Edgar Filing: BLACK HILLS CORP /SD/ - Form 5

BLACK HILLS CORP /SD/ Form 5 January 22, 2 **FORM**

January 22, 20)15							
FORM	5				OMB AF	PPROVA	L	
	UNIT	ED STATES	S SECURITIES AND EXCHANGE (Washington, D.C. 20549	OMB Number:	3235-	0362		
Check this b no longer su			Expires:	Januar	•			
to Section 1 Form 4 or F 5 obligation may continu	6. orm A s e.	NNUAL ST	TATEMENT OF CHANGES IN BEN OWNERSHIP OF SECURITIES	Estimated average burden hours per response		2005 1.0		
See Instruction 1(b). Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section Reported Form 4 30(h) of the Investment Company Act of 1940 Transactions Reported								
1. Name and Address of Reporting Person <u>*</u> Cleberg Anthony S			2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First)	(Middle)	BLACK HILLS CORP /SD/ [BKH] 3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2014	(Check Director X Officer (give		Owner		

PO BOX 1400

(Street)

RAPID CITY, SDÂ 57709

X Form Filed by One Reporting Person ____ Form Filed by More than One Reporting Person

6. Individual or Joint/Group Reporting

below)

EXECUTIVE VP & CFO

(check applicable line)

below)

(City)	(State)	(Zip) Tal	ble I - Non-De	rivative Secu	rities .	Acquir	ed, Disposed of, o	or Beneficially	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities (A) or Dispos (Instr. 3, 4 and Amount	sed of		5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	12/31/2014	Â	J	105.1552	А	\$ <u>(1)</u>	43,067.4942	D	Â
Common Stock	Â	Â	Â	Â	Â	Â	3,800	Ι	SEP/IRA
Common Stock	Â	Â	Â	Â	Â	Â	500	Ι	by Spouse
Common Stock	Â	Â	Â	Â	Â	Â	15,435.887	Ι	by Son

4. If Amendment, Date Original

Filed(Month/Day/Year)

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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. SEC 2270 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Tit	le and	8. Price of	9.
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction	Number	Expiration D	ate	Amou	int of	Derivative	of
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	rlying	Security	D
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	ities	(Instr. 5)	Se
	Derivative				Securities			(Instr.	. 3 and 4)		В
	Security				Acquired						0
					(A) or						E
					Disposed						Is
					of (D)						Fi
					(Instr. 3,						(I
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date	Title	Number		
						Excicisable	Date		of		
					(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Cleberg Anthony S PO BOX 1400 RAPID CITY, SD 57709	Â	Â	EXECUTIVE VP & CFO	Â				
Signatures								
Lorna J. Gunderman, by power of attorney		01/2	2/2015					
**Signature of Reporting Person			Date					
PO BOX 1400 RAPID CITY, SD 57709 Signatures Lorna J. Gunderman, by power attorney		01/2	2/2015	Â				

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) Shares aquired through the Company's Dividend Reinvestment Plan.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.