FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-028								
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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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

hours per response: 0.5

1. Name and Address of Reporting Person*				2. Issuer Name <b>and</b> Ticker or Trading Symbol BLACK HILLS CORP /SD/ [ BKH ]									Check all	ship of Reportii applicable) irector	,				
(Last)	,	irst) (	Middle)			Date of Earliest Transaction (Month/Day/Year) 05/20/2011  4. If Amendment, Date of Original Filed (Month/Day/Year)										officer (give title elow)		Other (specify below)	
(Street) RAPID (			57709 Zip)		4. If										ine) X F F	,			
		Tab	e I - Noi	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	fici	ally Ow	ned			
Dat			2. Transaction Date (Month/Day/Year)		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)						nd Se Be Ov	Amount of curities neficially ned Following	Form (D) or	vnership :: Direct r Indirect :str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	() (I	A) or D)	Price	ੑ   Tra	Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)
Common Stock				05/20	05/20/2011				P		1,000		Α	\$30	).72	2 5,093.408		D	
Common Stock			05/20/2011					P		500		A	\$3	0.7	.7 1,000		I	By Spouse	
		Ta									sed of, onvertib					ed	,		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date, Transacti Code (Ins			on of		6. Date E Expiratio (Month/D	n Dat		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		tr. 3	8. Price Derivativ Security (Instr. 5)	e derivative	/ O Fe D OI (I)	0. wnership orm: irect (D) r Indirect ) (Instr. 4)	Beneficial Ownership (Instr. 4)
				•	Code	v	(A)		Date Exercisa		Expiration Date	Title	Amo or Num of Shai	ber					

**Explanation of Responses:** 

Remarks:

Lorna Zacher, by power of attorney

05/24/2011

\*\* 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.