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

BLACK HIL	LS CORP /SD/										
Form 4											
June 05, 201	3										
FORM			CECUD				NCEO	OMNECION		PROVAL	
	UNITED	SIAIES		shington,			NGE C	OMMISSION	OMB Number:	3235-0287	
Check thi	s box		vv as	sinington,	D.C. 20	549				January 31,	
if no long	SIATEN/	IENT OI	F CHAN	GES IN I	BENEFI	CIA	LOW	NERSHIP OF	Expires:	2005	
subject to Section 1)			SECUR					Estimated average burden hours per response 0.5		
Form 4 or											
Form 5	Filed pur	suant to S	Section 1	6(a) of the	e Securit	ies E	xchange	e Act of 1934,			
obligation may cont				•	•	· ·		1935 or Section	n		
See Instru		30(h)	of the In	vestment	Compan	y Ac	t of 194	0			
1(b).											
(Print or Type R	(esponses)										
(Time of Type I	(esponses)										
1. Name and A	ddress of Reporting	Person <u>*</u>	2. Issuer	Name and	Ticker or	Tradir	ıg	5. Relationship of	Reporting Pers	son(s) to	
1. Name and Address of Reporting Person _ 2. Issuer Name and Ticker or Trading 5. Rela PECHOTA GARY L Symbol Issuer					Issuer						
BLACK HILLS CORP /SD/ [BKH]					(Char)	1 11 1: 1. 1.	`				
(Last)	(First) (N	Middle)	3. Date of	Earliest Tra	ansaction			(Chec.	k all applicable	;)	
			(Month/D	ay/Year)				X_ Director 10% Owner			
			05/31/20	013				Officer (give title Other (specify below) below)			
			4 If Amo	f Amondmont, Data Original				6. Individual or Joint/Group Filing(Check			
			endment, Date Original onth/Day/Year)				Applicable Line)				
	_X_Form filed by One Reporting Person										
RAPID CITY, SD 57709 — Form filed by More than One Reporting Person							porting				
(City)	(State)	(Zip)				~					
(eng)	× ,						-	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date			3. 4. Securities Acquired				5. Amount of	6. Ownership Form: Direct		
Security (Instr. 3)	(Month/Day/Year)	any	on Date, if Transaction(A) or Disposed of (I Code (Instr. 3, 4 and 5)					Securities Beneficially	(D) or	Beneficial	
		•	Day/Year)	(Instr. 8)	(- /	Owned	Indirect (I)	Ownership	
								Following Reported	(Instr. 4)	(Instr. 4)	
						(A)		Transaction(s)			
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common						, í	\$		-		
Stock	06/03/2013			Ι	3.53	А	47.44	7,144.1704	D		
Common											
Stock								1,000	Ι	By Spouse	
Stoon											

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>	05/31/2013		А	394.9863	(2)	(3)	Common Stock	394.9863
Phantom Stock Unit	<u>(1)</u>	06/03/2013		А	95.7546	(2)	(3)	Common Stock	95.7546

Reporting Owners

Reporting Owner Name / Address		Relationsh	ips		
	Director	10% Owner	Officer	Other	
PECHOTA GARY L PO BOX 1400 RAPID CITY, SD 57709	X				
Signatures					
Lorna J. Gunderman, by power of attorney		06/0	5/2013		
<u>**</u> Signature of Reporting Person		Ι	Date		
Explanation of Docnoncocy					

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.