## FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT	OF CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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*  Kuykendall James W.  (Last) (First) (Middle)  11440 TOMAHAWK CREEK PKWY  (Street)  LEAWOOD KS 66211						2. Issuer Name and Ticker or Trading Symbol CROSSFIRST BANKSHARES, INC. [ CFB ]  3. Date of Earliest Transaction (Month/Day/Year) 01/01/2020  4. If Amendment, Date of Original Filed (Month/Day/Year)									S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner Officer (give title below)      6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person Form filed by More than One Reporting					Owner (specify ) Applicable
(City)	(St	ate) (	Zip)			Person														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date			2. Transa Date (Month/D	Day/Year)   Ex		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)			(A) or . 3, 4 a	and Securit		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A (I	A) or D)	Price	Transa		ction(s) and 4)			(111341. 4)
Common Stock			01/01	/2020				A		1,504(1	) A \$		\$(	)	29,048			D		
Common Stock														253,706			I	See Footnote <sup>(2)</sup>		
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)	rivative curity or Exercise (Month/Day/Year) Execution Date, if any (Month/Day/Year) Price of Derivative Security		4. Transa Code ( 8)	nstr.	Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of		nstr. 3	nt er		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **Explanation of Responses:**

1. Restricted stock grant, made pursuant to the CrossFirst Director Compensation Program, and which will vest on December 31, 2021. CrossFirst allowed each director to indicate his or her preference to receive compensation for the period from January 1, 2020-May 12, 2020 (the date of our Annual Meeting) in the form of 100% restricted stock or 50% restricted stock and 50% cash. The reporting person indicated a preference to receive compensation in the form of 100% restricted stock.

2. Consists of (i) 183,706 shares held by Equipment World, Inc., a company owned by Mr. Kuykendall and as to which shares Mr. Kuykendall has sole voting and dispositive power, and (ii) 70,000 shares held by Signature Leasing, LLC of which Mr. Kuykendall is a manager and to which shares Mr. Kuykendall has shared voting and dispositive power.

## Remarks:

/s/ Aisha Reynolds, Attorneyin-Fact for James W.

01/06/2020

Date

**Kuykendall** 

\*\* Signature of Reporting Person

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.