

Jackowski Julia L
 Form 4
 June 27, 2011

FORM 4

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

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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

(Print or Type Responses)

1. Name and Address of Reporting Person *
 Jackowski Julia L

2. Issuer Name and Ticker or Trading Symbol
 CASEYS GENERAL STORES INC
 [CASY]

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)

(Last) (First) (Middle)
 ONE CONVENIENCE BLVD., PO BOX 3001
 (Street)
 ANKENY, IA 50021
 (City) (State) (Zip)

3. Date of Earliest Transaction (Month/Day/Year)
 06/23/2011

____ Director _____ 10% Owner
 Officer (give title below) _____ Other (specify below)
 SVP, Corp Gen Counsel & HR

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 Form filed by One Reporting Person
 ___ Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)	Voting and tender rights under 401K plan (1)
				(A) or (D)	Price			
Common Stock					2,891	I		
Common Stock					6,500	D		
Restricted stock units (3)					628	D		

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

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(9-02)

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

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)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)		
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option - right to buy ⁽²⁾	\$ 14.08					06/06/2006	06/06/2013	Common Stock	2,500
Option - right to buy ⁽²⁾	\$ 20.68					07/05/2010	07/05/2015	Common Stock	10,000
Option - right to buy ⁽²⁾	\$ 26.92					06/25/2010	06/25/2017	Common Stock	10,000
Option - right to buy ⁽²⁾	\$ 25.26					06/23/2012	06/23/2019	Common Stock	12,500
Option - right to buy ⁽⁴⁾	\$ 44.39	06/23/2011	06/23/2011	A	20,000	06/23/2014	06/23/2021	Common Stock	20,000

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Jackowski Julia L ONE CONVENIENCE BLVD. PO BOX 3001 ANKENY, IA 50021			SVP, Corp Gen Counsel & HR	

Signatures

William J. Noth, under POA dated June 8,
2010

06/27/2011

__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) Allocated to Ms. Jackowski's 401k plan account as of April 30, 2011. Does not include any shares allocated by the plan trustee after that date.
- (2) Pursuant to terms and conditions of 2000 Stock Option Plan.
- (3) Pursuant to 2009 Stock Incentive Plan. This award, which vests in full on May 1, 2014, represents the equity component of the amount payable to Ms. Jackowski under the FY11 annual incentive plan.
- (4) Pursuant to terms and conditions of 2009 Stock Incentive Plan.

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.