FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHIP |
|-----------|------------|---------------|-----------|
| | | | |

| OMB APPRO | VAL |
|------------------------|-----------|
| OMB Number: | 3235-0287 |
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* ANDERSON GARNER M | | | | | | 2. Issuer Name and Ticker or Trading Symbol BLACK HILLS CORP /SD/ [BKH] | | | | | | | | | Check all ap Dire | pplicable) ector | 10% | Person(s) to Issuer 10% Owner | |
|--|---|--|--|---|-----------------|---|-----------------------------------|--------|--|-----|---------------------|---|---------------------------------|--|---|---|---|--|--|
| (Last) (First) (Middle) PO BOX 1400 | | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/05/2010 | | | | | | | | | ^ bel | , | Other below HIEF RISK (| , | | | |
| (Street) RAPID (| | | 57709 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Tabl | e I - No | n-Deriv | ative | Sec | curitie | es Acc | quired, | Dis | posed o | f, or | Ben | eficia | ally Owr | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Execution Date, | | Transaction Disposed Code (Instr. | | ties Acquired (A) o d Of (D) (Instr. 3, 4 | | | d 5) Secu Bene | ities icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount (A) or (D) | | A) or D) | Price | Tran | saction(s) : 3 and 4) | | (111501.4) | |
| Common Stock 03/05/2 | | | | /2010 | 2010 | | A ⁽¹⁾ | | 381.509 A | | \$28 | .62 15 | 2 15,381.605 | | | | | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | y Owne | i | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/Y | Date, Transacti | | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | e | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code V | | (A) | (D) | Date Exercisa | | Expiration Date | xpiration of | | nber | | | | | |

Explanation of Responses:

1. Shares acquired through Company?s Short Term Incentive Program.

Remarks:

Roxann R. Basham, by power of attorney

03/09/2010

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.