FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFICIA	L OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-0287
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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-10).

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(0). 3	ee instruction i	0.																	
	nd Address of	Reporting Person*									Symbol YSTEM	S IN	СГ		Relationshi eck all app	p of Reportion	ng Pers	son(s) to Is	suer
WICK	SFKANK	<u>►</u>													Direct	ctor		10% Ov	vner
(Last)	(Fir	ret) (I	Middle)		CASS]								Offic belov	er (give title v)		Other (s	specify		
' '	`	,	viidule)		3. Date of Earliest Transaction (Month/Day/Year)									,		,			
12444 PO	JWERSCO	URT DRIVE			12/1	9/202	4												
SUITE 5	50				<u> </u>									-					
-					4. If A	Amend	ment,	Date o	f Origina	al File	d (Month/Da	y/Year	.)			r Joint/Grou	p Filing	g (Check A _l	pplicable
(Street)					1									Line	<u></u>	i filed by On	o Dono	ortina Doros	- I
ST. LOU	IS MO) 6	3131		1											,	•	Ü	
					1										Pers	n filed by Mo on	re tnan	one Repo	orting
(City)	(St	ate) (Ž	Zip)		1														
(Oity)	(0.0	(2	-'P)																
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	, Dis	posed of	, or E	3en	eficia	lly Own	ed			
1. Title of	Security (Inst	tr. 3)		2. Transac	tion							(A) or		ount of			7. Nature of Indirect Beneficial		
Date (Month/Da					v/Year)	Exec	ution Date,		Transaction Disposed (Of (D) (Instr. 3, 4		3, 4 and	Securi Benefi					
(monan)				`	(Month/Day/Year)			8)									Ownership (Instr. 4)		
								Code	v	Amount	(A) (D)	or	Price	Transa	Reported Transaction(s)			(Instr. 4)	
									Joue	Ľ	Amount	(D)		11100	(Instr.	r. 3 and 4)			
Common Stock 12/19/2					2024			A		307 A		1	\$42.2	6 28	28,787(1)		D		
		Tal	ـــــــــــــــــــــــــــــــــــــ	Derivati	vo Se	Curi	tios A	7 can	irad [Dien	osed of	or Re	nof	iciall	v Owne	d	·	·	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of	2.	3. Transaction	3A. Deemed		4.		5. Number		6. Date Exercisable and		7. Title and			8. Price of			10.	11. Nature	
Derivative Security	Conversion or Exercise	Date (Month/Day/Year)	Execution Date, if any		Transaction Code (Instr.								Amount of Securities		Derivative Security	derivative Securities		Ownership Form: Direct (D)	of Indirect Beneficial Ownership
(Instr. 3) Price of (Mont			/Day/Year)	8)		Securities		`			Unde	Underlying		(Instr. 5)	Beneficiall	у [
	Derivative Security		l				Acquired (A) or						Derivative Security (Instr. 3 and 4)			Owned Following Reported		or Indirect (I) (Instr. 4)	(Instr. 4)
	,		l					Disposed									- 1		
			l				of (D) (Instr. 3, 4								Transaction(s (Instr. 4)	n(s)	"		
							and 5)									<u> </u>			
														ount					
													or Nur	nber					
					Code V		(A) (D)		Date Exercisable		Expiration Date	of Title Sha							
					Coue		(A)	(0)	Exercis	aule	Date	Title	Jona	162					

Explanation of Responses:

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

Remarks:

/s/ Frank Wicks

12/20/2024

** 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.