs, SD 57747 RB-2824 45789 US Hwy 12, Summit, SD 57266 Wine: RW-19559 45789 US Hwy 12, Summit, SD 57266 RW-19495 47051 SD Hwy 50, Burbank, SD 57010 RW-19689 27638 US Hwy 385, Hot Springs, SD 57747 On-sale Liquor: RL-6192 27638 US Hwy 385, Hot Springs, SD 57747 PL-27716 27638 US Hwy 385, Hot Springs, SD 57747 PL-27717 47051 SD Hwy 50, Burbank, SD 57010 Off-sale Liquor: Retail Alcohol Bev: AB-02825 620 Mitchell Ave, Steele, ND 58482

Where and with whom are all company records kept, such as charter, by-laws, minutes, accounts, notes payable, and notes and accounts receivable, etc?

2508 S Carolyn Ave, Sioux Falls, SD 57106

Taite Heinz

With signature the applicant agrees to the following:

That the applicant company will comply with all provisions of ARSD chapter No. 64:75:02 of the Department of Revenue, relating to the transfer of stock and prior approval of the transfer of such stock by the Secretary of Revenue and violation of any of the provisions of said regulation or failure to comply therewith, whether by the undersigned corporation, partnership/LP/LLC or by any stockholder thereof, or by anyone interested in said company, shall constitute cause for revocation or suspension of any license issued pursuant to and in reliance on this application, or for refusal to renew such license upon expiration thereof.

We the undersigned officers and directors of the applicant company acknowledge that the within supplement application form is true and correct in every respect and that there exists no financial arrangement concerning this or any other alcoholic beverage license than that expressly set forth above. If company stock is to be transferred we ask for approval of such voluntary stock transfer.

Signature of Authorized Officer/Director/Partner	Date	
Contro D. D.	9/24/25	

RECEIVED

SEP 2 9 2025

Date Received	License No. <u>RW-19689</u>
Date Issued	2026 License No. RW-19689
	verage License Application B. Doing Business As Name and Physical Address
H & H ENTERPRISES INC 2508 S CAROLYN AVE SIOUX FALLS, SD 57106 Owner's Telephone#: (605) 274-2540	Lic # RW-19689 COFFEE CUP FUEL STOP #9 - HOT SPRINGS 27638 US HIGHWAY385 HOT SPRINGS, SD 57747-7249 Business Telephone #: (605) 745-4215
C. Indicate the class of license being applied for (submit separate application for each class of license). Retail (on-sale) Liquor	Place of business is located in a municipality? [] Yes [x] No County: Fall River
Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Package (off-sale) Liquor X Retail (on-off sale) Wine and Cider Retail (on-off sale) Malt Beverage & SD Farm Wine	Do you own [x] or lease [] this property? (Check one) Are real property taxes paid to date? [x] Yes [] No Are you of good moral character having never been convicted of a felony? [x] Yes [] No D. Legal description of licensed premise:
Package Delivery Hunting Preserve Other Is this License in active use? [X] Yes [] No	Tract A-1, Tract A-2, (excludes Lot H1), and tract B in the NW 1/4 of Section 34, Twsp 7S, Range 6E, Fall River County, Hot Springs, South Dakota, according to the recorded plat therof
Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? [X] Yes [] No If Yes, please list on the back page	E. State Sales Tax Number: 1031-5042-ST F. New license? Transfer? (\$150) Re-issuance?X
that the said applicant complies with all of the statutory require agrees to permit agents of the Department of Revenue access to and agrees this application shall constitute a contract between a peace officers to inspect the premises, books and records at any as amended.	the penalties of perjury that all statements herein are true and correct; ments for the class of license being applied for and in addition to the licensed premises and records as provided in SDCL 35-2-2.1, applicant and the State of South Dakota entitling the same or any time for the purpose of enforcing the provisions of Title 35 SDCL,
H. APPROVAL OF LOCAL GOVERNING BODY- Notice of he application was held Nov. 6, 2025 not less than SEVEN	earing was published Oct. 30, 2025. Public hearing on the (7) days after official publication. The governing body by majority
vote recommends the approval and granting of this license and and applicant have been reviewed and conform to the requiren	certifies that requirements as to location and suitability of premises nents of local and South Dakota law.
(Seal) Mayor or Chairman	Renewal - no public hearing held Amount of fee collected with application \$500.00 Amount of fee retained \$500.00 Forwarded with application \$500.00
Mayor or Chairman	

If disannroved, endorse reason thereon and return to applicant

Name of corporation/partnership/LP/LLC H&H Enterprises, Inc.

Address of office and principal place of business of corporation/partnership/LP/LLC 2508 S Carolyn Ave, Sioux Falls, SD 57106

Are all managing officers of this corporation/partnership/LP/LLC of good moral character having never been convicted of a felony? [X] Yes [] No

Name, title of office, occupation and address of each of the officers/owners of the corporation, partnership, LP, or LLC:

Name	Office	Address	Occupation
Tom Heinz	President	353 W Sawgrass Tr, Dakota Dunes, SD 57049	Owner/Operator
Chris Heinz	Vice President	1319 N Olde Wagon Rd, Sioux Falls, SD 57110	
Ericka Schapekahm	Director	215 Court St, Vermillion, SD 57049	Human Resources Director
Jane Heinz	Director	353 W Sawgrass Tr. Dakota Dunes, SD 57049	Director of Inside Sales
Richard Heinz	Director	3201 S Covell Ave, Sioux Falls, SD 57105	Truck Driver
Taite Heinz	Director	4601 S Dunlap Ave, Sioux Falls, SD 57106	Operations Coordinator

Name of any officers, directors, partners or stockholders of applicant having a financial interest or capital stock in any other alcoholic beverage license:

Name	Type of License, License Number, Financial Interest Held, and Address of Business Location		
See above	Beer:	RB-3217 47051 SD Hwy 50, Burbank, SD 57010 RB-2632 27638 US Hwy 385, Hot Springs, SD 57747	
		RB-2824 45789 US Hwy 12, Summit, SD 57266	
	Wine:	RW-19559 45789 US Hwy 12, Summit, SD 57266	
		RW-19495 47051 SD Hwy 50, Burbank, SD 57010 RW-19689 27638 US Hwy 385, Hot Springs, SD 57747	
	On-sale Liquor:	RL-6192 27638 US Hwy 385, Hot Springs, SD 57747	
	Off-sale Liquor:	PL-27716 27638 US Hwy 385, Hot Springs, SD 57747 PL-27717 47051 SD Hwy 50, Burbank, SD 57010	
	Retail Alcohol Bev:	AB-02825 620 Mitchell Ave, Steele, ND 58482	

Where and with whom are all company records kept, such as charter, by-laws, minutes, accounts, notes payable, and notes and accounts receivable, etc?

2508 S Carolyn Ave, Sioux Falls, SD 57106

With signature the applicant agrees to the following:

That the applicant company will comply with all provisions of ARSD chapter No. 64:75:02 of the Department of Revenue, relating to the transfer of stock and prior approval of the transfer of such stock by the Secretary of Revenue and violation of any of the provisions of said regulation or failure to comply therewith, whether by the undersigned corporation, partnership/LP/LLC or by any stockholder thereof, or by anyone interested in said company, shall constitute cause for revocation or suspension of any license issued pursuant to and in reliance on this application, or for refusal to renew such license upon expiration thereof.

