FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
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

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

Name and Address of Reporting Person* Reilly John B. III					2. Issuer Name and Ticker or Trading Symbol CrossAmerica Partners LP [CAPL]									S. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner					
(Last)	(First)	(Mi		3. Date of Earliest Transaction (Month/Day/Year) 07/25/2023								^	Officer (give titl	itle below)	-		ecify below)		
645 HAMILTON STREET, SUITE 600					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individ						
(Street)	•													Form filed by More than One Reporting Person					
ALLENTOWN	PA	18	101	F	Rule 10b5-1(c) Transaction Indication														
(City)	(State)	(Zi _l	o)	_ [Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(e). See Instruction 10.														
			Table I -	Non-De	erivativ	e Securi	ties Acc	uired, D	ispo	sed of	, or Be	neficially	Owned						
Di				Date	2. Transaction Date (Month/Day/Year)		on Date,	3. Transaction Code (Instr. 8) 4. Securiti				ired (A) or Di 5)	sposed Of	5. Amount of Ser Beneficially Owr Following Repor	ned Direct		ership Form: (D) or t (I) (Instr. 4)	7. Nature of Indirect Beneficial	
						(Month/i	Day/Year)	Code	/	Amount		(A) or (D)	Price	Transaction(s) (I and 4)	nstr. 3			Ownership (Instr. 4)	
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	e (Month/Day/Year)	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 S Underlying Derivative S 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisal		xpiration ate	Title		Amount or Number of Shares	or Repor		ď tion(s)	,111301. 4)		
Phantom Units ⁽¹⁾	(1)	07/25/2023		A		3,249 ⁽¹⁾		(2)		(2) Common Units		3,249	\$0	26,799		D			

Explanation of Responses:

- 1. Each phantom unit is the economic equivalent of one common unit ("Common Unit") representing a limited partner interest in CrossAmerica Partners LP, and is accompanied by tandem distribution equivalent rights that entitle the holder to cash payments equal to the amount of distributions authorized to be paid to the holders of Common Units.
- 2. The phantom units will vest in one annual installment on the first anniversary of the grant date, provided the reporting person was in continuous service as a director to the Issuer as of the vesting date, and when vested will be converted into either cash or common units, at the discretion of the Issuer.

Remarks:

/s/ Christina Casey-Best as Attorney in 07/26/2023 Fact for John B. Reilly, III

** 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.

POWER OF ATTORNEY

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KNOW ALL BY THESE PRESENTS, that the undersigned hereby appoints Christina Casey-Best and Keenan D. Lynch, as the undersigned's true an 1. prepare, execute and file, for and on behalf of the undersigned any and all documents and filings that are required or advisable to be made 2. take any other action of any type whatsoever in connection with the foregoing which, in the opinion of such attorney-in-fact, may be of ben The undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing what All prior Powers of Attorney are hereby revoked. This Power of Attorney shall remain in full force and effect until revoked by the und This Power of Attorney shall be governed by and construed in accordance with the laws of the Commonwealth of Pennsylvania, without givi IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 22nd day of October 2020.

/s/ John B. Reilly