

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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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  Pharr Brett L. <div> <div>(Last)</div> <div>(First)</div> <div>(Middle)</div> </div> C/O META FINANCIAL GROUP, INC.,, 5501 SOUTH BROADBAND LANE <div>(Street)</div> SIOUX FALLS, SD 57108 <div> <div>(City)</div> <div>(State)</div> <div>(Zip)</div> </div>	2. Issuer Name and Ticker or Trading Symbol META FINANCIAL GROUP INC [CASH] 3. Date of Earliest Transaction (MM/DD/YYYY) <div>12/14/2021</div>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <div> <div><input type="checkbox"/> Director</div> <div><input type="checkbox"/> 10% Owner</div> <div><input checked="" type="checkbox"/> Officer (give title below)</div> <div><input type="checkbox"/> Other (specify below)</div> </div> Chief Executive Officer
	4. If Amendment, Date Original Filed (MM/DD/YYYY)	6. Individual or Joint/Group Filing (Check Applicable Line) <div> <div><input checked="" type="checkbox"/> Form filed by One Reporting Person</div> <div><input type="checkbox"/> Form filed by More than One Reporting Person</div> </div>

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Trans. Date	2A. Deemed Execution Date, if any	3. Trans. Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Common Stock	12/14/2021		G	V	1343	D	\$0 (1)	45985	D	
Common Stock								614 (2)	I	By Meta ESOP

Table II - Derivative Securities 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. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date		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 of Derivative Security: 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) Bona fide gift by the Reporting Person to a 501(c)(3) charitable organization for no consideration.
- (2) Reflects allocation of shares and reinvestment of dividends pursuant to the Company's ESOP plan that have occurred since the date of the reporting person's last ownership report.

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Pharr Brett L. C/O META FINANCIAL GROUP, INC., 5501 SOUTH BROADBAND LANE SIOUX FALLS, SD 57108			Chief Executive Officer	

Signatures

Chance Huber, attorney-in-fact

12/15/2021

—**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 control number.