We the undersigned officers and directors of the applicant company acknowledge that the within supplement application form is true and correct in every respect and that there exists no financial arrangement concerning this or any other alcoholic beverage license than that expressly set forth above. If company stock is to be transferred we ask for approval of such voluntary stock transfer.

Signature of Authorized Officer/Director/Partner	Date

•	* -		4
C(-1)	a.o.		9/24/25
V XX. X'c			

Date Received	2026 License No. RL-3/11
Date Issued	RECEIVE
Uniform Alcoholic Bev A. Corporation, LLC, or Sole Proprietor Name and Mailing Address	erage License Application B. Doing Business As Name and Physical Address OCT 1 6 2025
TTT TAVERNS LLC 13393 LAKE VISTA DR HOT SPRINGS, SD 57747-5000	Lic # RL-5711 PIRATES PUB 28298 ANGOSTURA RD HOT SPRINGS, SD 57747-7264
Owner's Telephone#: (605) 484-2706	Business Telephone #: 605 - 745 - 5055
C. Indicate the class of license being applied for (submit separate application for each class of license).	Place of business is located in a municipality? []Yes []No
X Retail (on-sale) Liquor	County: Fall River
Retail (on-sale) Liquor - Restaurant	Do you own [] or lease [] this property? (Check one)
Convention Center (on-sale) Liquor	Are real property taxes paid to date? [] Yes [] No
Package (off-sale) Liquor Retail (on-off sale) Wine and Cider	Are you of good moral character having never been convicted of a felony? [] Yes [] No
Retail (on-off sale) Malt Beverage & SD Farm Wine	D. Legal description of licensed premise:
Package Delivery Hunting Preserve Other	Angostura Highlands Subd, Lot 1, Section 35, Twp 85, Rge 6E, BHM, Tall River Co, SD
Is this License in active use? [] Yes [] No	<u> </u>
Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? [XYes [] No If Yes, please list on the back page	E. State Sales Tax Number: 1036-2458-ST F. New license?Transfer? (\$150) Re-issuance? X
that the said applicant complies with all of the statutory require agrees to permit agents of the Department of Revenue access t and agrees this application shall constitute a contract between	the penalties of perjury that all statements herein are true and correct; ements for the class of license being applied for and in addition to the licensed premises and records as provided in SDCL 35-2-2.1, applicant and the State of South Dakota entitling the same or any time for the purpose of enforcing the provisions of Title 35 SDCL,
H. APPROVAL OF LOCAL GOVERNING BODY- Notice of h	_
vote recommends the approval and granting of this license and applicant have been reviewed and conform to the require	d certifies that requirements as to location and suitability of premises ments of local and South Dakota law.
For Local Government Use (Seal)	Renewal - no public hearing held Amount of fee collected with application \$ 1,400.00 Amount of fee retained \$ 1,400.00 Forwarded with application \$ 1,400.00
Mayor or Chairman	

Name of corporation/partnership/LP/LLC 1777 /AVERNE LLC	
Address of office and principal place of business of corporation/partnership/LP/LLC 13393 lake Visio De Hot Stories	MS SP
Are all managing officers of this corporation/partnership/LP/LLC of good moral character having never been convicted of a felony? Yes [] No	_
Name, title of office, occupation and address of each of the officers/owners of the corporation, partnership, LP, or LLC: Name Office Address Occupation	
Scott HAISIE TARGER MANAGING Member 13393 Jake Vista DR. Business OWNER 11.5. SP 57747	
Name of any officers, directors, partners or stockholders of applicant having a financial interest or capital stock in any other alcoholeverage license:	olic
Name Type of License, License Number, Financial Interest Held, and Address of Business Location	
Where and with whom are all company records kept, such as charter, by-laws, minutes, accounts, notes payable, and notes and accounts receivable, etc?	
Scott HARVID TRECKER (Sole Member/Managing Member/Registered Agent) 13393 lake Vista Dr.	
Hot SPRM9S SD 57747	
With signature the applicant agrees to the following: That the applicant company will comply with all provisions of ARSD chapter No. 64:75:02 of the Department of Revenue, related to the transfer of stock and prior approval of the transfer of such stock by the Secretary of Revenue and violation of any of the provisions of said regulation or failure to comply therewith, whether by the undersigned corporation, partnership/LP/LLC or by an stockholder thereof, or by anyone interested in said company, shall constitute cause for revocation or suspension of any license issued pursuant to and in reliance on this application, or for refusal to renew such license upon expiration thereof. We the undersigned officers and directors of the applicant company acknowledge that the within supplement application form true and correct in every respect and that there exists no financial arrangement concerning this or any other alcoholic beverage lice than that expressly set forth above. If company stock is to be transferred we ask for approval of such voluntary stock transfer.	ny n is
Signature of Authorized Officer/Director/Partner Date	
Suth At 300 kg - 10/16/25	

