FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| OMB APPROVAL |
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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* $\underline{Myers\ Robert\ A}$ | | | | | | 2. Issuer Name and Ticker or Trading Symbol BLACK HILLS CORP /SD/ [BKH] | | | | | | | | (Check | all applical Director | ole) | Person(s) to Issu 10% Ov Other (s | | vner |
|---|--|--|---|--------|--|--|------------------------|-----------|---|--------|--|--|---|---|---|---|---|--|---------------------------------------|
| (Last) (First) (Middle) PO BOX 1400 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/06/2014 | | | | | | | | X | below) " | | | | ecny |
| (Street) RAPID CITY SD 57709 | | | | 4 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (9 | State) | (Zip) | | | | | | | | | | | | r offirmed by more than one responding | | | | |
| | | Т | able I - N | on-D | erivat | tive \$ | Secu | rities Ac | quired | l, Di | sposed o | of, or Be | nefici | ally (| Owned | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Execution Date, | | Execution Date, if any | | | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an | | | 5. Amount Securities Beneficial Owned Fo | ly | 6. Own Form: I (D) or I (I) (Inst | Direct Inndirect Er. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | Code | v | Amount | (A) or (D) | | • | Reported Transaction(s) (Instr. 3 and 4) | | | | nstr. 4) | |
| Common Stock 11/06/2 | | | | | 06/201 | 014 | | | J | V | 24.756 | A | | (1) | 1,203.511 | | | I b | y 401(k) |
| Common Stock 11/06/ | | | | 06/201 | 14 | | | S | 1,203.51 | | 11 D | \$56 | .3703 | 0 | I | | I b | y 401(k) | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution E if any (Month/Day | Date, | Code (Inst | | | | 6. Date Exercisable ar Expiration Date (Month/Day/Year) | | | 7. Title and Amor Securities Under Derivative Securi (Instr. 3 and 4) | | ying | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amour Numbe Shares | nt or (Instr. 4) | | | (0) | | |
| Phantom | \$56.01 | 11/06/2014 | | | S | | | 1,785.396 | (2) | | (2) | Common | 1,785 | 5.396 | \$56.01 | 3,193.16 | 52 | D | |

Explanation of Responses:

- 1. Shares acquired through Dividend Reinvestment under Company's 401(k)
- 2. Shares of phantom stock are payable in cash following termination of the reporting person's employment with BKH. The reporting person may transfer his phantom stock account into an alternative investment account at any time.

<u>Lorna J. Gunderman, by power of attorney</u>

11/10/2014

** Signature of Reporting Person

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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.