#### LENHARDT DAVID K

Form 4

September 25, 2018

### FORM 4

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

OMB Number:

3235-0287

0.5

Check this box if no longer subject to

Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

January 31, Expires: 2005

**OMB APPROVAL** 

Estimated average

response...

burden hours per

Form 4 or Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * LENHARDT DAVID K			2. Issuer Name and Ticker or Trading Symbol CASEYS GENERAL STORES INC [CASY]				C	5. Relationship of Reporting Person(s) to Issuer  (Check all applicable)			
(Last) 5320 EAST	(First) (PALO VERDE	Middle)  DRIVE	3. Date of (Month/Date 09/21/20	•	nsaction			X Director 10% Owner Officer (give title below) Other (specify below)			
				4. If Amendment, Date Original Filed(Month/Day/Year)				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 - Non-Do	erivative S	Securi	ties Ac	quired, Disposed	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	) Execution		3. Transactic Code (Instr. 8)	4. Securi	ties l (A) o l of (D	or ))	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	09/21/2018			M	554	A	\$0	2,854	D		

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

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

#### Edgar Filing: LENHARDT DAVID K - Form 4

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. Transactic Code (Instr. 8)	5. Number 6. Date Exercise Expiration Date (Month/Day/Ye Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	(Instr. 3 and 4)		8. Price Derivat Securit (Instr. 5
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Restricted stock units (1)	(2)	09/21/2018		M	554	. (1)	<u>(1)</u>	Common Stock	554	\$ 0
Restricted stock units (3)	(2)					(3)	(3)	Common Stock	998	

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
• 9	Director	10% Owner	Officer	Other		
LENHARDT DAVID K 5320 EAST PALO VERDE DRIVE PARADISE VALLEY, AZ 85253	X					

# **Signatures**

Scott Faber, under Power of Attorney dated March 6, 2018 09/25/2018

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

- \* 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).
- (1) Non-employee director equity compensation pursuant to terms and conditions of 2009 Stock Incentive Plan. This award vested in full on September 21, 2018.
- (2) Each restricted stock unit represents the right to receive, following vesting, one share of Common Stock.
- (3) Non-employee director equity compensation pursuant to terms and conditions of 2018 Stock Incentive Plan. This award will vest in full on the date of Casey's 2019 annual shareholders' meeting.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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