Uniform Alcoholic Beverage License Application A. Corporation, LLC, or Sole Proprietor Name and Mailing Address TTT TAVERNS LLC 13393 LAKE VISTA DR HOT SPRINGS, SD 57747-5000 Owner's Telephone#: (605) 484-2706 C. Indicate the class of license being applied for (submit separate application for each class of license) Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Retail (on-off sale) Wine and Cider Retail (on-off sale) Wine and Cider Retail (on-off sale) Mail Beverage & SD Farm Wine Package (off-sale) Liquor Retail (on-off sale) Mail Beverage & SD Farm Wine Package Delivery Hunting Preserve Other Styles [] No Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? Yes [] No If Yes, please list on the back page G. CERTIFICATE The undersigned applicant certifies under the penalties of perjury that all statements berein a reun and correct; that the said applicant complies with all of the statutory requirements for the class of license being applied for and in addition agrees to permit agents of the Department of Revenue access to the licensed premises and records as provided in SDCI. 352-22. H. APPROVAL OF LOCAL GOVERNING BODY- Notice of hearing was published Date International Provisions of Title 35 SDCL. and apprects intermediate the approval and granting of this license and certifies and exciling the approval and granting of this license and certifies the requirements of local and South Dakota law. For Local Government Use Renewal - no public hearing held Amount of Received with application as 500.022 Amount of Received Amount of Recei	Date Received	2026 License No. PL-2/888
A. Corporation, LLC, or Sole Proprietor Name and Mailing Address B. Doing Business As Name and Physical Address CT 1 6 200 ITT TAVERNS LLC 13393 LAKE VISTA DR HOT SPRINGS, SD 57747-2600 Cover's Telephone#: (605) 484-2706 C. Indicate the class of license being applied for (submit separate application for each class of license). Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Retail (on-off sale) Wine and Cider Package Delivery Hunting Preserve Other Is this License in active use? Mayes [] No Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? Wayes [] No To you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? Wayes [] No I Yes, please list on the back page G. CERTIFICATE The undersigned applicant certifies under the penalties of perjury that all statements herein are true and correct, that the said applicant complies with all of the statutory requirements for the class of license being applied for and in addition agrees to permit agents of the Department of Revenue access to the licensed premises and records as provided in SDCL 35-2-1, and agrees the permit agents of the Revenue access to the licensed premises and records as provided in SDCL 35-2-21, and agrees to permit agents of the Department of Revenue access to the licensed premises and records as provided in SDCL 35-2-21, and agrees to permit agents of the Department of the termines are true and correct, the three states are provided in SDCL 35-2-21, and agrees to permit agents of the Department of the termines are records as provided in SDCL 35-2-21, and agrees to permit agents of the Department of the bust	Date Issued	
PIRATES PUB 28298 ANGOSTURA RD HOT SPRINGS, SD 57747-5000 Each of business is located in a municipality? [] Yes [] No Place of business is located in a municipality? [] Yes [] No County: Fall River Do you own [Mor lease [] this property? (Check one) Are real property taxes paid to date? [Myes [] No County: Fall River Do you own [Mor lease [] this property? (Check one) Are real property taxes paid to date? [Myes [] No Are you of good moral character having never been convicted of a felony? [Myes [] No D. Legal description of licensed premise: Package Oelivery Hunting Preserve Other Other State Sales Tax Number: 1036-2458-ST F. New licenses? [Myes [] No If Yes please list on the back page F. New license? [Myes adapticant complies with all of the statutory requirements for the class of license being applied for and in addition agrees to permit agents of the Department of Revenue access to the licensed premises and records as provided in SDC1. 352-21, and agrees this application abal constitute a contract between applicant and the State of South Dakote antitling the same or any peace officers to inspect the premises, books and records at any time for the purpose of enforcing the provisions of Title 35 SDC1, as amended. Business Telephone # (605) 484-2706 County: Fall River Do you own [Mor lease [] this property? (Check one) Are real property taxes paid to date? [Myes [] No You of good moral character having never been convicted of a felony? [Myes [] No Do you own [Mor lease [] this property? (Check one) Are real property taxes paid to date? [Myes [] No Do you own [Mor lease [] this property? (Check one) Are real property taxes paid to date? [Myes [] No Do you own [Mor lease [] this property? (Check one) Are real property taxes paid to date? [Myes [] No Do you own [Mor lease [] this property? (Check one) Are sale property? (Check	A. Corporation, LLC, or Sole Proprietor Name and	erage License Application
C. Indicate the class of license being applied for (submit separate application for each class of license). Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Retail (on-off sale) Wine and Cider Package Delivery Hunting Preserve Other Is this License in active use? Are [] No Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? Yes [] No If Yes, please list on the back page G. CERTIFICATE The undersigned applicant certifies under the penalties of perjury that all statements herein are true and correct; that the said applicant complies with all of the statutory requirements for the class of license being applied for and in addition agrees to permit agents of the Departnent of Revenue access to the licensed premises and records as an encord. Date 10/11/132 Print Name Arthur Access to the constitute a contract between application was held Nov. 12, 2025. not less than SEVEN (7) days after official publication. The governing body by majority vote recommends the approval and granting of this license and certifies that requirements as to location and suitability of premises and applicant have been reviewed and conform to the requirements of local and South Dakota law. For Local Government Use Renewal - no public hearing held Amount of fee retained. \$ 500.22	13393 LAKE VISTA DR	PIRATES PUB 28298 ANGOSTURA RD
Retail (on-sale) Liquor County: Fall River Do you own or lease [] this property? (Check one)	Owner's Telephone#: (605) 484-2706	Business Telephone #: (605) 484-2706
Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Retail (on-off sale) Wine and Cider Retail (on-off sale) Wine and Cider Retail (on-off sale) Malt Beverage & SD Farm Wine Package Delivery Hunting Preserve Other Is this License in active use? Ayes [] No Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? Yes [] No If Yes, please list on the back page G. CERTIFICATE The undersigned applicant certifies under the penalties of perjury that all statements herein are true and correct; that the said applicant complies with all of the statutory requirements for the class of license being applied for and in addition agrees to permit agents of the Department of Revenue access to the licensed premises and records as provided in SDCL 352-21, as amended. Date Ioluly Print Name Por Local Government Use Do you own [] or lease [] this property? (Check one) Are real property taxes paid to date? [Yes [] No Are you of good moral character having never been convicted of a felony? [Yes [] No Are you of good moral character having never been convicted of a felony? [Yes [] No Are you of good moral character having never been convicted of a felony? [Yes [] No Are you of good moral character having never been convicted of a felony? [] No For Local Government Use Are you of good moral character having never been convicted of a felony? [] No Are you of good moral character having never been convicted of a felony? [] No Are you of good moral character having never been convicted of a felony? [] No For Local Government Use Do you or good moral character having never been convicted of a felony? [] No Are you of good moral character having never been convicted of a felony? [] No Are you of good moral character having never been convicted of a felony? [] No Are you of good moral character having never been convicted of a felony? [] No For Local Government Use Are tall poped market part and to date? [] No Are yo	(submit separate application for each class of license).	
that the said applicant complies with all of the statutory requirements for the class of license being applied for and in addition agrees to permit agents of the Department of Revenue access to the licensed premises and records as provided in SDCL 35-2-2.1, and agrees this application shall constitute a contract between applicant and the State of South Dakota entitling the same or any peace officers to inspect the premises, books and records at any time for the purpose of enforcing the provisions of Title 35 SDCL, as amended. Date 10/16/35 Print Name Soll H. Aealer Signature Signature Print Name P	Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Package (off-sale) Liquor Retail (on-off sale) Wine and Cider Retail (on-off sale) Malt Beverage & SD Farm Wine Package Delivery Hunting Preserve Other Is this License in active use? Yes [] No Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? Yes [] No If Yes, please list on the back page	Do you own [or lease [] this property? (Check one) Are real property taxes paid to date? [Yes [] No Are you of good moral character having never been convicted of a felony? [Yes [] No D. Legal description of licensed premise: ANGOSTORICA Highland Subd. Lot I, Section 35 Twp: 85, Rge 6E, BHM, FALL RIVER Co., SD E. State Sales Tax Number: 1036-2458-ST F. New license?Transfer? (\$150) Re-issuance? X
vote recommends the approval and granting of this license and certifies that requirements as to location and suitability of premises and applicant have been reviewed and conform to the requirements of local and South Dakota law. For Local Government Use Renewal - no public hearing held Amount of fee collected with application Amount of fee retained \$ 500.000	that the said applicant complies with all of the statutory require agrees to permit agents of the Department of Revenue access the and agrees this application shall constitute a contract between peace officers to inspect the premises, books and records at an as amended. Date 10/16/25 Print Name 2017 H. Aequation Approval of LOCAL GOVERNING BODY- Notice of the premise of the statutory requirements of the statutory requirements of the premise of the statutory requirements of the premise of the statutory requirements of the premise of the pre	ements for the class of license being applied for and in addition of the licensed premises and records as provided in SDCL 35-2-2.1, applicant and the State of South Dakota entitling the same or any yetime for the purpose of enforcing the provisions of Title 35 SDCL, Signature Learning was published Oct. 30,2035 Public hearing on the
Amount of fee collected with application \$500.55 Amount of fee retained \$500.55	vote recommends the approval and granting of this license an	d certifies that requirements as to location and suitability of premises
Mayor or Chairman	(Seal)	Amount of fee collected with application \$500

