FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington.	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL							
OMB Number: 3235-0362							
Estimated average burden							
hours per response:	1.0						

Form 3 Holdings Reported.

X Form 4	Transactions R	eported.	File	ed pursuant to or Section					ities Excha ompany Ad								
1. Name and Address of Reporting Person* <u>COLLETT LAWRENCE A</u>			2. Issuer Name and Ticker or Trading Symbol CASS INFORMATION SYSTEMS INC CASS]							all app	nship of Reporting Person(applicable) Director			Issuer Owner			
(Last) (First) (Middle) 12444 POWERSCOURT DRIVE SUITE 550			3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2016						Year)		Office below	er (give title v)	9	Othe belo	er (specify w)		
(Street) ST. LOUI	S MC		3131 Zip)	4. If Amen	dment	, Date (of Orig	inal File	d (Month/I	Day/Yea		indiv Line) X	Form	i filed by O	ne Re	porting Pe	
		Table	e I - Non-Deriv	ative Sec	uritie	es Ac	quire	ed, Di	sposed	of, or	Benefici	ally	Owne	d			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)			or Disposed	Securit Benefic		ies Ov		ership n: Direct	7. Nature of Indirect Beneficial Ownership		
				(Month/Day/Teal)		U ,		Amoui	nt	(A) or (D)	Price		lssuer's			ect (I)	(Instr. 4)
Common Stock 1:			11/17/2016	G		4	3,	3,785 D \$		\$0.00	.00 119		9,540 ⁽¹⁾		D		
		Та	ble II - Derivat (e.g., p	ive Secur uts, calls,									wned				
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. Transaction Code (Instr. 8)	of Deriv	r osed) r. 3, 4	Expiration D (Month/Day/		h/Day/Year) Expiration		e and int of rities ritying ative rity (Instr. 3) Amount or Number of Shares	nt er				10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)

Explanation of Responses:

1. Includes restricted stock bonus shares, subject to vesting and forfeiture.

Remarks:

/s/ Lawrence A. Collett

01/27/2017

** 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.