#### CASEYS GENERAL STORES INC

Form 4

September 22, 2014

FORM 4				OMB APP	'ROVAL
1 Ortivi 4	UNITED STATES	S SECURITIES AND EXCHANGE ( Washington, D.C. 20549	COMMISSION	OMB Number:	3235-0287
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations	Filed pursuant to	F CHANGES IN BENEFICIAL OW SECURITIES  Section 16(a) of the Securities Exchange	ge Act of 1934,	Estimated ave burden hours response	
may continue. See Instruction 1(b).	` '	Public Utility Holding Company Act of of the Investment Company Act of 194		l	
(Print or Type Respon	ises)				
1. Name and Address HAYNIE KENN	s of Reporting Person * ETH H	2. Issuer Name <b>and</b> Ticker or Trading Symbol	5. Relationship of I Issuer	Reporting Person	n(s) to
		CASEYS GENERAL STORES INC [CASY]	(Check	all applicable)	

(Last)	(First)	(Middle)	3. Date of Earliest Transaction	X Director 10% Owner
100 COURT	AVENUE,	, SUITE 600	(Month/Day/Year) 09/19/2014	Officer (give title Other (specify below)
	(Street)		4. If Amendment, Date Original	6. Individual or Joint/Group Filing(Check
			Filed(Month/Day/Year)	Applicable Line)

\_X\_ Form filed by One Reporting Person
DES MOINES, IA 50309

\_\_Form filed by More than One Reporting
Person
Person

(City)	(State)	Zip) Table	e I - Non-D	erivative S	Securi	ities Ac	equired, Disposed	l of, or Benefici	ally Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transactio	4. SecuritonAcquired Disposed	(A) o		5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3,	`	_	Owned Following Reported Transaction(s)	Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common	09/19/2014		Code V A	Amount 1,500	(D)	Price \$ 0	(Instr. 3 and 4) 31,262	D (2)	

Stock

A
(3)
A
(3)
A
(3)

trustee with

voting and

1,000
I

Stock 1,000 I dispositive power

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

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 control number.

SEC 1474

(9-02)

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# $\label{thm:convertible} \begin{tabular}{ll} Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned \\ (e.g., puts, calls, warrants, options, convertible securities) \end{tabular}$

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. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		te	7. Title and A Underlying S (Instr. 3 and	Securities	8. Prio Deriv Secur (Instr.
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Option - right to buy (1)	\$ 17.64					05/01/2005	05/01/2015	Common Stock	2,000	
Option - right to buy (1)	\$ 22.36					05/01/2006	05/01/2016	Common Stock	2,000	
Option - right to buy (1)	\$ 26.51					05/01/2008	05/01/2018	Common Stock	2,000	
Option - right to buy (1)	\$ 25.49					05/01/2009	05/01/2019	Common Stock	2,000	

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
HAYNIE KENNETH H 100 COURT AVENUE SUITE 600 DES MOINES, IA 50309	X						

# **Signatures**

William J. Noth, under power of attorney dated 9/2/02	09/22/2014	
**Signature of Reporting Person	Date	

Reporting Owners 2

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### **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) Pursuant to terms of 2009 Stock Incentive Plan.
- (2) Includes shares held individually and as trustee of family trusts, under which Mr. Haynie exercises sole voting and dispositive power and is a contingent beneficiary.
- (3) Consisting of shares awarded under 2009 Stock Incentive Plan as part of director compensation for FY15.

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.