MacLennan David Form 3 August 10, 2010 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB Number:

INITIAL STATEMENT OF 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(h) of the Investment Company Act of 1940

(Print or Type Responses)

| 1. Name and Address of Reporting Person <u>*</u> MacLennan David | | | 2. Date of Event Requirin Statement (Month/Day/Year) | 3. Issuer Name and Ticker or Trading Symbol C H ROBINSON WORLDWIDE INC [CHRW] | | | | | | |
|--|---------------------------------|--------------------------|--|--|--|---|---|--|--|--|
| (Last) (Fi | rst) | (Middle) | 08/01/2010 | 4. Relationship of Reporting Person(s) to Issuer | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | | | |
| 14701 CHARLSON ROAD (Street) | | | | (Check X_ Director Officer | all applicable) r 10% Other | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting | | | | |
| EDEN PRAIRIE, MN 55347 | | | | | w) (specify belo | | Person Form filed by More than One Reporting Person | | | |
| (City) (Sta | ate) | (Zip) | Table I - | Non-Derivat | ive Securiti | curities Beneficially Owned | | | | |
| 1.Title of Security (Instr. 4) | | | 2. Amount Beneficiall (Instr. 4) | of Securities y Owned | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nat Owne (Instr | • | | | |
| Common Stock | | | 300 | | D | Â | | | | |
| Reminder: Report on owned directly or inc | lirectly. Persons informa | s who resp tion conta | ch class of securities benef bond to the collection o ined in this form are no nd unless the form dis | - S of ot | EC 1473 (7-02 |) | | | | |
| | | ly valid OM | IB control number. | / · · · | | | | | | |

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

| 1. Title of Derivative Security (Instr. 4) | | piration Date | | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | | 5. Ownership Form of Derivative | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---|---------------------|--------------------|-------|--|------------------------|--|---|
| | Date Exercisable | Expiration Date | Title | Amount or Number of | Derivative Security | Security: Direct (D) or Indirect | |

3235-0104

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

Shares

(I) (Instr. 5)

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | | |
|--|---------------|------------|-----------|---------|-------|--|--|
| 1 0 | Dire | ector | 10% Owner | Officer | Other | | |
| MacLennan David 14701 CHARLSON ROAD EDEN PRAIRIE, MN 55347 | Â | X | Â | Â | Â | | |
| Signatures | | | | | | | |
| /s/ Troy Renner, Attorney in Fact MacLennan | | 08/10/2010 | | | | | |
| <u>**</u> Signature of Reporting Pe | | Date | | | | | |
| Explanation of Responses: | | | | | | | |

- * If the form is filed by more than one reporting person, *see* Instruction 5(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).

Â **Remarks:** EXHIBITÂ 24:Â Â POWERÂ OFÂ ATTORNEY

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