Name of corporation/par	rtnership/LP/LLC	TAVERNS LLC	
			3 /alle VistaDr, H.S.SD 5774
	s of this corporation/partnership/	/LP/LLC of good moral character ha	
Name, title of office, occupated Name Scott Harold TAec16:	Office	fficers/owners of the corporation, par Address / 3393 /aK2 V/SJa Dr- // S. SD 57747	Thership, LP, or LLC: Occupation Rusiness Owner
Name of any officers, director beverage license:	ors, partners or stockholders of ap	oplicant having a financial interest or	capital stock in any other alcoholic
Name	Type of License, License No	umber, Financial Interest Held, and A	Address of Business Location
	- · ·	charter, by-laws, minutes, accounts, i	• •
<i></i>	ers themself in high	19 men = 10 / 10/13/1365 / 19/16/	14.5. SD 57747
With signature the applicant. That the applicant composite to the transfer of stock and provisions of said regulation stockholder thereof, or by any issued pursuant to and in reliable to the undersigned office true and correct in every respective.	nt agrees to the following: any will comply with all provision rior approval of the transfer of su or failure to comply therewith, we yone interested in said company, ance on this application, or for re- cers and directors of the applicant ect and that there exists no finan		The Department of Revenue, relating e and violation of any of the on, partnership/LP/LLC or by any or suspension of any license paration thereof. The department of Revenue, relating e and violation of any of the paration of any license of any other alcoholic beverage license
Signature of Authorized Of	fficer/Director/Partner	Date	
S # 11/5		<i>i</i>	1

Date Received	License No. RW-30555
Date Issued	RECEIVE
Uniform Alcoholic Bev A. Corporation, LLC, or Sole Proprietor Name and Mailing Address	erage License Application B. Doing Business As Name and Physical Address OCT 1 7 2025
BUFFALO DREAMER RESTAURANT LLC PO BOX 291 BUFFALO GAP, SD57722-0291	Lic # RW-30555 BUFFALO DREAMER RESTAURANT 13006 FALL RIVER RD HOT SPRINGS, SD 57747
Owner's Telephone#: (303) 915-8731	Business Telephone #: (303) 915-8731
C. Indicate the class of license being applied for (submit separate application for each class of license).	Place of business is located in a municipality? [] Yes No
Retail (on-sale) Liquor	County: Fall River
Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Package (off-sale) Liquor X Retail (on-off sale) Wine and Cider Retail (on-off sale) Malt Beverage & SD Farm Wine	Do you own [] or lease [] this property? (Check one) Are real property taxes paid to date? [] Yes [] No Are you of good moral character having never been convicted of a felony? [] No D. Legal description of licensed premise:
Package Delivery Hunting Preserve Other Is this License in active use? Yes [] No	LOT 1 of Tract SWett, SEC 19, TWP7, RG 6 (3.00A)
Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? [] Yes \(\sum \) No If Yes, please list on the back page	E. State Sales Tax Number: 1033-5034-ST F. New license?Transfer? (\$150) Re-issuance?
G. CERTIFICATE: The undersigned applicant certifies under the that the said applicant complies with all of the statutory require agrees to permit agents of the Department of Revenue access to and agrees this application shall constitute a contract between a	ne penalties of perjury that all statements herein are true and correct; ements for the class of license being applied for and in addition to the licensed premises and records as provided in SDCL 35-2-2.1, applicant and the State of South Dakota entitling the same or any time for the purpose of enforcing the provisions of Title 35 SDCL,
H. APPROVAL OF LOCAL GOVERNING BODY- Notice of happlication was held Nov. 6, 2025, not less than SEVEN	earing was published <u>Dtt. 30, 2025</u> . Public hearing on the (7) days after official publication. The governing body by majority
vote recommends the approval and granting of this license and applicant have been reviewed and conform to the requiren	d certifies that requirements as to location and suitability of premises ments of local and South Dakota law.
For Local Government Use (Seal)	Renewal - no public hearing held Amount of fee collected with application Amount of fee retained \$ 500.
Mayor or Chairman	

Perell 2000 10/17/25
Signature of Authorized Officer/Director/Partner Date
With signature the applicant agrees to the following: That the applicant company will comply with all provisions of ARSD chapter No. 64:75:02 of the Department of Revenue, relating to the transfer of stock and prior approval of the transfer of such stock by the Secretary of Revenue and violation of any of the provisions of said regulation or failure to comply therewith, whether by the undersigned corporation, partnership/LP/LLC or by any stockholder thereof, or by anyone interested in said company, shall constitute cause for revocation or suspension of any license issued pursuant to and in reliance on this application, or for refusal to renew such license upon expiration thereof. We the undersigned officers and directors of the applicant company acknowledge that the within supplement application form is true and correct in every respect and that there exists no financial arrangement concerning this or any other alcoholic beverage license than that expressly set forth above. If company stock is to be transferred we ask for approval of such voluntary stock transfer.
Where and with whom are all company records kept, such as charter, by-laws, minutes, accounts, notes payable, and notes and accounts receivable, etc? Rebecca Christensen Po Box 291, Buffalo Gap, SD 5-7722
Name Type of License, License Number, Financial Interest Held, and Address of Business Location Rehecca Christensen Refail (on-offsale) wine & Cider
Name of any officers, directors, partners or stockholders of applicant having a financial interest or capital stock in any other alcoholic beverage license:
Name Office Address Occupation Rehecca Christensen PDBDX 291, BirffaloGrap, SD 51722 OWNER
felony? [XYes [] No Name, title of office, occupation and address of each of the officers/owners of the corporation, partnership, LP, or LLC:
Are all managing officers of this corporation/partnership/LP/LLC of good moral character having never been convicted of a 57722
Address of office and principal place of business of corporation/partnership/LP/LLC POBOX 291, Bit Falo Gap SD
Name of corporation/partnership/LP/LLC Buffalo Dreamer Restauvant LLC

