FORM 3

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

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL OMB Number 3235-0104 Estimated average burden

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940										sponse:	0.5
1. Name and Address o Bergeron Jerem	2. Date of Event Re (Month/Day/Year) 03/26/2015	quiring State	nent	3. Issuer Name <b>and</b> Ticker or Trading Symbol CrossAmerica Partners LP [ CAPL ]							
(Last) (First) (Middle) 645 W HAMILTON STREET, SUITE 500						4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director	10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)		
(Street) ALLENTOWN						X Officer (give title below) President	Other (specify below)		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 - N	on-D	erivative Securities Beneficially Owned					
1. Title of Security (Instr. 4)						3. Ownership Form: Direct 4. (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Table II - Derivative Securities Beneficially Owned           (e.g., puts, calls, warrants, options, convertible securities)											
Expirati				. Date Exercisable and Expiration Date Month/Day/Year)		3. Title and Amount of Securities Underlying Deriv (Instr. 4)	ative Security	4. Conversion Exercise Price of Derivative Security	rice Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exerc	sable Date	ration	Title	Amount or Number of Shares	Security			

Explanation of Responses: Remarks:

No securities are beneficially owned.

ier, Attorney in Fact for Jeremy 03/30/2015 Gerard J. Son

**Bergeron** \*\* 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 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. 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.

KNOW ALL BY THESE PRESENTS, that the undersigned hereby appoints each of Gerard J. Sonnier and Giovanna Rueda, as the undersigned's true and lawful attorney-in-fact 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 with the United S 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 benefit to, in the be the undersigned hereby grants to each such attorney-in-fact full power and authority to do and perform any and every act and thing whatsoever requisite, necessary, ( All prior Powers of Attorney are hereby revoked. This Power of Attorney shall remain in full force and effect until revoked by the undersigned in a signed writing ( This Power of Attorney shall be governed by and construed in accordance with the laws of the State of Texas, without giving effect to any principles of conflicts of IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed as of this 26th day of March, 2015.