## FORM 4

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

OMB APPR	ROVAL
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Estimated average	burden
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

	pe Response	5)														
1. Name and Address of Reporting Person* Bremer Bradley  (Last) (First) (Middle)  7400 EXCELSIOR BLVD (Street)  MINNEAPOLIS, MN 55426			2. Issuer Name and Ticker or Trading Symbol APPLIANCE RECYCLING CENTERS OF AMERICA INC /MN [arci]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director  Officer (give title below)  Other (specify below)			ow)				
			Date of Earliest Transaction (Month/Day/Year)     02/26/2014      If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line)  X_Form filed by One Reporting Person Form filed by More than One Reporting Person								
												(Cit	y)	(State)	(Zip)	
1.Title of S (Instr. 3)	Security		2. Transaction Date (Month/Day/Year)		on D	Date, if (		8) (	. Securities AA) or Dispose Instr. 3, 4 and (A)	or or	Owne Trans		Securities Boing Reporte	ed	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Kemmaer.	report on a c	separate fine for each	class of securities	ochemelal	ily ov	wned dire	ectly	Person	s who resp					tion contain	ned SEC	1474 (9-02)
Kemmaer.	Tespoit on a c	reparate fine for each		· Derivati	ive S	ecurities	Acq	Person in this display	s who resp form are no s a current	t require y valid (	ed to r OMB o	respond control r	unless the		ned SEC	1474 (9-02)
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1. Title of	2. Conversion	3. Transaction	Table II -  3A. Deemed Execution Date, if	Derivati (e.g., put 4. Transaci Code	ive S ts, ca tion	securities alls, warn 5. Numb	erants, per ative es d (A)	Person in this display uired, Display options, co	s who resp form are no es a current osed of, or B onvertible sec ercisable and Date	t require ly valid ( eneficially eurities)  7. Tit of Un Secur	y Own	respond control r red Amount	unless the number.	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	of 10. Owners Form of Derivati Security Direct ( or Indirects)	11. Naturof Indire Benefici Ownersi (Instr. 4)
1. Title of Derivative Security	2. Conversion or Exercise Price of Derivative	3. Transaction Date	Table II -  3A. Deemed Execution Date, if any	Derivati (e.g., put 4. Transaci Code	ive S ts, ca tion	5. Numb of Deriv. Securities Acquired or Dispo of (D) (Instr. 3,	erants, per ative es d (A)	Person in this display uired, Dispositions, co	s who resp form are no is a current posed of, or B invertible sec ercisable and Date y/Year)	t require ly valid ( eneficially eurities)  7. Tit of Un Secur	y Own le and derlyinities	respond control r red Amount	8. Price of Derivative Security	9. Number of Derivative Securities Beneficially Owned Following Reported	of 10. Owners Form of Derivati Security Direct ( or Indir	11. Naturof Indire Benefici Ownersi (Instr. 4)

#### **Reporting Owners**

P (1 0 N /	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Bremer Bradley 7400 EXCELSIOR BLVD MINNEAPOLIS, MN 55426			President of ApplianceSmart			

#### **Signatures**

Bradley Bremer	02/27/2014
**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).
- (1) Options vest 33% on 1st anniversary, 33% on 2nd anniversary, 34% on 3rd anniversary.

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.	