FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPRO | DVAL |
|------------------------|-----------|
| OMB Number: | 3235-0287 |
| Estimated average burd | len |
| hours per response: | 0.5 |

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* OHLMACHER THOMAS M | | | | | | 2. Issuer Name and Ticker or Trading Symbol BLACK HILLS CORP /SD/ [BKH] | | | | | | | | (Ch | eck all app Direc | olicable) ctor | g Person(s) to I | Owner | |
|--|--|------|----------|---------|-------|---|--------|---|--|--|---------------------|---|-------------------------------|---------|--|------------------------|---|--|--|
| (Last) | ust) (First) (Middle) DBOX 1400 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/05/2009 | | | | | | | | | helo | , | below holesale Busi | ' | |
| (Street) RAPID (| APID CITY SD 577091400 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line | 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 | uritie | s Ac | quired | , Dis | posed o | f, or | Bene | eficial | ly Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | | Executi ay/Year) if any | | A. Deemed Recution Date, any Ionth/Day/Year) | | 3. Transaction Code (Instr. 8) 4. Securit Disposed | | | | | 5) Secur Benef | 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 (D |) or) | Price | Transa | action(s) 3 and 4) | | (1113411 4) | | | | |
| Common Stock 01/05/2 | | | | | | | 2009 | | F | | 636.35 | 66 D \$ | | \$27.3 | 6 46,630.2227 | | D | | |
| | | Та | | | | | | | | | sed of, onvertib | | | | Owned | | | | |
| 1. Title of Derivative Security (Instr. 3) | rivative Conversion Date Execution or Exercise (Month/Day/Year) if any | | | | | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | str. 3 | . Price of Perivative Security Instr. 5) | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | able | Expiration Date | Title | Amo or Num of Sha | nber | | | | | |

Explanation of Responses:

By: Roxann R. Basham, by power of attorney

01/07/2009

** 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.