## Edgar Filing: SpartanNash Co - Form 4

SpartanNash	n Co											
Form 4												
March 08, 2	016											
FORM									OMB AF	PROVAL		
	UNITED		URITIES A				NGE C	OMMISSION	OMB Number:	3235-0287		
Check th		•	, asimigron	, -						January 31,		
	if no longer STATEMENT OF CHAN				GES IN BENEFICIAL OWNER				Expires:	2005		
subject t Section					SECURITIES				Estimated average burden hours per			
Form 4 of									response 0.5			
Form 5	Filed pure	suant to Section	n 16(a) of th	ne	Securiti	es Ex	change	e Act of 1934,				
obligatic may con			•		•	- ·		1935 or Section	1			
See Instr		30(h) of the	Investment	t C	Company	y Act	of 1940	0				
1(b).												
(Print or Type	Responses)											
(I mit of Type	100p01000)											
1. Name and A	Address of Reporting l	Person <u>*</u> 2. Is	suer Name and	Гb	Ficker or '	Гradin	g	5. Relationship of	Reporting Pers	on(s) to		
ADORNAT	bl					Issuer						
	rtanNash Co [SPTN]					(Check all applicable)						
(Last)	(First) (M	(iddle) 3. Dat	e of Earliest T	rar	nsaction			(Check		)		
	nth/Day/Year)				Director		Owner					
C/O 850 - 7	07/2016					XOfficer (give title Other (specify below) below)						
								· · · · · · · · · · · · · · · · · · ·	P. Retail Operat	ions		
	(Street)	4. If A	mendment, Date Original				6. Individual or Joint/Group Filing(Check					
			(Month/Day/Year)					Applicable Line)				
								_X_ Form filed by O Form filed by M				
GRAND R.	APIDS, MI 49518							Person		porting		
(City)	(State)	(Zip) T	able I - Non-I	De	rivative S	Securi	ties Acqu	iired, Disposed of,	or Beneficiall	y Owned		
1.Title of	2. Transaction Date	2A. Deemed	3.	4	4. Securiti	es Ac	quired	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Execution Date,						Securities	Ownership	Indirect		
(Instr. 3)		any (Month/Day/Yea	Code (Instr. 3, 4 and 5) /Day/Year) (Instr. 8)				)	Beneficially Owned	Form: Direct (D) or	Beneficial Ownership		
		(infolial) Duy, i c	a) (1150.0)					Following	Indirect (I)	(Instr. 4)		
						(A)		Reported	(Instr. 4)			
						or		Transaction(s) (Instr. 3 and 4)				
C			Code V		Amount	(D)	Price	(insu: 5 und 1)				
Common Stock (1)	03/07/2016		S	]	13,300	D	\$ 28.16	64,281	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)

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
ADORNATO THEODORE C/O 850 - 76TH STREET SW GRAND RAPIDS, MI 49518			Exec. V. P. Retail Operations					
Signatures								
/s/ Daniel C. Persinger, By Powe Attorney	er of	03/08/2016						
**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).

Represents the aggregate number of shares sold at a weighted average price of \$28.16 The actual sales prices ranged from \$27.97 to

(1) \$28.33. Details regarding aggregated sales transactions will be provided upon request by the Commission staff, the issuer, or a security holder of the issuer.

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.