## FORM 4

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

OMB APPROV	AL
OMB Number:	3235-0287
Estimated average bure	den
hours per response	0.5

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

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Print or Type Responses)  1. Name and Address of Reporting Person *			2 Issuar Nama and Ticker or Trading Symbol						5. Re	5. Relationship of Reporting Person(s) to Issuer						
1. Name and Address of Reporting Person— Pickerell Dean  (Last) (First) (Middle)  7400 EXCELSIOR BLVD.  (Street)  MINNEAPOLIS, MN 55426  (City) (State) (Zip)				2. Issuer Name and Ticker or Trading Symbol APPLIANCE RECYCLING CENTERS OF							(Check all applicable)  X Director 10% Owner					
			AMERICA INC /MN [arci]						x		e title below)		r (specify below)			
				3. Date of Earliest Transaction (Month/Day/Year) 05/10/2012												
			4. If Amendment, Date Original Filed(Month/Day/Year)  Table I - Non-Derivative Securities Acqu						_X_ F	6. Individual or Joint/Group Filing(Check Applicable Line)  X_ Form filed by One Reporting Person  Form filed by More than One Reporting Person						
									Acquired	Disnosed	of or Rene	ficially Owne	d			
1 Title of S	lecurity		2. Transaction	2A. De	eme	-							ecurities Be			. Nature
(Instr. 3)	(Instr. 3) Date			Execut	ion E	Date, if Coo		e (	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		C(D) Own Trans	Owned Followi Transaction(s)		d C	Ownership form:	f Indirect Seneficial
				(Month/Day					(A) or		Ì	r. 3 and 4)		01 (I	r Indirect (I	wnership nstr. 4)
				<u> </u>				ode V A	Amount (	D)	Price			10	Instr. 4)	
Reminder	Report on a	separate line for each	class of securities b	beneficia	ılly o	wned di	rectl	v or indirectly								
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Kemmaer.	<b>P</b>						•	Persor	s who res					ion contain	ed SEC 14	74 (9-02)
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### **Reporting Owners**

P (1 0 Y (	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Pickerell Dean 7400 EXCELSIOR BLVD. MINNEAPOLIS, MN 55426	X				

## **Signatures**

/s/ Dean Pickerell	05/14/2012
Signature of Reporting Person	Date

## **Explanation of Responses:**

- \* 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.

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.