

NICKELS ELIZABETH A
 Form 4
 May 12, 2006

FORM 4

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 Washington, D.C. 20549**

OMB APPROVAL

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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 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
 NICKELS ELIZABETH A

(Last) (First) (Middle)

C/O 850 - 76TH STREET SW

(Street)

GRAND RAPIDS, MI 49518

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
 SPARTAN STORES INC [SPTN]

3. Date of Earliest Transaction
 (Month/Day/Year)
 02/16/2005

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer (give title below) Other (specify below)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)
Common Stock	05/10/2006		A	(A) or (D) Price 1,460 (1) A \$ 0	13,555	D	

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

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SEC 1474
 (9-02)

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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Security (Instr. 3 and 4)	Amount of Underlying Security
Phantom Stock	(2)	02/16/2005		A	410.923	(2) (2)	Common Stock	41
Phantom Stock	(2)	05/11/2005		A	358.073	(2) (2)	Common Stock	35
Phantom Stock	(2)	08/09/2005		A	418.455	(2) (2)	Common Stock	41
Phantom Stock	(2)	11/08/2005		A	451.313	(2) (2)	Common Stock	45
Phantom Stock	(2)	12/20/2005		D	1,638.764	(2) (2)	Common Stock	1,638

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
NICKELS ELIZABETH A C/O 850 - 76TH STREET SW GRAND RAPIDS, MI 49518			X	

Signatures

/s/ Daniel C. Persinger, by Power of Attorney 05/12/2006

**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).

This Form 4 reports the grant of 1,460 shares of restricted stock under the Spartan Stores, Inc. 2001 Stock Incentive Plan ("Plan"). These (1) shares will vest at the rate of one-third per year beginning on May 10, 2007, and will be fully vested on May 10, 2009. Prior to vesting, these shares will remain subject to restrictions in accordance with the Plan and the terms of the grant.

This Form 4 reports shares of phantom stock credited to Ms. Nickels for deferred Director fees pursuant to the Spartan Stores, Inc. Supplemental Savings Plan for Directors (the "Plan"). Shares under the Plan are issued on a one-for-one basis according to the amount of (2) fees deferred and the price of Spartan Stores, Inc. common stock on the date of the deferral. On December 20, 2005, the Company terminated the Plan. All shares of phantom stock credited to Ms. Nickels were subsequently paid in cash.

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.