FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
|-------------|------|-------|
|-------------|------|-------|

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| 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

| Name and Address of Reporting Person* MADISON MICHAEL | | | | | 2. Issuer Name and Ticker or Trading Symbol BLACK HILLS CORP /SD/ [BKH] | | | | | | | | | ck all applica | Reporting Person(s) to Issuer ble) 10% Owner | | | | | |
|---|--|--|---|----------------------------------|---|--|--|--|---------------|--|----------------------|-------------|--|----------------------------|--|---|---|---------------------|--|--|
| (Last) | ` | irst) | (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/06/2015 | | | | | | | | | Officer (below) | give title | | Other (s below) | pecify |
| (Street) RAPID (| | D state) | 57709 (Zip) | | 4. 1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Inc Line) | Form fil | or Joint/Group Filing (Check Applicable m filed by One Reporting Person m filed by More than One Reporting son | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Trans. Date | | | 2. Transa | ction 2A. Deemed Execution Date, | | | ite, | 3. 4. Secu Transaction Code (Instr. | | urities Acc sed Of (D) | uired ((Instr. 3 | A) or | 5. Amoun Securities Beneficia Owned Fo | Form (D) or (I) (In | | : Direct r Indirect str. 4) | 7. Nature of ndirect Beneficial Dwnership Instr. 4) | | | |
| | | | | | | | | | | Code | ٧ | Amou | nt (| A) or D) | Price | Transaction (Instr. 3 a | | | | |
| Common Stock | | | 05/06/ | 201 | 15 | | | | I | | 120 | 20.225 A \$ | | \$48.52 | 8,948.216 | | | D | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Da if any (Month/Day/\) | ate, Tra | de (Ir | ction nstr. | of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Date | | Expir (Mon | et e Expiration of the control of th | | | 7. Title ar Securitie Derivativ (Instr. 3 a | s Unde e Secur nd 4) | rlying rity unt or ber of | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securitie Beneficia Owned Followine Reported Transacti (Instr. 4) | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership ct (Instr. 4) |
| Phantom | (1) | | | | | | | | | (2) | | (3) | Common | 4,38 | 31.0466 | | 4,381.0 | 466 | I | By Trust |

Explanation of Responses:

- 1. 1 for 1 conversion ratio
- 2. Derivative security is exercisable upon retirement under terms of the agreement.
- 3. Derivative security expires upon retirement under terms of the agreement.

Remarks:

/s/Lorna J. Gunderman

** Signature of Reporting Person

05/07/2015

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.