FORM 5

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).
[] Form 3 Holdings Reported
[] Form 4 Transactions

Reported

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0362 Expires: February 28, 2011 Estimated average burden hours per response... 1.0

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP 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. Issuer Name and Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
BUTTS JAM	IES				СН	ROBI	NSON W	ORLI	W	/ ID]	E					
				INC [CHRW]						Director 10% Owner			wner			
(Last)	(First)		(Middle)			3. Statement for Issuer's Fiscal Year Ended (MM/DD/YYYY)					X Officer (give title below) Other (specify below)					
14701 CHAF	RLSON I	ROA	D				12/31/2	2009				Vice Pres	ident			
	(Street)					Amendmod/YYYY)	ent, Date C	riginal l	File	d		6. Individi Applicable Li		nt/Group I	Filing (Che	eck
EDEN PRAI	RIE. M	N 55	347		Ì	ĺ							,			
(City) (State) (Zip)									_ X _ Form Filed by One Reporting Person Form Filed by More than One Reporting Person							
		Tal	ble I - No	on-De	rivativ	e Securi	ties Acqui	red, Dis	pos	sed o	of, or E	Seneficially	y Owned			
1.Title of Security (Instr. 3) Da			Trans. ate	Deemed Execution Date, if	3. Trans. Code (Instr. 8)	Acquired (A) or Follow		Follow	mount of Securities Beneficially Owned owing Reported Transaction(s) r. 3 and 4)			Ownership of Indi Form: Benefi Direct (D) Owner	7. Nature of Indirect Beneficial Ownership			
						any		Amount	(A) or (D)	Price	:				or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock												123	560 ⁽¹⁾		I	By Rabbi Trust
Common Stock										21000			I	By Children		
Common Stock											354525 (2) (3)		D			
Table II - 1	Derivative	Secu	ırities A	cquire	ed, Dis	posed of	, or Benefi securi		wn	ed (e.g. , p	outs, calls,	warrant	s, options	, convert	ible
1. Title of Derivate Security (Instr. 3)	ecurity Conversion Trans. Deemed Code		Code	s. 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (MM/DD/YYYY)		7. Title and Amou Securities Underly Derivative Securit (Instr. 3 and 4)		Derivative Security (Instr. 5)	of Derivative Securities	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I)	Beneficial			
					(A)	(D)	Date Exercisable	Expiration Date	Tit	I P I	nount or	Number of		Fiscal Year (Instr. 4)	(Instr. 4)	

Explanation of Responses:

- (1) Total number of shares includes shares vesting based on performance criteria.
- (2) Includes shares held in the employee stock purchase plan as of a statement dated March 31, 2009.
- (3) Since the date of the reporting person's last ownership report, he transferred 365,420 shares of C.H. Robinson's common stock and 4,762 shares of common stock held in the Company's employee stock purchase plan to his ex-wife pursuant to a domestic relations order. The reporting person disclaims beneficial interest as to any securities transferred to his ex-wife.

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address						

	Director	10% Owner	Officer	Other
BUTTS JAMES				
14701 CHARLSON ROAD			Vice President	
EDEN PRAIRIE, MN 55347				

Signatures

/s/ Troy Renner, Attorney in Fact for James E. Butts 2/10/2010

** 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).

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.