## Edgar Filing: ROBINSON WARREN L - Form 4

ROBINSON	WARREN L									
Form 4										
March 02, 20	010									
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL	
<b>UNITED STATES SECURITIES AND EXCHANGE COMMISSION</b> Washington, D.C. 20549							OMB Number:	3235-0287		
Check thi			8,					Expires:	January 31,	
if no long		ENT OF CHAN	IGES IN I	BENEFI	[CIA	LOW	NERSHIP OF		2005	
	subject to Section 16. SECURITIES							Estimated average burden hours per		
	Form 4 or							response	0.5	
Form 5 obligatior	<b>1</b> 0	suant to Section 1				-				
may conti		a) of the Public U	•	•	· ·			1		
See Instru		30(h) of the Ir	vestment	Compan	y Ac	t of 194	-0			
1(b).										
(Print or Type R	(esponses)									
(This of Type I	(csponses)									
1. Name and Address of Reporting Person       2. Issuer Name and Ticker or Trading       5. Relationship of								Reporting Pers	on(s) to	
ROBINSON WARREN L Symbol						0	Issuer			
BLACK HILLS CORP /SD/ [BKH]						(Charl	-1			
(Last)	(First) (M	fiddle) 3. Date o	f Earliest Tra	ansaction			(Check	k all applicable	)	
PO BOX 1400 (Month/Da 02/26/20							_X_ Director10% Owner			
			•				Officer (give title Other (specify below) below)			
	(Streat)	4 If A	u durant Da				· ·	· · · · · · · · · · · · · · · · · · ·	-(0) 1	
			ndment, Date Original nth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
		T neu(ivio	iitii/Day/Tear)	,			_X_Form filed by C	One Reporting Pe	rson	
RAPID CIT	Y, SD 57709						Form filed by M Person	lore than One Re	porting	
(City)	(State) (	(Zip) Tab								
(City)	(State) (	Tab	le I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date		3.4. Securities AcquiredTransaction(A) or Disposed of (D)Code(Instr. 3, 4 and 5)(Instr. 8)				5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year)	Execution Date, if any					SecuritiesForm: DirectBeneficially(D) orOwnedIndirect (I)		Indirect Beneficial	
(Instr. 5)		(Month/Day/Year)				5)		• •	Ownership	
							Following	(Instr. 4)	(Instr. 4)	
					(A)		Reported Transaction(s)			
					or	D ·	(Instr. 3 and 4)			
Common			Code V		(D)	Price \$				
Stock	03/01/2010		Ι	1.128	А	ф 28.08	4,089.079	D		
						20.00				
Common							500	Ι	by Spouse	
Stock										

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactio Code (Instr. 8)	5. Number of onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Phantom Stock Unit	<u>(1)</u>	02/26/2010		А	448.5109	(2)	(3)	Common Stock	448.5109
Phantom Stock Unit	(1)	03/01/2010		А	66.4102	(2)	(3)	Common Stock	66.4102

## **Reporting Owners**

Reporting Owner Name / Address		Relationsh	ips				
r	Director	10% Owner	Officer	Other			
ROBINSON WARREN L PO BOX 1400 RAPID CITY, SD 57709	Х						
Signatures							
Roxann R. Basham, by power of attorney			03/02/2010				
**Signature of Reporting Person			Date				
Explanation of Responses:							

- \* 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).
- (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.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.