EXHIBIT A

1. THE WEST HALF OF THE SOUTHEAST QUARTER (W ½ SE ¼) OF SECTION TWENTY-ONE (21), TOWNSHIP ONE HUNDRED TWENTY-THREE (123) NORTH, RANGE FORTY-NINE (49) WEST OF THE FIFTH PRINCIPAL MERIDIAN, ROBERTS COUNTY, SOUTH DAKOTA, and

THE NORTHWEST QUARTER (NW 1/4) OF SECTION TWENTY-SEVEN (27), TOWNSHIP ONE HUNDRED TWENTY-THREE (123) NORTH, RANGE FORTY-NINE (49) WEST OF THE FIFTH PRINCIPAL MERIDIAN, ROBERTS COUNTY, SOUTH DAKOTA, and

THE NORTHEAST QUARTER (NE 4) OF SECTION TWENTY-EIGHT (28), TOWNSHIP ONE HUNDRED TWENTY-THREE (123) NORTH, RANGE FORTY-NINE (49), WEST OF THE FIFTH PRINCIPAL MERIDIAN, ROBERTS COUNTY, SOUTH DAKOTA, and

THE SOUTH HALF (S 1/2) OF LOTS ONE (1) AND TWO (2), BLOCK EIGHTEEN (18), TOWN OF WILMOT, ROBERTS COUNTY, SOUTH DAKOA,

all subject to easements and reservations of record.

- 2. All Financial interests of the Trustor
- 3. All Personal Property interests of the Trustor

						rage i or i
CRP-1 U.S. DEPARTMENT		E	1. ST	. & CO. CODE & ADN	IN. LOCATION	2. SIGN-UP
(07-06-20) Commodity Credit Corporation				46 10	NUMBER	
			3 00	ONTRACT NUMBER	***************************************	57
CONSERVATION RESERV	/F PROGRAM	(CONTRACT	r 3. 00		. ~	4. ACRES FOR ENROLLMENT
	- 1 1 1 0 0 1 1 7 1 1 1 1 1 1 1 1 1 1 1 1	OCHTICACI	•	1219	'X	154.41
5A. COUNTY FSA OFFICE ADDRESS (In	clude Zip Code)	100	6. TR		CONTRACT PERIOD	
ROBERTS COUNTY FARM SERVICE AGEN	CA			FR	OM: (MM-DD-YYYY)	TO: (MM-DD-YYYY)
2018 SD HIGHWAY 10, STE B SISSETON, SD 57262-2502			l	3456	•	_
313351ON, 3D 37262-2302				10	-01-2022.	9-30-2032
			8. SIC	GNUP TYPE:		
5B. COUNTY FSA OFFICE PHONE NUM	BER		——— SAF	E - South D	akota Pheas	sants SAFE
(Include Area Code): (605)698-7639						seement,
THIS CONTRACT is entered into between to	he Commodity Cred	dit Corporation (re	ferred to as "C	CC") and the undersid	ned owners, operator	e or tenente
(referred to as "the Participant".) The Parti	cipant agrees to pl	ace the designated	i acreage into t	the Conservation Rese	rve Program ("CRP")	or other use set by
CCC for the stipulated contract period from	i the date the Conti	ract is executed by	the CCC The	Participant also apro-	s to implement on ci	ich decianated
acreage the Conservation Plan developed to comply with the terms and conditions cont	or such acreage ar	nd approved by the	CCC and the i	Participant. Additiona	lly, the Participant an	d CCC agree to
Program Contract (referred to as "Appendi	x"). Bv sianina bel	ow, the Participant	t acknowledge:	s receint of a conv of t	he Annandiv/Annand	icae for the
applicable contract period. The terms and	conditions of this a	contract are contail	ned in this For	m CRP-1 and in the Cl	P-1 Annendiy and ar	v addendum
thereto. BY SIGNING THIS CONTRACT PA addendum thereto; and, CRP-2, CRP-2C, C	RTICIPANTS ACKN	OWLEDGE RECEI	PT OF THE FO	LLOWING FORMS: CR	P-1; CRP-1 Appendix	and any
9A. Rental Rate Per Acre \$ 143.	31	10. Identificati	ion of CRP La	and (See Page 2 for	additional space)	
9B. Annual Contract Payment \$ 22,129.00		A. Tract No.	B. Field No	. C. Practice No.	D. Acres	E. Total Estimated Cost-Share
9C. First Year Payment \$		3456	0001	CP38E-1	33.67	\$ 0.00~
(Item 9C is applicable only when the first ye	ar payment is	3456	0004	CP38E-1	42.00	\$ 0.00
prorated.)		3456	0005	CP38E-1	78.74	\$ 0.00
11. PARTICIPANTS (If more than	three individua)	***************************************	***************************************
A(1) PARTICIPANT'S NAME AND	(2) SHARE	(3) SIGNATURE ((By)	(4) TITLE/RELATIO		(5) DATE
ADDRESS (Include Zip Code)		FBT By:		INDIVIDUAL SIGNING IN THE		(MM-DD-YYYY)
ADDRESS (Include Zip Code) GLOVGE ANNANT TRUST GLOVGE ANNANT TRUST GO MARK STREVENSON FO BOX 5057 BROWNING OF STORE, 5052	100.00%	Mark Steven	40.4 ·	REPRESENTAT	IVE CAPACITY	6-21-2012
2830111135, 35 37300 3377				Truster		(O-XI XXX
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code)	(2) SHARE	(3) SIGNATURE ((By)	(4) TITLE/RELATIO	NSHIP OF THE	(5) DATE
ADDRESS (Include Zip Code)				INDIVIDUAL SIG		(MM-DD-YYYY)
	%			REFRESENTAL	VE CAPACIT	
C(1) PARTICIPANT'S NAME AND	(2) SHARE	(3) SIGNATURE ('Du\	(4) TITLE/RELATIO	VICUID OF THE	/EV DATE
ADDRESS (Include Zip Code)	(2) 01 1/4 (2	(a) SIGNATORE (, Ly)	INDIVIDUAL SIG		(5) DATE (MM-DD-YYYY)
, , ,	%			REPRESENTAT		1
	70					
12. CCC USE ONLY A. SIGNATUR	RE OF CCC REP	RESENTATIVE) , ,		B. DATE
ļ		M	u mo Ki	Joled		(MM-DD-YYYY)
			VIIIX	15100		2-29-2022
NOTE: The following statement is made in according to the Commodity Credit Corporation Ch	rdance with the Privac arter Act (15 U.S.C. 7	cy Act of 1974 (5 050 14 et sen.), the Food	C 552a - as afnei Security Act of 1	nded). The authority for re	equesting the information	n identified on this form
3831 et seq), the Agricultural Improveme	ent Act of 2018 (Pub. I	L. 115-334) and 7 CF	R Part 1410. Th	e information will be used	to determine eligibility to	narticinate in and
receive benefits under the Conservation	Reserve Program. T.	he information collect	led on this form o	nay he disclosed to other	Federal State Local do	vernment anencies
Tribal agencies, and nongovernmental e	nuues that have been	authorized access to	the information	by statute or regulation a	nd/or as described in app	licable Routine Uses

identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

Paperwork Reduction Act (PRA) Statement: The information collection is exempted from PRA as specified in 16 U.S.C. 3846(b)(1). The provisions of appropriate criminal and civil fraud, privacy, and other statutes may be applicable to the information provided. RETURN THIS COMPLETED FORM TO YOUR COUNTY FSA OFFICE.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, marital status, family/parental status, income derived from a public assistance program, political beliefs, or reprisal or retaliation for prior civil rights activity, in any program or activity conducted or funded by USDA (not all bases apply to all programs). Remedies and complaint filing deadlines vary by program or incident.

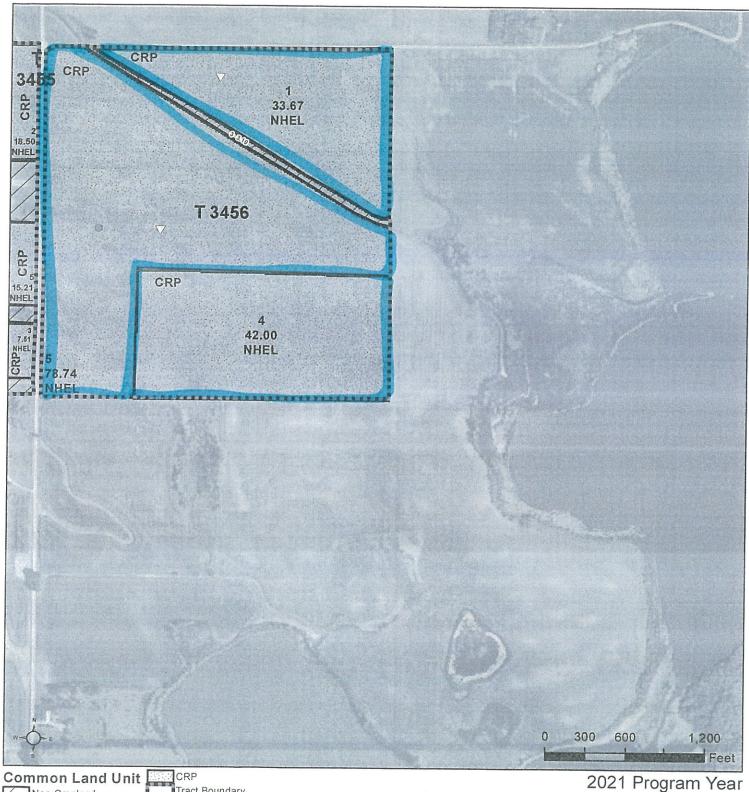
Persons with disabilities who require alternative means of communication for program information (e.g., Braille, large print, audiotape, American Sign Language, etc.) should contact the responsible Agency or USDA's TARGET Center at (202) 720-2600 (voice and TTY) or contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program discrimination complaint, complete the USDA Program Discrimination Complaint Form, AD-3027, found online at http://www.ascr.usda.gov/complaint-filing_cust.html and at any USDA office or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by: (1) mail: U.S. Department of Agriculture Office of the Assistant Section 15 in Program of the Assistant Section 15 in Program of the Assistant Section 15 in Program of the Assistant Section 16 in Program of the Assistant Section 16 in Program of the Assistant Section 16 in Program of the Assistant Section 17 in Program of the Assistant Section 17 in Program of the Assistant Section 18 in

