FORM 4

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

OMB APPROVAL MB 3235-Number: 0287 Estimated average burden hours per 0.5 response...

(9-02)

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 of Type Responses)											
1. Name and Address AL ATHEL FAH SALEH	ED S	2. Issuer Name and Ticker or Trading Symbol ARABIAN AMERICAN DEVELOPMENT CO [ARSD]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) DirectorX_ 10% Owner Officer (give title Other (specify below)			
P.O. BOX 4900	(3. Date of Earliest Transaction (Month/Day/Year) 09/28/2011					below)				
(S RIYADH, TO 114		4. 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			
(City) (S		Table I - Non-Derivative Securities Acquired, Di						red, Disposed of, or I	Beneficially (Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	any	tion Date, if	3. Transact Code (Instr. 8) Code		4. Securi Acquired Disposed (Instr. 3, Amount	1 (A) d of (I 4 and (A) or	D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
common stock	09/28/2011			Р		9,873	А	\$ 3.34	4,091,557	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)																						
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6. Date Exer	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature									
Derivative	Conversion	Date	Execution Date, if	Transaction	Numl	ber	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect									
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial									
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative	ve		Securities		(Instr. 5)	Beneficially	Derivative	Ownership									
	Derivative				Secur	rities	s				(Instr	: 3 and		Owned	Security:	(Instr. 4)							
	Security				Acqu	ired					4)			Following	Direct (D)								
					(A) o	r						Reported	or Indirect										
					-	Disposed						Transaction(s)	(I)										
					of (D	f (D)						(Instr. 4)	(Instr. 4)										
					(Instr																		
					4, and	15)																	
										Amount													
							Data	Emination		or													
							Expiration Exercisable Date		Date Expiration		Date Expiration		Date Expiratio	Date Ex	1		Date Expiration		Number				
							Exercisable	Date		of													
				Code V	(A)	(D)				Shares													

Reporting Owners

Demosting Oppman Names / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
AL ATHEL FAHAD MOHAMMED SALEH P.O. BOX 4900 RIYADH, T0 11412		Х					

Signatures

Fahad Al-Athel	09/29/2011
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.