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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| 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* <u>Kinzley Richard</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol BLACK HILLS CORP /SD/ [BKH] | | | | | | | | | Check all a Di | applicable rector | e) | g Person(s) to Issue | | wner | |
|---|--|----------|--|---------|---|--|-----|-----|------------------------------------|---|---|---|-----------------|--|---|---|--|---|---------------------------------------|---|--|
| (Last) | ` | iirst) (| Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/10/2015 | | | | | | | | | | below) | | e Other below | | specify | |
| (Street) RAPID (| | | 57709 (Zip) | | 4. If | Line) X Form filed by O | | | | | | | | | | by One | up Filing (Check Applicable ne Reporting Person ore than One Reporting | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Date | | | | | | Execution Date, | | | Transaction Disposed Code (Instr. | | | ties Acquired (A) or d Of (D) (Instr. 3, 4 a | | | nd 5) Sed Bed Ow | mount of curities neficially ned Follo ported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | | | v | Amount | (| (A) or (D) | Price | Tra | nsaction(| r. 3 and 4) | | | (111501.4) | |
| Common Stock 02/10/2 | | | | | /2015 | 2015 | | | | | 146.86 | 9 | D | \$50 | 0.65 | 5 22,055.325 | | D | | | |
| Common | Stock | | | | | | | | | | | | | | 1,156.165 I by | | | | | by 401K | |
| | | Та | | | | | | | | | osed of, onvertib | | | | | ed | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversior or Exercise Price of Derivative Security | | 3A. Deem Execution if any (Month/Da | n Date, | 4. Transaction Code (Instr. 8) | | of | | 6. Date E Expiratio (Month/E | | Amount of Securities Underlying Derivative Security (Instr. and 4) | | | 8. Price of Derivative Security (Instr. 5) | e deriva Secul Bene Owne Follor Repo | rities ficially ed wing orted saction(s | Ownershi Form: Direct (D) or Indirect (I) (Instr. | D) ect | Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Nur of | ount nber ires | | | | | | | |

Explanation of Responses:

1. Shares used to pay tax withholding associated with Restricted Stock Vesting.

Lorna J. Gunderman, by power of attorney

02/12/2015

** 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.