

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Expires: November 30,

2011

Estimated average burden

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP hours per response... 0.5 **OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940

1. Name and Address of Reporting Person *				* 2	2. Issuer Name <b>and</b> Ticker or Trading Symbol							ng Syı	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
LEMKE JAMES					C H ROBINSON WORLDWIDE INC [ CHRW ]							VIDE	Directo	or	_	10% O	wner	
(Last)	(First)	(N	Middle)	3	3. Date of Earliest Transaction (MM/DD/YYYY)						X Officer (give title below) Other (specify below)  Vice President							
14701 CHARLSON ROAD					12/7/2011													
(Street)					4. If Amendment, Date Original Filed (MM/DD/YYYY)								6. Individual or Joint/Group Filing (Check Applicable Line)					
EDEN PRAIF	RIE, MN	N 553	<b>47</b>															
(City)	(City) (State) (Zip)												X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - Non	-Deriv	vativ	ve Se	curiti	es Acq	luir	ed, Di	spos	sed of	f, or	Beneficially	y Owned			
1.Title of Security (Instr. 3)					2. Trans. Date	2A. Deemed Execution Date, if	med cution (	3. Trans. Code (Instr. 8)		4. Securities Acquired (A) Disposed of (I (Instr. 3, 4 and		or Followin D) (Instr. 3 a		unt of Securities Beneficially Owned ng Reported Transaction(s) and 4)			Form:	7. Nature of Indirect Beneficial Ownership
						any		Code	V	Amount	(A) or (D)	Price			(I 4.			(Instr. 4)
Common Stock 12				12/7	/7/2011		A		5350 (3)	A	\$ 0		132334		I	By Rabbi Trust		
Common Stock														144279 (1)			D	
Tab	le II - De	rivativ	e Securit	ties Bo	enef	iciall	y Ow	ned ( e	.g.	, puts	, cal	ls, wa	arrai	nts, options,	convert	ible secur	rities)	,
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security			4. Trans Code (Instr. 8	) Se Ac Di	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		and E	6. Date Exercisable			7. Title and Ar Securities Und Derivative Sec (Instr. 3 and 4)		nderlying Security	-	9. Number of derivative Securities	10. Ownership Form of Derivative	Beneficial
				Code	V	(A) (D)	(D)	Date Exerc	eisabl		ation	Title N		Amount or Number of Shares		Reported Transaction (s) (Instr. 4)	(I) (Instr.	
Option (Right to Buy)	\$14.82								(2)	2/7/2	013	Comn Stock		13416		13416	D	
Option (Right to Buy)	\$14.82							(	(2)	2/7/2	013	Comn Stock		16584		16584	D	

## **Explanation of Responses:**

- (1) Includes shares held in the employee stock purchase plan as of a statement dated 3/31/2009.
- (2) Currently 100% vested.
- (3) Shares granted are available to vest over five years beginning in 2012, based on financial performance of the Company, and are subject to forfeiture.

**Reporting Owners** 

Demonting Overson Name / Address	Relationships						
Reporting Owner Name / Address	Director	10%	Owner	Officer	Other		
LEMKE JAMES 14701 CHARLSON ROAD				Vice President			

EDEN PRAIRIE, WIN 55547	
Signatures	
/s/ Troy Renner, Attorney in fact for James P. Lemke	12/9/2011

\*\* Signature of Reporting Person

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

\* 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).

Date

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 control number.