SEC Form 4
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## FORM 4

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

OMB APPROVAL

OMB Number: 3235-028										
Estimated average burden										
hours per response	: 0.5									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	STATEN	Filed pursuant to Section 16(a) of the Securities Exchange A	Es	OMB Number: 3235 Estimated average burden hours per response:			
		or Section 30(h) of the Investment Company Act of 19					
1. Name and Address of Reporting F	Person*	2. Issuer Name and Ticker or Trading Symbol CROSSFIRST BANKSHARES, INC			ationship of Repo ( all applicable)	Reporting Person(s) to Issuer ble)	
<u>O'Toole David L.</u>		CFB ]	<u>~</u> [	Х	Director	1	10% Owner
				Х	Officer (give ti below)		Other (speci below)
(Last) (First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year)			CEO & Chief		, ,

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

			CFB ]						C Officer (give tit	le Oth	₀ Owner er (specify		
(Last) (First) (Middle) 11440 TOMAHAWK CREEK PKWY				3. Date of Earliest Tran 03/31/2021	saction	(Mont	h/Day/Year)		below) CFO & Chief	belo Investment C	,		
(Street)				4. If Amendment, Date	of Origi	nal Fil	ed (Month/Da		6. Individual or Joint/Group Filing (Check Applicable Line)				
LEAWOOD	KS	66211							2	Form filed by C	One Reporting P	Person	
, (City)	(State)	(Zip)								Form filed by N Person	Nore than One F	Reporting	
		Table I - No	on-Derivati	ve Securities Ac	quired	d, Di	sposed o	f, or Be	eneficial	ly Owned			
Date		2. Transaction Date (Month/Day/Ye	Execution Date,	Transaction Dispos Code (Instr. 5)		4. Securities Disposed O 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)	
Common Stock			03/31/202	1	<b>S</b> <sup>(1)</sup>		500	D	\$13.98	31,136 <sup>(2)</sup>	D		
Common Stock										163,800 <sup>(2)</sup>	I	See Footnote <sup>(3)</sup>	

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

			(* 571**	,	,		,					,			
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. Transa Code ( 8)		of		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

**Explanation of Responses:** 

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

2. Mr. O'Toole transferred 61 shares from his individual account to his trust account.

3. 159,550 shares are held by the David L O'Toole Revocable Trust Dated July 17, 2015 with respect to which shares Mr. O'Toole is primary trustee and with respect to which Mr. O'Toole has sole voting and investment power with respect to such shares. 4,250 shares are held by the Lisa A O'Toole Revocable Trust Dated July 17, 2015 with Ms. O'Toole as the primary trustee and to which Mr. O'Toole is a beneficiary.

## **Remarks:**

/s/ Aisha Reynolds, Attorney-04/01/2021

in-Fact for David O'Toole

\*\* 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.