SEC Form 4
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Instruction 1(b).

## 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

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 <sup>*</sup> <u>Tietz Christopher G</u>			2. Issuer Name and Ticker or Trading Symbol <u>CapStar Financial Holdings, Inc.</u> [CSTR]		ationship of Reporting Per k all applicable) Director	10% Owner
(Last) 1201 DEMONI	(First) BREUN ST SUIT	(Middle) E 700	3. Date of Earliest Transaction (Month/Day/Year) 01/24/2024	X	Officer (give title below) Chief Credit Policy	Other (specify below) Officer/Sp
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indiv Line)	vidual or Joint/Group Filin	g (Check Applicable
(Street) NASHVILLE	TN	37203		X	Form filed by One Rep Form filed by More tha Person	Ū.
(City)	(State)	(Zip)	Rule 10b5-1(c) Transaction Indication			n that is intended to

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

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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)					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	01/24/2024 <sup>(1)</sup>		A		2,761 <sup>(2)</sup>	A	\$18.8	54,909	D	
Common Stock <sup>(3)</sup>								1,851	Ι	By 401(K) Plan

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

	(c.g., puis, cans, warants, 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)		of Deriv Secu Acqu (A) o Dispe	r osed ) r. 3, 4	Expiration Date (Month/Day/Year)		n Date Amount of ay/Year) Securities Underlying Derivative		Amount of Securities Security Underlying (Instr. 5) Derivative Security (Instr. 5)		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 is an inadvertent late filing due to an administrative error.

2. The reported item represents an award of restricted stock which vested in three equal annual installments beginning on December 31, 2024.

3. The reported item reflects the reporting person's interest in equivalent shares held by the unitized stock fund in the issuer's 401(k) plan ("Plan"). The unitized stock fund consists of approximately 95% of the issuer's common stock and approximately 5% cash or cash equivalents. The number of shares attributed to the reporting person as a Plan participant and expressed as equivalent shares has been calculated based on the \$17.75 closing price of the issuer's common stock as of January 18, 2023 and may change from time to time without the volition of the reporting person depending on the fair market value of the issuer's common stock and the amount of cash in the fund.

/s/ Michael J. Fowler, as
Attorney-in-Fact for
Christopher G. Tietz

02/23/2024

\*\* 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.