FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person* 2. Issuer Name and Ticker or Trading Symbol 5. Relationship of Reporting Person* Roth Sally H 2. Issuer Name and Ticker or Trading Symbol CASS INFORMATION SYSTEMS INC [Check all applicable) 5. Relationship of Reporting Person* (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 5. Individual or Joint/Group Fill SUITE 550 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Fill X Form filed by One Report	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934									
Roth Sally H CASS INFORMATION SYSTEMS INC [CASS] (Check all applicable) X Director (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Officer (give title below) Officer (give title below) SUITE 550 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Fill Line) X Form filed by One Re Form filed by One Re Form filed by More the Person										
12444 POWERSCOURT DRIVE 3. Date of Earliest Transaction (Month/Day/Year) 09/22/2022 SUITE 550 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Fill (Street) ST. LOUIS MO 63131	CASS INFORMATION SYSTEMS INC [(Check all applicable) X Director 10% Owner Officer (give title Other (specify)									
(Street) ST. LOUIS MO 63131 Form filed by More the Person	. Date of Earliest Transaction (Month/Day/Year)									
	Line) X Form filed by One Reporting Person Form filed by More than One Reporting									

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)			4. Securities Disposed Of 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
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock	09/22/2022		Α		374	Α	\$34.75	5,906 ⁽¹⁾	D	

	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. Transa Code (8)				6. Date Exercisable and Expiration Date (Month/Day/Year)		d 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. Includes restricted stock bonus shares, subject to vesting and forfeiture.

Remarks:

/s/ Sally H. Roth

** Signature of Reporting Person Date

09/23/2022

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.