FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 OMB Number: 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).

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* Kim Mickey. | | | | | | 2. Issuer Name and Ticker or Trading Symbol CrossAmerica Partners LP [CAPL] | | | | | | | | | | elationship eck all appli | cable) | g Pers | son(s) to Iss | |
|--|---|--|--|-------|-------|--|---|-------|---------------|---|---|---|---|---------------|---|---|--|----------------|--|---------------------------------------|
| (Last) | (First) (Middle) | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/25/2024 | | | | | | | | | | Officer | Officer (give title below) | | Other (s below) | · |
| 645 HAMILTON ST., SUITE 400 | | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) | treet) ILLENTOWN PA 18101 | | | | | | | | | | | | | | | | iled by Mor | | orting Person | - 1 |
| (City) (State) (Zip) | | | | | Rı | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | | |
| | | | | | | 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(c). See Instruction 10. | | | | | | | | | | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/D | | | | | | ar) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | , Ti | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | Benefici Owned I | es ally Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | С | Code | / | Amount | (| (A) or (D) | Price | Reporte Transac (Instr. 3 | tion(s) | | | (Instr. 4) |
| Common Units 07/25 | | | | | 5/202 | /2024 | | | | M | | 3,249 | 9 | A | (1) | 27 | ,425 | | 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 | 3. Transaction Date (Month/Day/Year) | 3A. Deeme Execution if any (Month/Day | Date, | | ransaction code (Instr. | | of | | 5. Date Exercisable a Expiration Date Month/Day/Year) | | | nd 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exerc | e rcisable | | kpiration ate | Title | O N O | lumber | | | | | |
| Phantom Units | (2) | 07/25/2024 | | | M | | | 3,249 | | (2) | Γ | (2) | Comn Uni | | 3,249 | (1) | 3,419 |) | D | |

Explanation of Responses:

- 1. Each phantom unit was the economic equivalent of one common unit ("Common Unit") representing a limited partner interest in CrossAmerica Partners LP (the "Issuer"). The reporting person acquired Common Units upon vesting of the phantom units.
- 2. Phantom units vested on July 25, 2024 and were converted into Common Units at the discretion of the Issuer.

Remarks:

/s/ Christina Casey-Best as Attorney-in-Fact for Mickey

Kim

** Signature of Reporting Person Date

07/25/2024

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.