Edgar Filing: FOSTER WILLIAM F - Form 4

FOSTER WI	LLIAM F											
Form 4												
April 08, 201	1											
FORM	4		~ ~ ~ ~ ~ ~							OMB AI	PROVAL	
	UNITEI) STATES				ND EXC D.C. 205		IGE C	COMMISSION	OMB Number:	3235-0287	
Check this box								Expires:	January 31,			
if no long subject to	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP							NERSHIP OF	200			
Section 1				SEC	URI	ITIES				Estimated average burden hours per		
Form 4 or	r									response	0.5	
Form 5									e Act of 1934,			
obligation may cont									f 1935 or Section	n		
See Instru		30(h)) of the Inv	vestme	ent (Company	y Act	of 194	40			
1(b).												
(Drint on Type D	()											
(Print or Type F	(esponses)											
1 Name and A	ddress of Reportin	σ Person *	2 Isouer	Nama	and '	Tieker or 7	Frading	_	5. Relationship of	Reporting Per	son(s) to	
1. Name and Address of Reporting Person * 2. Issuer Na FOSTER WILLIAM F Symbol				Iname	Name and Ticker or Trading				Issuer			
	•	SPARTAN MOTORS INC [SPAR] 3. Date of Earliest Transaction										
(1+)							(Check all applicable)					
(Last)	(First)	(Middle)				insaction			X Director	100	Owner	
C/O SPART	AN MOTORS.		-	Month/Day/Year))3/30/2011					X_ Officer (give	title 10% Owner		
	REYNOLDS R		05/50/20)11					below)	below)		
		21								ce President		
(Street) 4.]				If Amendment, Date Original					6. Individual or Joint/Group Filing(Check			
Filed(Month/Day/Year)							Applicable Line) _X_ Form filed by One Reporting Person					
CUADIOT	TE,, MI 48813								Form filed by M			
CHARLOI	1L,, WII 40015								Person			
(City)	(State)	(Zip)	Table	e I - No	n-De	erivative S	becurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Da	ate 2A. Dee	emed	3.		4. Securi	ties Ac	quired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Yea	r) Execution any	Execution Date, if Transaction(A) or Disposed of					Securities	Form: Direct Indirect			
(Instr. 3)		Code (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					5)	Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership		
		(INIOIIIII)	Day/ I cal)	(msu.	0)	(msu. 5,	+ anu .	,,	Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported			
							or		Transaction(s)			
				Code	V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	03/30/2011			G	V	36,054	D	\$ 0 (1)	1,464,562	D		

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

Persons who respond to the collection of 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
 (e.g., puts, calls, warrants, options, convertible securities)

Reporting Owners

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address		Rela	tionships		
	Director	10% Owner	Officer	Other	
FOSTER WILLIAM F C/O SPARTAN MOTORS, INC. 1541 REYNOLDS RD. CHARLOTTE,, MI 48813	Х		Vice Presi	dent	
Signatures					
/s/ Kimberly Baber, as Attorney in Foster	04/07/2011				
<u>**</u> Signature of Reporting	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) Shares given as a gift for no consideration.

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.