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SZTYKIEL Form 4											
March 30, 2									OMB	APPROVAL	
FORM	A 4 UNITED	STATES	S SECUI	RITIES A	ND EX	CHA	NGE	COMMISSIO			
Check t	his box		Wa	shington	, D.C. 2	0549			Number:		
if no lor subject Section Form 4 Form 5 obligation	nger to 16. or Filed pu	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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								s: January 31, 2005 Inted average In hours per Inse 0.5	
may cor <i>See</i> Inst 1(b).	itinue.			nvestment	•	-	•				
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> SZTYKIEL JOHN E			2. Issuer Name and Ticker or Trading Symbol SPARTAN MOTORS INC [SPAR]					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (Middle)		f Earliest T		-		(Ch	eck all applica	ible)	
	TAN MOTORS REYNOLDS RO	AD	(Month/I 03/21/2	Day/Year) 2012				X Director X Officer (g below)			
CHARLO	(Street) TTE, MI 48813			endment, Dannent, Dannen, Dann	-	al		6. Individual or Applicable Line) _X_ Form filed b Form filed by Person		g Person	
(City)	(State)	(Zip)	Tab	la I Non I	Dorivotiv	Soon	ritios Ad	equired, Disposed	of or Bonofi	vially Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	e 2A. Deen	ned 1 Date, if	3. Transactic Code (Instr. 8) Code V	4. Securi on(A) or D (D) (Instr. 3,	ities Ad ispose 4 and (A) or	cquired d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect	
Common Stock (1)	03/21/2012			F	389	D	\$ 5.54	621,478	D		
Common Stock								25,141.42 <u>(2)</u>	I	401(k) retirement plan	
Common Stock								5,000	I	Ana Sztykiel (cust/ daughter)	
Common Stock								163,948 <u>(3)</u>	I	Sztykiel Investments LLC	

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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 (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title	and	8. Price of	9. Nu
Derivativ	e Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orNumber	Expiration D	ate	Amoun	t of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day/	'Year)	Underly	ing	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Securiti	es	(Instr. 5)	Bene
	Derivative				Securities	3		(Instr. 3	and 4)		Owne
	Security				Acquired						Follo
	•				(A) or						Repo
					Disposed						Trans
					of (D)						(Instr
					(Instr. 3,						
					4, and 5)						
									Amount		
						Date	Expiration		or		
						Exercisable	Date		Number		
					(1) (D)				of		
				Code V	(A) (D)			S	Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting O when Plante, Plantess	Director	10% Owner	Officer	Other			
SZTYKIEL JOHN E C/O SPARTAN MOTORS INC 1541 REYNOLDS ROAD CHARLOTTE, MI 48813	Х		President & CEO				
Signatures							
/s/ Kimberly Baber, as Attorney-	03/29/2012						

Sztykiel

**Signature of Reporting Person

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).
- These shares were withheld by Spartan Motors, Inc. to satisfy tax withholding obligations incident upon the vesting of previously granted (1)shares of restricted stock.

Date

- Updated to reflect additional shares acquired in 401(k) plan. (2)
- (3) (3) The reporting person disclaims beneficial ownership of the listed shares except to the extent of his pecuniary interest therein.

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.