FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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* Myers Robert A (Last) (First) (Middle) PO BOX 1400 (Street) RAPID CITY SD 57709				3. C 05/	Issuer Name and Ticker or Trading Symbol BLACK HILLS CORP /SD/ [BKH] 3. Date of Earliest Transaction (Month/Day/Year) 05/24/2011 4. If Amendment, Date of Original Filed (Month/Day/Year)								(Che	S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director					
(City) (State) (Zip)				-										Forr	orm filed by More than One Reporting erson				
		Tab	e I - Noi	n-Deriv	vative	Se	curitie	s Ac	quired,	Dis	posed o	f, or E	3ene	ficially	/ Own	ed			
Date				Date	Date (Month/Day/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Dispose Code (Instr. 5)					Secur	ficially ed Following	6. Ownersh Form: Dire (D) or Indir (I) (Instr. 4)	ect E	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) (D)	or	Price	Trans	action(s) . 3 and 4)			(5 4)
Common Stock 05/24/					4/2011	2011			P		1,000		A	\$30.25	16,116.611		D		
		Ta									sed of, onvertib				wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transactio Code (Inst				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form: Direct (or Indir (I) (Inst	hip (I D) (ect (11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Shai	ber					

Explanation of Responses:

Remarks:

Lorna Zacher

05/25/2011

** 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.