Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP
to Section 16. Form 4 or Form 5		
obligations may continue. See		

OMB APPROVAL 3235-0287 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* Robinson Michael Kent					2. Issuer Name and Ticker or Trading Symbol CROSSFIRST BANKSHARES, INC. [CFB]									k all app Direc	tionship of Reportir all applicable) Director		10% O	wner	
(Last) (First) (Middle) 11440 TOMAHAWK CREEK PKWY					3. Date of Earliest Transaction (Month/Day/Year) 01/06/2021										Officer (give title below)		Other (below)	specify	
(Street) LEAWO (City)	LEAWOOD KS 66211				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	· '				
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benef	icially	/ Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date				Execution		on Date, Transaction Code (Instr.			4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and Securit		ies cially Following	Forn (D) c	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	or Pri	ce	Transa	ction(s) 3 and 4)			(111501.4)
Common Stock 01/0			01/06/2	2021				S ⁽¹⁾	s ⁽¹⁾ 1,000		D	\$1	11.06	124,105			D		
		Tal									osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Executi if any	Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		vative rrities rrosed) r. 3, 4 5)	6. Date Exerc Expiration Da (Month/Day/Y		ate Amount of		nt er		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

1. This transaction was made pursuant to a 10b-5(1) plan.

Remarks:

/s/ Aisha Reynolds, Attorney-

in-Fact for Michael Kent

Robinson

01/06/2021

** 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.