

[ ] 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								ling	g Syml		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
LEMKE JAMES					C H ROBINSON WORLDWIDE INC [ CHRW ]								W	IDE	_	Direct	or	_	10% O	wner
(Last) (First) (Middle)														D/YYYY	ĺ	X Officer (give title below) Other (specify below)  Vice President				
14701 CHARLSON ROAD (Street)					2/3/2012															
					4. If Amendment, Date Original Filed (MM/DD/YYYY)									l		6. Individual or Joint/Group Filing (Check Applicable Line)				
EDEN PRAIF	RIE. MN	I 5534	7	Ì			ĺ									11	,			
(City) (State) (Zip)															-	_ X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
			<u> </u>	I											<u> </u>	1 01111 1110	od by more	тап оне кер	orting reason	
		Table	I - Non-	Deriv	ati		cur	ities	Ac	quire	<b>ed,</b> ]	Disp	ose	ed of, o	or Be	eneficiall	y Owned	[		
1. Title of Security (Instr. 3)			2. Tra Date	ns.	2A. Deemed Execution Date, if		3. Tra Code (Instr	(A) (C) (D)		or Disposed of			of Fo	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)				Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
							any		de	V Am	ount	(A) or (D)	Pr	rice					or Indirect (Instr (I) (Instr. 4)	(Instr. 4)
Common Stock																13	1984		I	By Rabbi Trust
Common Stock 2				2/3/20	3/2012			M	I	134	416	16 A \$14.82				157695			D	
Common Stock 2				2/3/20	2/3/2012			F	F 3087		87	7 D \$64.42		1.42	154976 <sup>(1)</sup>			D		
Tab	le II - Dei	rivative	Securiti	ies Be	nei	ficiall	ly O	wne	ed (	e.g. ,	pu	ts, c	alls	s, warı	rants	s, options	, convert	ible secur	rities)	
1. Title of Derivate Security (Instr. 3)	_,,,,				8)	5. Number of Derivative Securities Acquired (A) Disposed of ( (Instr. 3, 4 and		f 6. Date Exercisable and Expiration Date ) or (D)					S	7. Title and Ar Securities Und Derivative Sec (Instr. 3 and 4)		derlying Derivative Security		derivative Securities Beneficially Owned Following	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D	lı	Date Expiration Date	on T	Title		ount or ber of es	Transac	Reported Transaction (s) (Instr. 4)					
Option (Right to Buy)	\$14.82	2/3/2012		M			1341	16		(2)	2/7	/2013		Common Stock	n	13416	\$ 0	000	D	
Option (Right to Buy)	\$14.82									(2)	2/7	/2013		Common Stock	n	16584		16584	D	
Option (Right to Buy)	\$64.42	2/3/2012		A		3087			2/3/2	2012	2/7	/2013		Common Stock	n	3087	\$ 0	3087	D	

## **Explanation of Responses:**

- (1) Includes shares held in the employee stock purchase plan as of a statement dated 12/31/2011 and restricted stock awards.
- (2) Currently 100% vested.

**Reporting Owners** 

Paparting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% O	)wner	Officer	Other			
LEMKE JAMES 14701 CHARLSON ROAD				Vice President				

EDEN PRAIRIE, MN 55347				
Signatures				
/s/ Troy Renner, Attorney in fac	ct for Jai	mes P. Lem	ke 2	/7/2012

\*\* 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.