FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

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

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|     | OMB APPROVAL        |           |  |  |  |  |  |  |  |  |
|-----|---------------------|-----------|--|--|--|--|--|--|--|--|
|     | OMB Number:         | 3235-0287 |  |  |  |  |  |  |  |  |
|     | Estimated average b | urden     |  |  |  |  |  |  |  |  |
| - 1 | houre per reenonee. | 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* Jensen Tony A |   |   |              |  | 2. Issuer Name <b>and</b> Ticker or Trading Symbol BLACK HILLS CORP /SD/ [ BKH ]               |         |         |               |           |   |   |  |                     |  | elationship of<br>ck all applica<br>Director                       | able)   | g Perso                                    | on(s) to Issu<br>10% Ow    |          |
|---|---|---|--------------|--|--|---------|---------|---------------|-----------|---|---|--|---------------------|--|--|---|--|----------------------------|----------|
| (Last)  | (F  | ïrst)   | (Middle)     |  | 3. Date of Earliest Transaction (Month/Day/Year) 05/01/2023                                    |         |         |               |           |   |   |  | Officer (<br>below) | give title   |  | Other (s<br>below)                            | pecify                                     |                            |          |
| PO BOX  | 1400  |   |              | 4  | . If Ame   | endme   | ent, Da | te of O       | riginal f | Filed (   | Month   | /Day/Year  | )                   | 6. Inc   | dividual or Jo   | int/Group                                     | Filing                                     | (Check App                 | licable  |
| (Street)  | CITY S  | D   | 57709        |  |  |         |         |               |           |   |   |  |                     | X  | Form file  | •   | •  | rting Person<br>One Report |          |
| (City)  | (8  | State)  | (Zip)        | F  | Rule   | 10b     | 5-1(    | (c) Tı        | ransa     | actio   | on Ir   | ndication  | on                  |  | Person   |   |  |                            |          |
|   |   |   |              |  |  |         |         |               |           |   |   | as made pu<br>i-1(c). See  |                     |  | t, instruction o   | or written pl                                 | an that                                    | is intended to             | satisfy  |
|   |   | Та  | ble I - Non  | -Derivati  | ve S   | ecuri   | ties    | Acqu          | iired,    | Disp  | ose   | d of, or   | Bene                | ficially   | Owned  |   |  |                            |          |
|   |   |   | Date         | 2. Transaction<br>Date Execution<br>Month/Day/Year) if any<br>(Month/Day |  | ution [ | Date,   |               |           | ecurities Acquired (A)<br>losed Of (D) (Instr. 3, 4 |   |  |                     | curities<br>neficially<br>ned Following                                  |  | : Direct   I<br>· Indirect   I<br>str. 4)   ( | 7. Nature of Indirect Beneficial Ownership |                            |          |
|   |   |   |              |  |  |         |         | Code          | v         | Amo   | unt   | (A) or<br>(D)  |                     | Reported<br>Transaction<br>(Instr. 3 au                                  | on(s)  |   |  | (Instr. 4)                 |          |
| Common Stock 05/0                                   |   |   |              | 05/01/2  | 1/2023   |         |         | A             |           | 1,  | ,836  | A  | (1)                 | 10,593   | 3.0635   |   | D  |                            |          |
|   |   |   | Table II - E | Derivativ<br>e.g., put   |  |         |         |               |           |   |   |  |                     |  | Owned  |   |  |                            |          |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date Execution Date, (Month/Day/Year) 3. Transaction Date, (Month/Day/Year) 4. Transaction Code (Instr. 8) 5. Number of Code (Instr. 8) 5. Number Derivative Securities Acquired |              | Expira   | . Date Exercisable and xpiration Date Securities Underlyi Derivative Security (Instr. 3 and 4) |         |         |               |           | rlying<br>ity                                       | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Numbe<br>derivative<br>Securitie<br>Beneficia<br>Owned<br>Following<br>Reported<br>Transact<br>(Instr. 4) | e<br>s<br>ally<br>g | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |   |  |                            |          |
|   |   |   |              | Code   | v  | (A)     | (D)     | Date<br>Exerc | isable    | Expir<br>Date                                       | ation   | Title  |                     | unt or<br>per of<br>es   |  |   |  |                            |          |
| Phantom<br>Stock Unit                               | (2)   |   |              |  |  |         |         | (:            | 3)        | (4)   |   | Common   | 3,69                | 1.7098   |  | 3,691.7098                                    |  | I                          | By Trust |

## Explanation of Responses:

- 1. Non-employee Director Restricted Stock Unit Grant
- 2. 1 for 1 conversion ratio
- 3. Derivative security is exercisable upon retirement under terms of the agreement.
- 4. Derivative security expires upon retirement under terms of the agreement.

## Remarks:

/s/Lorna J. Gunderman

05/03/2023

\*\* Signature of Reporting Person

Date

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

- $^{\ast}$  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.