Date Received	2026 License No. RW-29507 RECEIVED
Date Issued	ZUZU RECEIVED
Uniform Alcoholic Ber A. Corporation, LLC, or Sole Proprietor Name and Mailing Address	werage License Application B. Doing Business As Name and Physical Address
RODEO GROUNDS LLC 14098 E ORAL RD ORAL, SD 57766	Lic # RW-29507 RODEO GROUNDS 27631 HWY 79 HOT SPRINGS, SD 57747
Owner's Telephone#: 1005 - 891 - 9034	Business Telephone #: (605) 891-9034
C. Indicate the class of license being applied for (submit separate application for each class of license).	Place of business is located in a municipality? [] Yes [V]No
Retail (on-sale) Liquor	County: Fall River
Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Package (off-sale) Liquor X Retail (on-off sale) Wine and Cider Retail (on-off sale) Malt Beverage & SD Farm Wine	Do you own [] or lease [] this property? (Check one) Are real property taxes paid to date? [] Yes [] No Are you of good moral character having never been convicted of a felony? [] Yes [] No D. Legal description of licensed premise:
Package Delivery	Lot 2 BIK3, Ponderosa July Sec. 34
Hunting Preserve Other Is this License in active use? [Yes [] No	Lot 2 BIK3, Ponderosa July Sec 34 T7 Rle Lead that pt of tract 5B in lot 2
Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? [] Yes [] No If Yes, please list on the back page	E. State Sales Tax Number: 1040-1329-ST F. New license?Transfer? (\$150) Re-issuance?
that the said applicant complies with all of the statutory requir agrees to permit agents of the Department of Revenue access t and agrees this application shall constitute a contract between	the penalties of perjury that all statements herein are true and correct; tements for the class of license being applied for and in addition to the licensed premises and records as provided in SDCL 35-2-2.1, applicant and the State of South Dakota entitling the same or any many time for the purpose of enforcing the provisions of Title 35 SDCL,
H. APPROVAL OF LOCAL GOVERNING BODY- Notice of h	nearing was published Oct. 30, 2025. Public hearing on the N (7) days after official publication. The governing body by majority
	d certifies that requirements as to location and suitability of premises
For Local Government Use	Renewal - no public hearing held Amount of fee collected with application \$500.
Mayor or Chairman	

TE discommended and area managed discountries to the contract of

Name of corporation/partnership/LP/LLC Rodo Grounds ILC		
Address of office and principal place of business of corporation/partnership/LP/LLC		
Are all managing officers of this corporation/partnership/LP/LLC of good moral of felony? [Yes [] No		
Name, title of office, occupation and address of each of the officers/owners of the corp. Name Office Address	poration, partnership, LP, or LLC: Occupation	
Lisa Batty Devrer 14098 E. Ora	18t Owner	
Name of any officers, directors, partners or stockholders of applicant having a financi beverage license:	al interest or capital stock in any other alcoholic	
Name Type of License, License Number, Financial Interest	Held, and Address of Business Location	
Usa Bretley Ratail (on and off) Mast		
CASIA TIGICAL PARTY MANAGEMENT OF THE PARTY MANAGEMENT	3/012/44/	
Where and with whom are all company records kept, such as charter, by-laws, minute accounts receivable, etc?	s, accounts, notes payable, and notes and	
Usa Batley 27631 HWV79 Hot Springs	0.50 57747	
With signature the applicant agrees to the following: That the applicant company will comply with all provisions of ARSD chapter Noto the transfer of stock and prior approval of the transfer of such stock by the Secretar provisions of said regulation or failure to comply therewith, whether by the undersign stockholder thereof, or by anyone interested in said company, shall constitute cause for issued pursuant to and in reliance on this application, or for refusal to renew such lice. We the undersigned officers and directors of the applicant company acknowledge true and correct in every respect and that there exists no financial arrangement concert than that expressly set forth above. If company stock is to be transferred we ask for a	ry of Revenue and violation of any of the ed corporation, partnership/LP/LLC or by any or revocation or suspension of any license upon expiration thereof. e that the within supplement application form is ming this or any other alcoholic beverage license	
Signature of Authorized Officer/Director/Partner	Date	
Lika Bastley	10-17-2025	
. U		

Date Received	026 RECEIVED License No. RR-21197
Date Issued	2026 RECEIVED License No. RR-21197 OCT 1 0 2025
	B. Doing Business As Name and Physical Address
ANGOSTURA RESORT MANAGEMENT, INC 2504 W MAIN ST RAPID CITY, SD 57702-2424 Owner's Telephone#: (134) (605) 343-1966	Lic # RR-21197 INFERNO ON THE BEACH 28075 RECREATION RD HOT SPRINGS, SD 57747-7323
C. Indicate the class of license being applied for (submit separate application for each class of license). Retail (on-sale) Liquor	Place of business is located in a municipality? [6] Yes 1/No County: Fall River
X Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Package (off-sale) Liquor Retail (on-off sale) Wine and Cider Retail (on-off sale) Malt Beverage & SD Farm Wine Package Delivery Hunting Preserve Other	Do you own [or lease [] this property? (Check one) Are real property taxes paid to date? [Yes [] No Are you of good moral character having never been convicted of a felony? [Yes [] No D. Legal description of licensed premise: The North half (NE) of the North half (
Is this License in active use? [Yes [] No Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? [Yes [] No If Yes, please list on the back page	E. State Sales Tax Number: 1028-4602-57 F. New license?Transfer? (\$150) Re-issuance?
and agrees this application shall constitute a contract between a	ments for the class of license being applied for and in addition the licensed premises and records as provided in SDCL 35-2-2.1, pplicant and the State of South Dakota entitling the same or any time for the purpose of enforcing the provisions of Title 35 SDCL,
	(7) days after official publication. The governing body by majority certifies that requirements as to location and suitability of premises
For Local Government Use (Seal) Mayor or Chairman	Renewal - no public hearing held Amount of fee collected with application Amount of fee retained \$ 1,400.00 Forwarded with application \$ 0

Name of corporation/partnership/LP/LLC	Marbayent of ba Coffeen to on the Beach
Address of office and principal place of business of corporation/pa	
Are all managing officers of this corporation/partnership/LP/LLC	
felony? Yes [] No	on good moral character having never been convicted of a- 112
Name, title of office, occupation and address of each of the officers/ow	
Name Office Ad	ddress Occupation
See attropping	
Name of any officers, directors, partners or stockholders of applicant h	aving a financial interest or capital stock in any other alcoholic
beverage license:	
	nancial Interest Held, and Address of Business Location
De attachment #2	
Where and with whom are all company records kept, such as charter, by	y-laws, minutes, accounts, notes payable, and notes and
accounts receivable, etc?	
Moute Potrolaum Company 2504 W. Mosin	S. Kapidaty 57701
0 ()	() Corpoole
With signature the applicant agrees to the following:	- '
That the applicant company will comply with all provisions of AR	
to the transfer of stock and prior approval of the transfer of such stock leads on the provisions of said regulation or failure to comply therewith, whether by	
stockholder thereof, or by anyone interested in said company, shall con	stitute cause for revocation or suspension of any license
issued pursuant to and in reliance on this application, or for refusal to r	• •
We the undersigned officers and directors of the applicant compan true and correct in every respect and that there exists no financial arrangements	
than that expressly set forth above. If company stock is to be transferred	
Signature of Authorized Officer/Director/Partner	Date
	912012025
	ロルのけた

