Gajarsa Arthur J Form 3 July 10, 2012 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL FORM 3 Washington, D.C. 20549 OMB 3235-0104 Number: January 31, **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Expires: 2005 **SECURITIES** Estimated average

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)

Gajarsa Arthur J		Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol SUPREME INDUSTRIES INC [STS]					
(Last) (Fin	rst) (Middle)	07/01/2012	4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)		
P O BOX 226								
(Str			(Check all applicable) <u>X</u> Director <u>10%</u> Owner <u>Officer</u> Other (give title below) (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) (Sta	ate) (Zip)	Table I - N	on-Derivati	ive Securiti	es Bei	neficially Owned		
1.Title of Security (Instr. 4)		2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nati Owner (Instr.	•		
Class A Common	n Stock	7,000		D	Â			
Reminder: Report on owned directly or ind	*	h class of securities benefici	ally SI	EC 1473 (7-02))			
	information contai required to respon	ond to the collection of ined in this form are not id unless the form displa IB control number.						
Table	Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)							

Title of Derivative Security2. Date ExeInstr. 4)Expiration (Month/Day/Yea)		ate	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	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	

burden hours per

response...

0.5

Shares

(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Addre	ess	Relationships					
		10% Owner	Officer Other				
Gajarsa Arthur J P O BOX 226 HOLDERNESS, NH 032		Â	Â	Â			
Signatures							
Arthur J. Gajarsa 0	7/10/2012						
<u>**</u> 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.