FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

1. Name and Address of Reporting Person*  Robinson Thomas D.						2. Issuer Name and Ticker or Trading Symbol CROSSFIRST BANKSHARES, INC. [ CFB									all application all applications all app	or (give title		10% Owner Other (specify below)		
(Last) 11440 TO	st) (First) (Middle) 140 TOMAHAWK CREEK PKWY							3. Date of Earliest Transaction (Month/Day/Year) 12/31/2019								Chief Risk Officer				
(Street)					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person					
LEAWOOD KS 66211  (City) (State) (Zip)					-										Form filed by More than One Reporting Person					
		Tal	ole I - No	n-Deri	vativ	e Se	curi	ties Ac	quired,	Dis	posed of	f, or B	eneficia	ılly (	Owned					
Dat					2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			1 and 5) Securitie Benefici Owned F		s illy ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	Price		Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)	
Common Stock 12/31						2019		М		6,750(1	) A	\$	)	6,750			D			
Common	Stock	12/31/2019 F 1,982 <sup>(2)</sup> D \$14.42 4,768 D																		
			Table II -								osed of, onvertib				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution I if any (Month/Day	Date,	Code (Instr				6. Date E Expiration (Month/I	on Dat			of es ing ve Securit	D S (I	. Price of erivative ecurity nstr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	e S Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amour or Number of Shares	er		(Instr. 4)	on(s)			
Restricted Stock Units	\$0.0 <sup>(3)</sup>	12/31/2019			М			6,750 <sup>(1)</sup>	12/31/20	019	12/31/2019	Commo Stock	6,750		\$0	0 <sup>(4)</sup>		D		

## **Explanation of Responses:**

- 1. Reflects the vesting of a prior restricted stock unit grant, which was previously reported on a Form 3.
- 2. These shares represent the number of shares of common stock withheld by the Company to satisfy tax withholding requirements in connection with the vesting of the restricted stock units.
- 3. Each restricted stock unit represents a contingent right to receive one share of common stock.

4. The reporting person is the holder of other Restricted Stock Units as follows: 5,454 restricted stock units that are scheduled to vest on December 31, 2020 and 3,354 restricted stock units that are scheduled to vest as follows: 1/3 of the units vest on February 28, 2020, 1/3 of the units vest on February 28, 2022. Mr. Robinson also has Stock Settled Appreciation Rights as previously reported on a Form 3.

## Remarks:

/s/ Aisha Reynolds, Attorney-

in-Fact for Thomas D.

01/03/2020

Robinson

\*\* Signature of Reporting Person

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 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).

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.