Date Received	License No. <u>RW-6483</u>
Date Issued	2026 License No. RW-6483
Uniform Alcoholic Bev A. Corporation, LLC, or Sole Proprietor Name and Mailing Address	erage License Application B. Doing Business As Name and Physical Address
ANGOSTURA RESORT MANAGEMENT, INC 2504 W MAIN ST RAPID CITY, SD 57702-2424 Owner's Telephone#: (134) (605) 343-1966 C. Indicate the class of license being applied for (submit separate application for each class of license). Retail (on-sale) Liquor Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Package (off-sale) Liquor X Retail (on-off sale) Wine and Cider Retail (on-off sale) Malt Beverage & SD Farm Wine Package Delivery Hunting Preserve Other Is this License in active use? Yes []No Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? I Yes []No If Yes, please list on the back page G. CERTIFICATE The undersigned applicant certifies under the that the said applicant complies with all of the statutory require agrees to permit agents of the Department of Revenue access to and agrees this application shall constitute a contract between a peace officers to inspect the premises, books and records at any as amended. Date Print Name H. APPROVAL OF LOCAL GOVERNING BODY- Notice of the application was held not less than SEVEN	the licensed premises and records as provided in SDCL 35-2-2.1, applicant and the State of South Dakota entitling the same or any time for the purpose of enforcing the provisions of Title 35 SDCL, Signature Public hearing on the (7) days after official publication. The governing body by majority discrifices that requirements as to location and suitability of premises
vote recommends the approval and granting of this license and	d certifies that requirements as to location and suitability of premises

(Seal) Mayor or Chairman

For Local Government Use

Renewal - no public hearing held Amount of fee collected with application Amount of fee retained \$ 500.00

Forwarded with application \$

Name of corporation/pa	rtnership/LP/LLC	SKESOA MENCORMENTO	on Interno on the Beach	<u>h</u>
Address of office and p	rincipal place of business of o	corporation/partnership/LP/LI	c 1504W. Main St. Pan	Larys
	rs of this corporation/partners		naracter having never been convicted	of a
Name, title of office, occupa Name	ation and address of each of the	ne officers/owners of the corp Address	oration, partnership, LP, or LLC: Occupation	
See athor	nestal)			
Name of any officers, direct beverage license:	ors, partners or stockholders	of applicant having a financia	interest or capital stock in any other	alcoholic
Name	Type of License, Licens	e Number, Financial Interest	Held, and Address of Business Locati	ion
See attach				
Where and with whom are a accounts receivable, etc?	II company records kept, such	n as charter, by-laws, minutes,	accounts, notes payable, and notes a	nd
(()			() Acerporate	esta .
to the transfer of stock and p provisions of said regulation stockholder thereof, or by an issued pursuant to and in rel We the undersigned off true and correct in every res	pany will comply with all pro- prior approval of the transfer of or failure to comply therewing one interested in said compliance on this application, or facers and directors of the applect and that there exists no facers and that there exists no facers.	of such stock by the Secretary th, whether by the undersigne any, shall constitute cause for for refusal to renew such licen licant company acknowledge inancial arrangement concern	of Revenue and violation of any of the Corporation, partnership/LP/LLC or revocation or suspension of any licente upon expiration thereof. That the within supplement application ing this or any other alcoholic bevera proval of such voluntary stock transfer.	he r by any nse n form is age license
Signature of Authorized O	Officer/Director/Partner	D	ate	
		and the same	0/20/ 25	

Date Received	License No. RL-6369
Date Issued	License No. RL-6369
Uniform Alcoholic Bev A. Corporation, LLC, or Sole Proprietor Name and Mailing Address	rerage License Application B. Doing Business As Name and Physical Address
BILLIE J BESCO 28041 US HIGHWAY385 HOT SPRINGS, SD 57747-7363 Owner's Telephone#:	Lic # RL-6369 ANGOSTURA DEN 28041 US HIGHWAY385 HOT SPRINGS, SD 57747-7363 Business Telephone #: 65 745 5456
 C. Indicate the class of license being applied for (submit separate application for each class of license). X Retail (on-sale) Liquor 	Place of business is located in a municipality? [] Yes [x] No County: Fall River
Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor Package (off-sale) Liquor Retail (on-off sale) Wine and Cider Retail (on-off sale) Malt Beverage & SD Farm Wine Package Delivery Hunting Preserve	Do you own [X] or lease [] this property? (Check one) Are real property taxes paid to date? [X] Yes [] No Are you of good moral character having never been convicted of a felony? [X] Yes [] No D. Legal description of licensed premise: Thact NW'/Y Sec 39 TWY 7 Rg4
Is this License in active use? [X] Yes [] No	East of BH Meridian
Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? [X] Yes [] No If Yes, please list on the back page	E. State Sales Tax Number: 1038-1102-ST F. New license?Transfer? (\$150) Re-issuance?X
that the said applicant complies with all of the statutory require agrees to permit agents of the Department of Revenue access to and agrees this application shall constitute a contract between a	to the licensed premises and records as provided in SDCL 35-2-2.1, applicant and the State of South Dakota entitling the same or any time for the purpose of enforcing the provisions of Title 35 SDCL,
H. APPROVAL OF LOCAL GOVERNING BODY- Notice of he application was held, not less than SEVEN	earing was published Public hearing on the (7) days after official publication. The governing body by majority describes that requirements as to location and suitability of premises

For Local Government Use

Mayor or Chairman

Address of office and n		wa Wen	
	orincipal place of business of corpora	ation/partnership/LP/l	LC
Are all managing office felony? []Yes[]N		P/LLC of good moral	character having never been convicted of a
Name, title of office, occupa	ation and address of each of the office	cers/owners of the con Address	poration, partnership, LP, or LLC: Occupation
beverage license:		Ī	al interest or capital stock in any other alcoh
Name	Type of License, License Num	iber, Financial Interes	t Held, and Address of Business Location
B Basco	RL 6369	100%	28041 H. Way 385 H.S.S.D
	RB 2628	//	, u
1/	PL 27818	/+	(,
Where and with whom are a accounts receivable, etc?	ıll company records kept, such as ch	arter, by-laws, minute	s, accounts, notes payable, and notes and
That the applicant come to the transfer of stock and a provisions of said regulation stockholder thereof, or by a sissued pursuant to and in reduced we the undersigned of true and correct in every research.	prior approval of the transfer of such n or failure to comply therewith, who nyone interested in said company, so liance on this application, or for refu ficers and directors of the applicant espect and that there exists no financi	n stock by the Secreta ether by the undersign hall constitute cause fusal to renew such lice company acknowledgal arrangement conce	o. 64:75:02 of the Department of Revenue, relay of Revenue and violation of any of the ed corporation, partnership/LP/LLC or by an or revocation or suspension of any license upon expiration thereof. The that the within supplement application form this or any other alcoholic beverage licenters and of such voluntary stock transfer.
That the applicant come to the transfer of stock and approvisions of said regulation stockholder thereof, or by a dissued pursuant to and in real we the undersigned of true and correct in every restricted.	pany will comply with all provisions prior approval of the transfer of such nor failure to comply therewith, who myone interested in said company, so liance on this application, or for refusers and directors of the applicant of spect and that there exists no financial above. If company stock is to be transfer of the spect and that there exists no financial above.	n stock by the Secreta ether by the undersign hall constitute cause fusal to renew such lice company acknowledgal arrangement conce	ry of Revenue and violation of any of the ed corporation, partnership/LP/LLC or by an or revocation or suspension of any license upon expiration thereof. The that the within supplement application forming this or any other alcoholic beverage license.

