Edgar Filing: BLACK HILLS CORP /SD/ - Form 4

BLACK HII	LLS CORP /SD/										
Form 4											
June 02, 201	5										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL		
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287		
Check th									Expires:	January 31,	
subject to Section	if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES					ERSHIP OF	Estimated average burden hours per				
Form 4 c Form 5				~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	~	-			response	0.5	
obligatio may con <i>See</i> Instr 1(b).	ns Section 17(a) of the l	Public U	tility Hol		pany	Act of 1	Act of 1934, 1935 or Section			
(Print or Type]	Responses)										
1. Name and Address of Reporting Person * 2. Issuer Name and Tick Massman Linda K Symbol				d Ticker or T	cker or Trading 5. Relationship Issuer			Reporting Pers	on(s) to		
			BLACE	K HILLS	CORP /SI)/ [B]	KH]	(Chaol	k all applicable)		
(Last)	(First) (I	Middle)	3. Date of	f Earliest T	ransaction			(Check)	
PO BOX 1400			(Month/Day/Year) 05/29/2015				- - 1	Director10% Owner0fficer (give title below) Other (specify below)			
	Filed(Month/Day/Year) Applica					Applicable Line)	ndividual or Joint/Group Filing(Check licable Line) Form filed by One Reporting Person				
RAPID CIT	Y, SD 57709						-	Form filed by Mo Form filed by Mo Person			
(City)	(State)	(Zip)	Tab	le I - Non-I	Derivative S	ecurit	ies Acqui	ired, Disposed of,	or Beneficiall	y Owned	
(Instr. 3) any			ned3.4. Securities Acquired (An Date, ifTransactionor Disposed of (D)Code(Instr. 3, 4 and 5)Day/Year)(Instr. 8)))) 5. Amount of Securities Beneficially Owned Following Reported	Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Common Stock	06/01/2015			Ι	1.5487	А	\$ 47.82	184.4107	D		
Common Stock	06/01/2015			Ι	63.1711	А	\$ 47.82	247.5818	D		

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 orDerivative 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>	05/29/2015		А	418.5852	(2)	(3)	Common Stock	418.5852
Phantom Stock Unit	(1)	06/01/2015		А	4.6649	(2)	(3)	Common Stock	4.6649

Reporting Owners

Reporting Owner Name / Add	ress	Relationships						
1		10% Owner	Officer	Other				
Massman Linda K PO BOX 1400 RAPID CITY, SD 57709								
Signatures								
/s/Lorna J. Gunderman	06/02/2015							

Explanation of Responses:

* If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).

Date

- ** 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

<u>**</u>Signature of Reporting Person

- (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.