FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.0

washington, D.C. 20549	OMB APPR	OVAL
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287
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Estimated average burden

obligations may continue. See Instruction 1(b).			Filed pursuant to Section 16(a) of the Securities Exchange Act of 193	hours per response: 0.5				
			or Section 30(h) of the Investment Company Act of 1940					
Name and Address of Reporting Person* Evans Linden R			2. Issuer Name and Ticker or Trading Symbol BLACK HILLS CORP /SD/ [BKH]	(Check all applic	,	on(s) to Issuer 10% Owner Other (specify		
(Last) PO BOX 1400	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 01/02/2009	A below)	sident & COO	below)		
(Street)			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or J Line)	oint/Group Filing (Check Applicable		
RAPID CITY SD		577091400		X Form fil	Form filed by One Reporting Person			
(City)	(State)	(Zip)		Form fil Person	led by More than (One Reporting		

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)					5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1113411.4)	
Common Stock	01/02/2009		F		310.828	D	\$27.29	26,310.955	D		
Common Stock	01/02/2009		A		6,962	A	(1)	33,272.955	D		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(e.g., pare, cane, marrante, epiterio, convertible eccurring)														
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)				6. Date Exerc Expiration Da (Month/Day/\	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Restricted Stock Grant to employee under the Company's Omnibus Incentive Compensation Plan.

By: Roxann R. Basham, by power of attorney

01/06/2009

** Signature of Reporting Person

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.