Date Received	1016 License No. <u>PL-27818</u>			
Date Issued	License No. PL-27818			
A. Corporation, LLC, or Sole Proprietor Name and Mailing Address	erage License Application B. Doing Business As Name and Physical Address			
BILLIE J BESCO 28041 US HIGHWAY385 HOT SPRINGS, SD 57747-7363 Owner's Telephone#: (605) 890-1148 C. Indicate the class of license being applied for (submit separate application for each class of license). Retail (on-sale) Liquor Retail (on-sale) Liquor - Restaurant Convention Center (on-sale) Liquor X Package (off-sale) Liquor Retail (on-off sale) Wine and Cider Retail (on-off sale) Malt Beverage & SD Farm Wine	Lic # PL-27818 ANGOSTURA DEN 28041 US HIGHWAY385 HOT SPRINGS, SD 57747-7363 Business Telephone #: 1,05 7 45 54 56 Place of business is located in a municipality? [] Yes No County: Fall River Do you own [X] or lease [] this property? (Check one) Are real property taxes paid to date? [] No Are you of good moral character having never been convicted of a felony? [] Yes [X] No D. Legal description of licensed premise:			
Package Delivery Hunting Preserve Other Is this License in active use? Yes [] No Do you or any officers, directors, partners, or stockholders hold any other alcohol retail, manufacturing, or wholesaler licenses? Yes [] No If Yes, please list on the back page	E. State Sales Tax Number: 1038-1102-ST F. New license? Transfer? (\$150) Re-issuance?			
G. CERTIFICATE The undersigned applicant certifies under the penalties of perjury that all statements herein are true and correct; that the said applicant complies with all of the statutory requirements for the class of license being applied for and in addition agrees to permit agents of the Department of Revenue access to the licensed premises and records as provided in SDCL 35-2-2.1, and agrees this application shall constitute a contract between applicant and the State of South Dakota entitling the same or any peace officers to inspect the premises, books and records at any time for the purpose of enforcing the provisions of Title 35 SDCL, as amended. Date Defal Print Name Bille Base Signature Base Print Name Public hearing on the application was held not less than SEVEN (7) days after official publication. The governing body by majority vote recommends the approval and granting of this license and certifies that requirements as to location and suitability of premises and applicant have been reviewed and conform to the requirements of local and South Dakota law.				
For Local Government Use	Renewal - no public hearing held Amount of fee collected with application \$500.00 Amount of fee retained \$500.00 Forwarded with application \$0			

(Seal)

Mayor or Chairman

Name of corporation/partner	ship/LP/LLC Augos	tara Den	
Address of office and princip			LLC
	-	-	character having never been convicted of a
Name, title of office, occupation Name	and address of each of the Office	e officers/owners of the co Address	rporation, partnership, LP, or LLC: Occupation
, ,	partners or stockholders o	f applicant having a financ	cial interest or capital stock in any other alcoholic
beverage license: Name	Type of License, License	Number, Financial Interes	st Held, and Address of Business Location
B Brsco 11	PL 6369 RB 2629 PL 278	1 100% 8 11	2804(Hiway 385 H5,5D
Where and with whom are all cor accounts receivable, etc?	npany records kept, such	as charter, by-laws, minut	es, accounts, notes payable, and notes and
to the transfer of stock and prior of provisions of said regulation or fastockholder thereof, or by anyone issued pursuant to and in reliance. We the undersigned officers true and correct in every respect and correct i	will comply with all provapproval of the transfer of ailure to comply therewith interested in said comparts on this application, or for and directors of the applicant that there exists no firm.	f such stock by the Secretan, whether by the undersigny, shall constitute cause for refusal to renew such licitant company acknowledgen ancial arrangement conce	To. 64:75:02 of the Department of Revenue, relating ary of Revenue and violation of any of the ned corporation, partnership/LP/LLC or by any for revocation or suspension of any license tense upon expiration thereof. The general section is the second of
Signature of Authorized Office	r/Director/Partner		Date



Security Assessment Agreement

This Agreement is made and entered into by and between Dakota State University, Madison, South Dakota ("DSU") and Fall River County ("FALL RIVER COUNTY"), a political subdivision of the State of South Dakota, on this **22**nd day of October, 2025.

WHEREAS, DSU operates Madison Cyber Labs ("MadLabs") which encompasses a variety of educational, research and development items related to cyber activity including identifying security flaws, along with analyzing and detecting cyber threats; and

WHEREAS, Project Boundary Fence is part of MadLabs at DSU; and

WHEREAS, Project Boundary Fence, a free resource for South Dakota county and city governments, seeks to assist county and city governments in securing networks from cyber attacks through external penetration testing on outward facing technology infrastructures; and

WHEREAS, Project Boundary Fence performs cybersecurity assessments in order to identify network vulnerabilities while also validating current security defenses; and

WHEREAS, FALL RIVER COUNTY seeks assistance from DSU in order for DSU, via Project Boundary Fence, to conduct a cybersecurity assessment of FALL RIVER COUNTY systems, networks and facilities ("System") in order to determine whether potential weaknesses exist in said Systems; and

WHEREAS, in order to conduct a cybersecurity assessment of FALL RIVER COUNTY Systems, DSU, via Project Boundary Fence, may seek to bypass security mechanisms in order to attempt to gain access to FALL RIVER COUNTY Systems; and

WHEREAS, DSU, via Project Boundary Fence, is willing to assist FALL RIVER COUNTY in the performance of a cybersecurity assessment.

NOW THEREFORE, in consideration of and pursuant to the terms and conditions set forth herein, DSU hereby enters into this Agreement with FALL RIVER COUNTY, in order for DSU, via Project Boundary Fence, to conduct a cybersecurity assessment of FALL RIVER COUNTY System; and the parties agree to the following:

- Project Boundary Fence will perform a cybersecurity assessment of FALL RIVER COUNTY System, which assessment will be completed in conformance with industry standards and best practices. Project Boundary Fence agrees to advise the FALL RIVER COUNTY of any potential weaknesses with the FALL RIVER COUNTY System based upon the results of the cybersecurity assessment.
- 2. During the term of this Agreement, the FALL RIVER COUNTY grants to the below-listed members of DSU's Project Boundary Fence cybersecurity assessment team permission to assess information security for the FALL RIVER COUNTY, including permission to attempt to bypass security mechanisms and gain access to protected systems or resources of the FALL RIVER COUNTY, utilizing social engineering



methods with FALL RIVER COUNTY employees in order to induce said employees to disclose information, and engaging in other activities in order to assess whether FALL RIVER COUNTY System is vulnerable to security breaches.

The individuals with Project Boundary Fence, to whom permission is granted to complete the cybersecurity assessment, include the following:

- Noah Krull, Penetration Tester
- DSU Student Employees for Project Boundary Fence

Should other members of Project Boundary Fence at DSU provide services under this agreement, DSU will provide written notice to FALL RIVER COUNTY of such individual. Any questions about the assessment provided pursuant to this Agreement, the cybersecurity assessment team, or the permission they have been granted may be directed to:

Sue Ganjer FALL RIVER COUNTY 906 N River St. Hot Springs, SD 57747 605-745-5130

Additionally, the FALL RIVER COUNTY will provide DSU, via Project Boundary Fence, with a phone number where an authorized employee can be reached 24 hours per day during the term of this Agreement, to be used in the event DSU or Project Boundary Fence, is ever questioned by law enforcement regarding its access to, or attempts to access, the FALL RIVER COUNTY information.