15/



Roberts County, South Dakota



Non-Cropland Cropland

Tract Boundary PLSS

2021 Program Year Map Created April 05, 2021

Farm 1192

Wetland Determination

- Restricted Use
- Limited Restrictions
 - Exempt from Conservation Compliance Provisions

27-123N-49W

United States Department of Agriculture (USDA) Farm Service Agency (FSA) maps are for FSA Program administration only. This map does not represent a legal survey or reflect actual ownership; rather it depicts the information provided directly from the producer and/or National Agricultural Imagery Program (NAIP) imagery. The producer accepts the data 'as is' and assumes all risks associated with its use. USDA-FSA assumes no responsibility for actual or consequential damage incurred as a result of any user's reliance on this data outside FSA Programs. Wetland identifiers do not represent the size, shape, or specific determination of the area. Refer to your original determination (CPA-026 and attached maps) for exact

6			Page 1 of 2
CRP-1 U.S. DEPARTMENT OF AGRICULTURE (07-06-20) Commodity Credit Corporation		109	2. SIGN-UP NUMBER 57
CONSERVATION RESERVE PROGRAM CONTRACT	3. CONTRACT NUMB	er 12129	4. ACRES FOR ENROLLMENT 96.71
5A. COUNTY FSA OFFICE ADDRESS (Include Zip Code)	6. TRACT NUMBER	7. CONTRACT PERIOD	
ROBERTS COUNTY FARM SERVICE AGENCY 2018 SD HIGHWAY 10, STE B	3455	FROM: (MM-DD-YYYY)	TO: (MM-DD-YYYY)
SISSETON, SD 57262-2502		10-01-2022	9-30-2032
5B. COUNTY FSA OFFICE PHONE NUMBER (Include Area Code): (605) 698-7639		n Dakota Pheas	
THIS CONTRACT is entered into between the Commodity Credit Corporation (referred t (referred to as "the Participant".) The Participant agrees to place the designated acreas CCC for the stipulated contract period from the date the Contract is executed by the CC acreage the Conservation Plan developed for such acreage and approved by the CCC a comply with the terms and conditions contained in this Contract, including the Appendix Program Contract (referred to as "Appendix"). By signing below, the Participant ackno applicable contract period. The terms and conditions of this contract are contained in the thereto. BY SIGNING THIS CONTRACT PARTICIPANTS ACKNOWLEDGE RECEIPT OF Taddendum thereto; and, CRP-2, CRP-2C, CRP-2G, or CRP-2C30, as applicable.	ge into the Conservation of the Participant also and the Participant. Addition this Contract, entitle whedges receipt of a copy his Form CRP-1 and in the THE FOLLOWING FORMS	Reserve Program ("CRP") agrees to implement on suitonally, the Participant an et Appendix to CRP-1, Cou of the Appendix/Appendi e CRP-1 Appendix and ar CRP-1; CRP-1 Appendix	or other use set by uch designated d CCC agree to nservation Reserve ices for the
9A. Rental Rate Per Acre \$ 175.35 10. Identification of 0	CRP Land (See Page 2	2 for additional space)	

B Field No.

