#### Edgar Filing: CEDAR FAIR L P - Form 5

CEDAR FAIR I Form 5 February 17, 20	15								
FORM	5					PROVAL			
Check this box no longer subjuto to Section 16. Form 4 or Form 5 obligations	if ect	D STATES	OMB Number: Expires: Estimated a burden hour	0					
may continue.       See Instruction         1(b).       Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,         Form 3 Holdings Section 17(a) of the Public Utility Holding Company Act of 1935 or Section         Reported       30(h) of the Investment Company Act of 1940         Transactions       Reported         Reported       Section 17(a)									
1. Name and Address of Reporting Person <u>*</u> Scott John M III			2. Issuer Name <b>and</b> Ticker or Trading Symbol CEDAR FAIR L P [FUN]	f Reporting Person(s) to ck all applicable)					
(Last)	(First)	(Middle)	<ul><li>3. Statement for Issuer's Fiscal Year Ended</li><li>(Month/Day/Year)</li><li>12/31/2014</li></ul>	(Cneck Director Officer (give t below)	10%	) Owner r (specify			
ONE CEDAR	POINT DR			001010)	001010)				
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joi	nt/Group Repo	rting			

### SANDUSKY, OHÂ 44870

\_X\_ Form Filed by One Reporting Person \_\_\_\_ Form Filed by More than One Reporting Person

(City)	(State)	(Zip) 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. Securi Acquired Disposed (Instr. 3, Amount	l (A) o l of (D	)	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Units of Limited Partner Interest	Â	Â	Â	Â	Â	Â	8,260 <u>(1)</u>	D	Â	
Units of Limited Partner Interest	Â	Â	Â	Â	Â	Â	1,740 <u>(1)</u>	I	By self as custodian for children under UGMA.	

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

Persons who respond to the collection of informationSEC 2270contained in this form are not required to respond unless(9-02)the form displays a currently valid OMB control number.(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)	Derivative		rivative Expiration Date curities (Month/Day/Year) quired (A) Disposed (D) str. 3, 4,		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pr Deri Secu (Inst
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Phantom Units	Â	01/02/2014	Â	A4	2,397	Â	( <u>3)</u>	( <u>3)</u>	Units of Limited Partner Interest	2,397	\$ 5

# **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
1	Director	10% Owner	Officer	Other			
Scott John M III ONE CEDAR POINT DR SANDUSKY, OH 44870	ÂX	Â	Â	Â			
Signaturos							

# Signatures

John M. Scott III 02/18/2015 <sup>\*\*</sup>Signature of Date Reporting Person

## **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) Bona fide gift/tax-free transfer of 1,740 units, which is exempt from Section 16(b) liability.
- (2) Represents phantom units acquired by the reporting person (in an exempt transaction) as deferred compensation pursuant to the Partnership's 2008 Omnibus Incentive Plan. Each phantom unit is the economic equivalent of one limited partner unit in Cedar Fair, L.P.
- (3) These phantom units are payable in units or a combination of cash and units when the individual's service to the Partnership ends.

Note: File three copies of this Form, one of which must be manually signed. If space provided 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.