FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
hours por rosponso.	0.5						

_	Check this box if no longer subject to Section 16.
	Form 4 or Form 5 obligations may continue. See
$\overline{}$	Instruction 1/h)

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'     Nifong Charles M Jr.					2. Issuer Name and Ticker or Trading Symbol CrossAmerica Partners LP [ CAPL ]								(Check a	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
													X	Director					
(Last)	(First)	(Mi	ddle)	2	2 Date of Fadinat Transaction (Month/Day/Mass)							X		officer (give title below)			ecify below)		
645 HAMILTON ST., SUITE 400					3. Date of Earliest Transaction (Month/Day/Year) 03/11/2022								1	Presiden	nt and C	CEO			
(Street)				4	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individ	6. Individual or Joint/Group Filing (Check Applicable Line)							
ALLENTOWN	PA	18	101									X	Form filed by One Reporting Person						
											Form filed by	More than	n One R	eporting Pers	on				
(City)	(State)	(Zip	))																
			Table I -	Non-D	erivativ	e Securi	ties Acc	quired,	Disp	osed of	, or Be	neficially	Owned						
and the county (mound)			Date	Transaction ate Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) or Dispos (D) (Instr. 3, 4 and 5)			sposed Of	Beneficially Ow Following Repo		ned Direct (D rted Indirect		7. Nature of Indirect Beneficial					
							Day/Year)	Code	v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				Ownership (Instr. 4)	
Common Units				03/	/11/2022	2		J		7,972		A	(1)	24,369		D			
Common Units				03/	/11/2022	T		F		2,293(2)		D	\$20.29(3)	22,076			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	ise (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	4. Trans Code (In		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Yea		Underlying Derivativ			8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securiti Benefici Owned	ve es ially	Ownership Form: Direct (D) or Indirect (I)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
	Security			Code	v	(A)	(D)	Date Exercisa		Expiration Date Title		Title Am Nui Sha			Followir Reporte Transac (Instr. 4)	orted saction(s)			

- $1. \ Fully \ vested \ common \ units \ acquired \ through \ the \ 2021 \ Performance-Based \ Bonus \ Compensation \ Policy.$
- Common units withheld in payment of the reporting person's tax withholding.
- 3. The closing price of Issuer's common units on the trading day prior to the applicable date.

## Remarks:

/s/ Christina Casey-Best as Attorney in Fact for Charles M. Nifong, Jr. 03/15/2022

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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

KNOW ALL BY THESE PRESENTS, that the undersigned hereby appoints Christina Casey-Best and Keenan D. Lynch, as the undersigned's true and 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 bem 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 undown This Power of Attorney shall be governed by and construed in accordance with the laws of the Commonwealth of Pennsylvania, without giving IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 22nd day of October 2020.

/s/ Charles M. Nifong, Jr.