SEC Form 3 FORM 3

# UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

## OMB APPROVAL

3235-OMB Number: 0104

0.5

#### **INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF** Estimated average burden

hours per response:

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

**SECURITIES** 

1. Name and Address of Reporting Person <sup>*</sup> <u>2008 IRREVOCABLE</u> <u>AGREEMENT OF TRUST</u>	2. Date of E Requiring S (Month/Day 06/11/202	Statement //Year)	3. Issuer Name <b>and</b> Ticker or Trading Symbol <u>CrossAmerica Partners LP</u> [ CAPL ]					
OF JOHN B REILLY JR (Last) (First) (Middle) 1577 SAUCON VALLEY ROAD (Street) BETHLEHEM PA 18105 (City) (State) (Zip)			4. Relationship of Reporting Issuer (Check all applicable) Director Officer (give title below)	✓ 10% C	)wner (specify	File 6. II	d (Month/Day, ndividual or Jo eck Applicable Form filed Person	int/Group Filing e Line) by One Reporting by More than One
Table I - Non-Derivative Securities Beneficially Owned								
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Units			4,964,611	I	D			
Table II - Derivative Securities Beneficially Owned(e.g., puts, calls, warrants, options, convertible securities)								
1. Title of Derivative Security (Instr. 4) Expiration Date (Month/Day/Year)		ate	I 3. Title and Amount of Secur Underlying Derivative Securi (Instr. 4)		urity Convers or Exerc		ise Form:	6. Nature of Indirect Beneficial Ownership (Instr.
	Date Exercisable	Expiration Date	n Title	Amount Derivativ or Security Number of Shares		ive	Direct (D) or Indirect (I) (Instr. 5)	5)

**Explanation of Responses:** 

### **Remarks:**

### /s/ 2008 IRREVOCABLE AGREEMENT OF TRUST OF JOHN B **REILLY JR** \*\* Signature of Reporting

Person

06/15/2021

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.