FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL OMB 3235-0104 Number: Estimated average burden hours per response... 0.5

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	2. Date Statem	e of Event F	Requir	~	3. Issuer Name and Ticker or Trading Symbol						
Person * Adams Gary Kramer	(Montl	h/Day/Year	:)	ARABIA	ARABIAN AMERICAN DEVELOPMENT CO [ARSD]						
(Last) (First) (Middle 4122 CAMBRY PARK	11/15	/2012		4. Relations Person(s) to		p of Reporting		5. If Amendment, Date Original Filed(Month/Day/Year)			
(Street) KATY, TX 77450				X Directo	X Director Officer (give		all applicable) 10% Owner e Other (specify below)		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) (State) (Zip)		Table I - Non-Derivative Securities Beneficially Owned									
1.Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)			ownership orm: Direct O) or adirect (I) instr. 5)	4. Nature of Indirect Beneficial Ownership t (Instr. 5)				
no beneficial shares owned		0				D					
	spond unle	ess the fo	orm d	of information of information isplays a curr	ently	y valid OM	B con	trol			
1. Title of Derivative Security (Instr. 4) 2. Date Exercisabl and Expiration Da (Month/Day/Year)		rcisable ion Date	3. Tit Secu	tle and Amount or rities Underlying vative Security	of	4. Conversion or Exercise Price of	5. Owr Forn	nership m of ivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)		
	Date Exercisable	Expiration Date	Title	Amount or Nun of Shares	nber	Security D or (I		urity: ect (D) ndirect tr. 5)			
Reporting Owners											
Reporting Owner Name / Address Relation			nships								
	Director 10	rirector 10% Owner Officer O									
Adams Gary Kramer 4122 CAMBRY PARK	X										

Signatures

KATY, TX 77450

Gary Adams	11/15/2012
**Signature of Reporting Person	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).

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.