Project Boundary Fence will perform the assessment in conformance with industry standards and best practices. DSU, via Project Boundary Fence, will advise the FALL RIVER COUNTY of any potential weaknesses in and/or concerns with the System based upon the results of the assessment.

- The Parties acknowledge that as consideration for the cybersecurity assessment, DSU
 may receive outside funding. DSU will not separately charge the FALL RIVER
 COUNTY for its cybersecurity assessment.
- 4. For purposes of the cybersecurity assessment, and so that DSU, via Project Boundary Fence, may provide recommendations to the FALL RIVER COUNTY, the FALL RIVER COUNTY will provide to Project Boundary Fence or allow Project Boundary Fence access to certain Confidential Information of the FALL RIVER COUNTY, as defined below, and which Confidential Information the Parties recognize to be the property of the FALL RIVER COUNTY, and confidential and not discoverable as provided in State law and the transmission of which is granted in consideration of DSU's acceptance to sign this Agreement. Accordingly, the parties agree as follows:



- A. <u>DEFINITION OF CONFIDENTIAL INFORMATION</u>. For the purposes hereof, "Confidential Information" means data and information relating to the official business of the FALL RIVER COUNTY or an affiliate of the FALL RIVER COUNTY which is or has been disclosed to DSU or of which DSU became aware as a consequence of or through its relationship to the FALL RIVER COUNTY or its affiliate and which has value to the FALL RIVER COUNTY or its affiliate and is not generally known to the public or required by law to be disclosed to the public. Such Confidential Information shall also include, but not be limited to:
 - (1) any third party Confidential Information that the FALL RIVER COUNTY and/or any supplying party has a duty to maintain as confidential and has so informed DSU; and
 - (2) any other valuable information designated by the FALL RIVER COUNTY and/or supply party as Confidential Information expressly or by circumstances in which it is provided (e.g., non-public party information provided by the FALL RIVER COUNTY and related to services performed by DSU).
- B. <u>COVERED PARTIES</u>. For purposes hereof, the following terms shall have the meanings set forth below:
 - (1) "FALL RIVER COUNTY" shall mean the party that delivers its Confidential Information to DSU.
 - (2) "DSU" shall mean the party that receives Confidential Information from the FALL RIVER COUNTY.
 - (3) "Representatives" shall mean any directors, officers, employees, affiliates, representatives, agents, students, independent contractors or advisors of either party.
 - (4) DSU shall be solely responsible for all actions and obligations of its Representatives.
- C. <u>EXCLUSIONS</u>. However, Confidential Information does not include information that: (a) is now or subsequently becomes generally available to the public through no fault or breach on the part of DSU; (b) DSU can demonstrate to have had rightfully in its possession prior to disclosure to DSU by or on behalf of the FALL RIVER COUNTY; (c) DSU can demonstrate was independently developed by the DSU without the use of any Confidential Information; or (d) DSU rightfully obtains from a third party who has the right to transfer or disclose it.
- D. <u>NON-DISCLOSURE AND NON-USE OF CONFIDENTIAL INFORMATION</u>.

 DSU will not, and will not permit its Representatives to disclose, publish or disseminate Confidential Information to anyone other than its employees and agents on a need-to-know basis, for purposes of providing the Services as required by this Agreement, and agrees to take every precaution to prevent any unauthorized use,



disclosure, publication or dissemination of Confidential Information, other than the sole purpose stated above in this Agreement. Although DSU may have access to Confidential Information beyond what is necessary for DSU to perform its quality assurance activities, DSU agrees and acknowledges that it will limit its use of such information to only that which is necessary. Any use or transmission of all or any part of the Confidential Information, except as otherwise expressly provided herein, shall be deemed to be a default under this Agreement.

- E. <u>AUTHORIZED ACCESS</u>. DSU will notify the FALL RIVER COUNTY of any individual who will seek access to Confidential Information to assist in performing the Services. No individual shall be provided or allowed access to Confidential Information until prior notice has been provided to, and approval received from, the FALL RIVER COUNTY.
- F. <u>LEGAL PROCESS AND PRODUCTION</u>. In the event that DSU or anyone to whom DSU transmits the Confidential Information becomes legally compelled to disclose any of the Confidential Information, DSU will provide the FALL RIVER COUNTY with prompt notice so that the FALL RIVER COUNTY may seek a protective order or other appropriate remedy and/or waive compliance with the provisions of this Agreement. In the event that such protective order or other remedy is not obtained, or that the FALL RIVER COUNTY waives compliance with the provisions of this Agreement, DSU will furnish only that portion of the Confidential Information which is legally required.
- 5. This Agreement shall terminate on 22nd day of October 2026, provided, however, that the confidentiality obligations set forth herein will remain in full force and effect for so long as DSU is in possession of any Confidential Information of the FALL RIVER COUNTY in any form.
- 6. Either party may, by written notice to the other, terminate this Agreement in whole or in part at any time.
- 7. The parties acknowledge that they are entering into this Agreement freely and voluntarily, that they have the opportunity to be represented and advised by counsel in the negotiations resulting in this Agreement, that they have ascertained and weighed all the facts and circumstances likely to influence their judgment, that they have given due consideration to the provisions contained herein, and that they thoroughly understand and consent to all provisions herein.
- 8. The validity, performance, and enforcement of this Agreement are governed by the laws of the state of South Dakota. Should any section or provision of this Agreement be declared by the courts to be invalid, the same will not affect the validity of the Agreement as a whole or any part thereof, other than the part declared to be invalid.



- 9. This instrument contains the entire Agreement between the parties, and no statement, promises, or inducements made by either party or agent of either party that are not contained in this written contract shall be valid or binding. This contract may not be enlarged, modified, or altered except in writing, signed by both parties and endorsed hereon.
- 10. DSU hereby assigns to the FALL RIVER COUNTY all rights, title, and interest in and to all reports, schedules, models, budgets, and other documents, and all information contained therein, prepared and assembled by DSU in connection with this Agreement.
- 11. This Agreement shall inure to the benefit of and be binding upon the heirs, executors, administrators, assignees, and successors of the respective parties.
- 12. The parties agree that electronic transmission via facsimile or email to the other party of a copy of this Agreement bearing such parties' signature shall suffice to bind the party transmitting same to this Agreement in the same manner as if an original signature had been delivered. Without limitation of the foregoing, each party who electronically transmits an executed copy of this Agreement via facsimile or email bearing its signature covenants to deliver the original thereof to the other party as soon as possible thereafter

IN WITNESS WHEREOF, the parties have executed this Agreement the day and year first above written.

FALL RIVER COUNTY		DAKOTA STATE UNIVERSITY/ Department		
Name: Sue Ganje	Date	Name:	Date	
Fall River County Auditor				
Title		Title		
S#		DAKOTA STATE UNIVE Director of Secure SD DAKOTA STATE UNIVE VP for Business & Admin S DAKOTA STATE UNIVE	RSITY/ Services	
		Authorized Official	RS11 1/	
		Name:	Date	

Docusign Envelope ID: EFF98234-99F2-401E-882F-3D2D6E974FE7



Title