Dar Arif Form 3 January 11, 2019 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-0104

INITIAL STATEMENT OF 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 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> Dar Arif			2. Date of Event Requiring Statement(Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol SpartanNash Co [SPTN]			
(Last)	(First)	(Middle)	01/02/2019		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)	
850 76TH ST	FREET SW	/, PO						
BOX 8700				(Check	x all applicable)			
GRAND RA	^(Street) ND RAPIDS, MI 49518					owner ow)	 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)	(State)	(Zip)	Table I	Non-Deriva	tive Securiti	es Ber	neficially Owned	
1.Title of Secur (Instr. 4)	ity		2. Amoun Beneficial (Instr. 4)	t of Securities ly Owned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nati Owner (Instr.	•	
Common Sto	ock		0		D	Â		
Reminder: Repo		ate line for ea	ch class of securities bene	ficially	SEC 1473 (7-02)		
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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	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)
		(IIISU. 4)			
		Title	Derivative	Security:	
			Security	Direct (D)	

January 31,

2005

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Expires:

response...

Estimated average burden hours per

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships					
1	Director	10% Owner	Officer	Other		
Dar Arif 850 76TH STREET SW PO BOX 8700 GRAND RAPIDS, MI 49518	Â	Â	SVP, Chief Information Officer	Â		
Signatures						
/s/ Daniel C. Persinger, By Power of Attorney		01/11/2019				
**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.