FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

heck this box if no longer subject to
ection 16. Form 4 or Form 5
bligations may continue. See
otrustion 1/h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

1. Name and Address of Reporting Person* <u>Topper Joseph V. Jr.</u>						2. Issuer Name and Ticker or Trading Symbol CrossAmerica Partners LP [CAPL]									Relationship leck all appli X Directo	cable)	g Per	()		
(Last)	(F	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 03/15/2016									Officer below)	(give title		Other (below)	specify	
515 WES	ST HAMIL	TON ST., SUITE	E 200		\vdash															
-							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)	TOWN PA	Λ :	18101											- 1	,	filed by One	e Rep	orting Perso	on	
ALLEN.	IOWN PA	- 1 .	10101		.											Form filed by More than One Reporting Person				
(City)	(S	itate)	(Zip)												F 6130	11				
		Tab	le I - Nor	n-Deriv	ative	Sec	uriti	ies Ac	quired,	Dis	posed (of, or	Ben	eficial	ly Owne	t				
Date					ay/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				Benefic	es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price	Transac (Instr. 3	ction(s)			(3 4)	
Common Units 03/15.				5/2016	2016		М		3,742	2 ⁽¹⁾⁽²⁾ A		(3)	159	159,334		D				
		Т	able II - I								osed of converti				Owned					
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)		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisal		Expiration Date	Title	O N O	umber	ber					
Profits Interests	\$0.0	03/15/2016			М			3,742	(3)		(3)	Comn		3,742	\$0	1,928		D		

Explanation of Responses:

- 1. The Reporting Person acquired the reported securities as a result of the redemption by the Issuer of certain class B units ("Class B Units") in LGP Operations LLC ("LGP Operations"), a wholly owned subsidiary of the Issuer, owned by the Reporting Person. Each Class B Unit represents a profit interest in LGP Operations (the "Profit Interests"). The vested Profits Interests owned by the Reporting Person became eligible for redemption on March 15, 2016, pursuant to the award agreement related to the Profit Interests.
- 2. As provided in the Amended and Restated Operating Agreement of LGP Operations LLC, dated March 4, 2014, as amended, prior to redemption, the Issuer elected to redeem the vested Profits Interests in exchange for common units of the Issuer on a one-to-one basis.
- 3. On March 14,2014, 5,670 Profits Interests were issued to the Reporting Person under the Lehigh Gas Partners 2012 Long Term Incentive Plan with vesting in three equal annual installments beginning on March 15, 2015.

Remarks:

/s/ Hamlet T. Newsom, Jr., as 03/16/2016 Attorney-in-Fact for Joseph V. Topper, Jr.

** 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.