FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Rooke Andrew M					SPARTAN MOTORS INC [ SPAR ]  3. Date of Earliest Transaction (Month/Day/Year)										neck all ap	plicable)		Owner
(Last)	,	(First) (Middle)						03/30/2016									Other (specify below)	
C/O SPARTAN MOTORS INC. 1541 REYNOLDS ROAD					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Lir	ie)		p Filing (Chec	
(Street)	OTTE M	I 4	8813													n filed by Moi	e Reporting P re than One F	
(City)	(St	ate) (Z	Zip)															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired Disposed Of (D) (Instr. and 5)					Secui	ficially d	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount		A) or D)	Price	Repo Trans		(111341. 4)	(111341. 4)	
Common	2016		A		11,91	7	A	\$(	) 3	5,917	D							
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Executi if any			tion istr.	1.		6. Date Exercisable an Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Security (Inst. 3 and 4)			8. Price of Derivative Security (Instr. 5)	Beneficially	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title	Amo or Num of Shar	ber				

Explanation of Responses:

/s/ Kimberly Baber, as

Attorney-in-Fact for Andrew 04/04/2016

M. Rooke

\*\* Signature of Reporting Person Date

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

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.