C. Practice No.

D. Acres

9C. First Year Payment \$	3455	0002	CP38E-1	18.50	\$ 0.00
(Item 9C is applicable only when the first year payment is	3455	0003	CP38E-1	7.51	\$ 0.00
prorated.)	3455	0005	CP38E-1	15.21	\$ 0.00 -
11. PARTICIPANTS (If more than three individua	ls are signing, s	see Page 3.)			
A(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) **RADIVER MARK STEVENSON** **PO BOX 5657 **BROOKINGS, SD 57006-5657 (2) SHARE 100.00 %	(3) SIGNATURE ((4) TITLE/RELATIONS INDIVIDUAL SIGNII REPRESENTATIVE	NG IN THE	(5) DATE (MM-DD-YYYY) 6-21-2022
B(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) (2) SHARE %	(3) SIGNATURE (Ву)	(4) TITLE/RELATIONS INDIVIDUAL SIGNI REPRESENTATIVE	NG IN THE	(5) DATE (MM-DD-YYYY)
C(1) PARTICIPANT'S NAME AND ADDRESS (Include Zip Code) (2) SHARE %	(3) SIGNATURE (I	∃y)	(4) TITLE/RELATIONSI INDIVIDUAL SIGNIN REPRESENTATIVE	VG IN THE	(5) DATE (MM-DD-YYYY)
12. CCC USE ONLY A. SIGNATURE OF CCC REF		Man	Rostas		B. DATE (MM-DD-YYYY) (A - 29 - 2022

A. Tract No

9B. Annual Contract Payment

9C. First Year Payment

\$ 16,958.00

The following statement is made in accordance with the Privacy Act of 1974 (5 USC 552a - as amended). The authority for requesting the information identified on this form is the Commodity Credit Corporation Charter Act (15 U.S.C. 714 et seq.), the Food Security Act of 1985 (16 U.S.C. 3801 et seq.), the Agricultural Act of 2014 (16 U.S.C. 3831 et seq.), the Agricultural Improvement Act of 2018 (Pub. L. 115-334) and 7 CFR Part 1410. The information will be used to determine eligibility to participate in and receive benefits under the Conservation Reserve Program. The information collected on this form may be disclosed to other Federal, State, Local government agencies. Tribal agencies, and nongovernmental entities that have been authorized access to the information by statute or regulation and/or as described in applicable Routine Uses identified in the System of Records Notice for USDA/FSA-2, Farm Records File (Automated). Providing the requested information is voluntary. However, failure to furnish the requested information will result in a determination of ineligibility to participate in and receive benefits under the Conservation Reserve Program.

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E. Total Estimated

Cost-Share

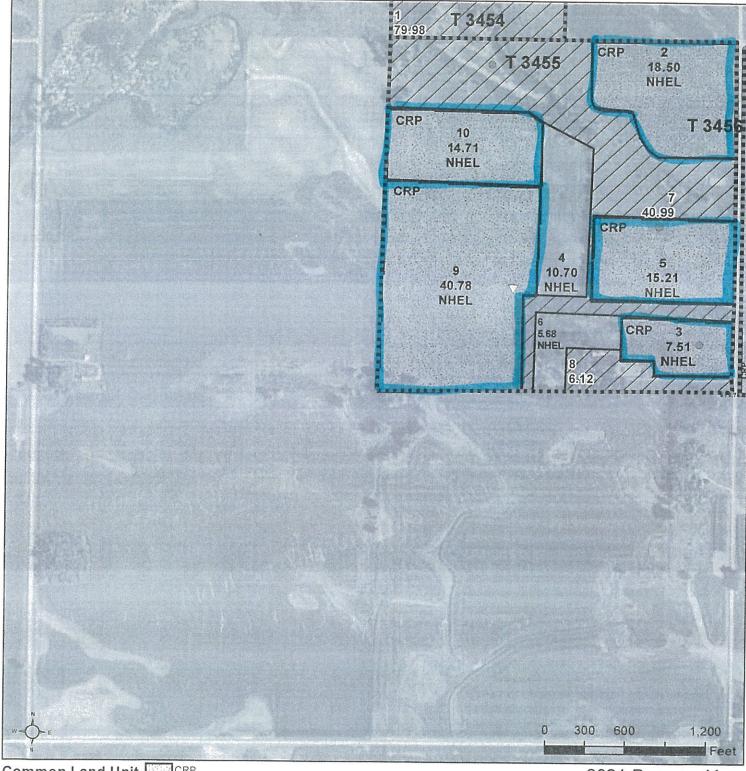
CONTINUATION OF ITEM 10 - Identification of CRP Land

A. Tract No.	B. Field No.	C. Practice No.	D. Acres	E. Total Estimated C/S
3455	0009	CP38E-1	40.78	\$ 0.00
3455	0010	CP38E-1	14.71	\$ 0.00

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	441000000000000000000000000000000000000			



Roberts County, South Dakota



Common Land Unit

Non-Cropland Cropland CRP
Tract Boundary
PLSS

Approx # 1000 16

2021 Program Year
Map Created April 05, 2021

Farm 1192

Wetland Determination

- Restricted Use
- Exempt from Conservation Compliance Provisions

28-123N-49W

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